Equalities and Human Rights Committee
Comataidh Co-ionnanachd agus Còraichean Daonna

Hidden Lives - New Beginnings: Destitution, asylum and insecure immigration status in Scotland
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Hidden Lives - New Beginnings: Destitution, asylum and insecure immigration status in Scotland, 3rd Report (Session 5)

Equalities and Human Rights Committee

To consider and report on matters relating to equal opportunities and upon the observance of equal opportunities within the Parliament (and any additional matter added under Rule 6.1.5A). In these Rules, “equal opportunities” includes the prevention, elimination or regulation of discrimination between persons on grounds of sex or marital status, on racial grounds or on grounds of disability, age, sexual orientation, language or social origin or of other personal attributes, including beliefs or opinions such as religious beliefs or political opinions. Human rights, including Convention rights (within the meaning of section 1 of the Human Rights Act 1998) and other human rights contained in any international convention, treaty or other international instrument ratified by the United Kingdom.


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According to the UNHCR, the UN Refugee Agency, we are now witnessing the highest levels of displacement of people on record. In 2015, 34,000 people are forcibly displaced every day as a result of conflict or persecution.

An unprecedented 65.3 million people around the world have been forced from home. Among them are nearly 21.3 million refugees, over half of whom are under the age of 18. There are also 10 million stateless people who have been denied a nationality and access to basic rights such as education, healthcare, employment and freedom of movement. Fifty-three per cent of refugees come from Syria, Afghanistan and Somalia.

More than a million migrants and refugees crossed into Europe in 2015, sparking a crisis as countries struggled to cope with the influx.

Scotland has made a significant contribution to the Syrian Vulnerable Persons Resettlement Programme and welcomed over a hundred unaccompanied children.

It is time to evaluate how we approach the issue of destitution for people who are seeking asylum and aren’t part of the resettlement programmes, or who have insecure immigration status and, due to a change in their circumstances, find they have No Recourse to Public Funds.

For many people going back to their home country is not a choice, being destitute is preferable to being imprisoned, tortured or killed.

We spoke to people who are living with the effects of trauma and through their courage heard their real-life stories of struggle and pain. Some had experienced abuse, torture and exploitation and fled to find protection in the UK only to become destitute and vulnerable again.

Destitution is harmful. It further traumatises people, makes them more vulnerable to exploitation and increases health issues – this is not acceptable in a modern, welcoming Scotland.

Our report won’t change what has happened to them, but we can address how they are treated in Scotland going forward - by refocusing what is in our control - our compassionate response to destitution.

We know we can’t solve destitution outright, but we can make progress minimising its effects to give people the best chance of finding their new life, whether this is in Scotland or back in their home country when they’re able.

There is a lot to be gained from tackling destitution:

• People will be spared the harmful effects of being trapped in a cycle of trauma and ill health,

• Opportunities to exploit people for domestic slavery or criminality will be much reduced,
• Local services won’t have the same demand to pick up the pieces,
• Non-governmental organisations can return their focus to core business, and
• Those who have had a positive experience of Scotland will integrate better.

Provision of advocacy services is crucial to this preventative approach. Help to quickly access the asylum and immigration system to get the support they are entitled too to stop them becoming destitute. Advocacy is also vital to assist those with No Recourse to Public Funds to gain access to the help they need, particularly families with children. If we get the approach right now, then we get it right for the individual, for the family, for the community, for the support services and, for Scotland.

Our report is the first step in what we hope will be a national response. There are steps we can take which will make life better for those who are simply existing day-to-day, making survival decisions.

The current approach isn’t working and it isn’t sustainable. There are policy changes flowing from the Immigration Act 2016 which, if implemented in Scotland, could increase the number of people who become destitute. If we haven’t got the approach right now then there is a real risk the impact of any changes could be overwhelming, not just to the Glasgow area, who has thus far shouldered the responsibility, but to Scotland as a whole.

Destitution is a humanitarian issue, an issue on which we, as a country, will be judged. Let’s give these hidden lives a new beginning.

Christina McKelvie MSP
Convener of the Equalities and Human Rights Committee
Evidence received showed the asylum and immigration system is peppered with points at which the risk of destitution becomes likely. The sheer complexity and inaccessibility of the process makes it unnecessarily difficult in practical terms for someone new to the UK, who is destitute, to initiate the process. Once destitute, it is much harder for people to re-engage with the asylum process. Destitution is further built into the system by there being only certain geographical locations in the England where parts of the process can be accessed. We heard people with insecure immigration status find themselves destitute for a combination of reasons but mainly linked to human trafficking or abusive relationships. We believe more work must be undertaken to identify the scale and nature of destitution in Scotland, particularly because in carrying out this inquiry, we found visible homelessness is the tip of the iceberg and destitution is largely hidden in plain sight, with many organisations picking up the pieces. We have asked the Scottish Government (and public authorities) for a number of actions:

- The creation of a 'Scottish anti-destitution strategy' to inform a national approach to mitigating destitution. (para 51)
- The creation of a new Scottish Government advocacy service for destitute people with insecure immigration status. (para 190)
- The creation of a national coordinated practitioners’ network, which would include Scottish Government officials, representatives from health boards, local authorities, non-government organisations, third sector organisations, and legal practitioners. (para 191)
- The Scottish Government should examine the feasibility of extending the Free Bus Travel Scheme to allow destitute people with insecure immigration status to attend appointments. (para 94)
- Where clinicians consider an individual with insecure immigration status has an infectious disease that requires accommodation, this should be funded by the Scottish Government as a preventative measure. (para 90)
- The creation of a new ‘Destitution Fund’ by the Scottish Government for women experiencing domestic abuse unable to access other sources of help. (para 67)
- Update the COSLA/Local Authority guidance so that local authorities dealing with people with insecure immigration status are clear on help available. (para 140). The guidance should be unambiguous about carrying out human rights assessments. (para 174)
- Asylum seekers should have the right to do paid and unpaid community work in Scotland – allowing for better integration opportunities, supporting asylum seekers’ mental and physical health, and the opportunity for asylum seekers to receive an income. (para 95)
I was interviewed, *detained* and after a few hours was driven to a detention centre in the middle of nowhere.

I had *no lawyer, no friends and no family*. I got depressed, day and night and my *emotions got worse*. I contacted one of the lawyers. He came to see me and was willing to take my case but a few weeks later, I got *transferred* to Scotland and was *suddenly* released after a few weeks. On my release, I was only given a train ticket to Glasgow, *no money*, *no accommodation* or even shelter or a hostel...

...I am *homeless*. I get food from anywhere and nowhere to shower or place to go and have a little privacy.

32 year old asylum seeker from Cameroon
Introduction

1. On 1 November 2016, the Committee received joint written evidence from the British Red Cross (Scotland) (BRC(S)), the Children and Young People’s Commissioner Scotland (CYPCS) and the Scottish Refugee Council (SRC). This evidence was also endorsed by Scottish Women’s Aid and Engender.

2. The submission said one group at acute risk of suffering destitution are those refused asylum and have No Recourse to Public Funds (NRPF). It also highlighted other groups at risk, including women and children survivors of domestic abuse who had insecure immigration status and NRPF.

3. The organisations called for us to undertake an inquiry into:

   …the human rights-compatibility of the current arrangements in Scotland for assessment, decision-making and support of persons with insecure immigration status subject to No Recourse to Public Funds (NRPF) conditions.  

4. On the 13 December we held a private briefing with the organisations to explore in more detail the need for an inquiry and to inform our consideration of the potential scope of any inquiry. We also heard directly from a young mother who had experienced destitution while pregnant and was still destitute while caring for her eleven-month old son.

Approach to evidence gathering

5. We agreed at our meeting on 19 January 2017 to launch an inquiry into Destitution, Asylum and Insecure Immigration Status in Scotland to explore the ways in which public authorities could mitigate destitution. Our call for evidence was issued on 25 January 2017 and ran until 8 March 2017. In total we received 107 responses, of which 37 were from individuals (this includes organisations who collated case studies from people who had experienced destitution).

6. In embarking on this inquiry we were conscious that we needed to hear directly from individuals and families most affected by destitution. To achieve this objective we undertook visits to Shakti Women’s Aid in Edinburgh, the Destitute Asylum Seekers Service and the BRC(S)’ Mums Project in Glasgow and met a number of individuals who have NRPF. In addition, we had informal briefings with public health nurses working with destitute people, and a Hemat Gryffe women’s aid service user.

7. We would like to express our gratitude to the individuals and families who shared their difficult personal stories with us about their journey to the UK and their experiences while trying to seek asylum, or in escaping domestic violence, and how destitution has affected them. Only through their courage were we able to gain some insight into what it has taken for them to seek protection in the UK and now face a daily struggle for survival while living in destitution in Scotland.

8. We were also struck by the remarkable work being undertaken by individuals who give up their time and offer their homes to help destitute people and offer them vital moral and emotional support. Also by the many dedicated organisations in
Scotland, which provide practical support including, food, money, a place to shelter, but also the skilled advocacy support which helps people to engage with the asylum system and public authorities to help have their needs met and lift them out of destitution.

9. We held four oral evidence sessions—

- On the 16 of March we heard from the organisations which had asked for an inquiry including the SRC, British Red Cross (Scotland); Children and Young People’s Commissioner in Scotland, Scottish Women’s Aid. We also heard from other stakeholders, the Scottish Human Rights Commission, the British Red Cross (Northern Ireland), the Immigration Law Practitioners Group in Scotland, Positive Action in Housing, and the Scottish Faith Action on Refugees.

- Our meeting on 23 March focused on practitioners from health, local authorities and CoSLA (Dispersal). While the third session held on 30 March was an opportunity to hear from Olivia Ndoti, an asylum seeker and her advocacy support from the Asylum Seeker Housing Project, Police Scotland CoSLA (Unaccompanied asylum seeking children).

- At the final meeting on 20 April we heard from the Care Inspectorate and Angela Constance, Cabinet Secretary for Communities, Social Security and Equalities.

10. In structuring the evidence sessions we were keen to hear from Robert Goodwill MP, Minister of State for Immigration in order to gain a fuller understanding of the asylum and immigration system. Disappointingly, the Minister declined to attend in person or via video conference even though we had offered an alternative date to facilitate his attendance. We did however receive a written submission in lieu of his attendance and of course we welcome this. Nevertheless, the Minister’s non-attendance did have an impact on our inquiry in that it limited our ability to investigate any relevant issues further and to challenge the evidence received, or test any emerging recommendations.

11. Unfortunately, we were also unable to secure the attendance of the Independent Chief Inspector of Borders and Immigration, Mr David Bolt, via video conference due to last minute technical issues.

12. This report sets out a number of areas which we would like to draw to the attention of the Independent Chief Inspector. It is hoped the report and, the evidence which underpins it, will inform his ongoing work programme.
13. This report examines the impact of destitution on asylum seekers and those with insecure immigration status. It looks at the reasons why destitution occurs, the support being provided currently by public authorities, non-governmental public bodies, third sector and charity organisations to mitigate destitution and makes recommendations to improve the response by public authorities in Scotland.

Meaning of terms used

14. This report, although focused on destitution, uses many of the terms associated with the asylum and immigration system, which we acknowledge can be complex and technical. We have made an effort to keep the language simple and accessible, so that as wide an audience as possible can engage with the topic.

15. ‘Destitution’ is defined under section 95 of the Immigration and Asylum Act 1999. A person is destitute if—

- they do not have adequate accommodation or any means of obtaining it (whether or not essential living needs are met); or
- have adequate accommodation or the means of obtaining it, but cannot meet other essential living needs.

16. An ‘asylum seeker’ is someone who has fled their country and lodged an application for protection on the basis of the 1951 UN Refugee Convention or Article 3 (prohibition on torture and inhuman or degrading treatment).

17. A ‘refugee’ is someone who has had their claim for asylum granted.

18. People with ‘insecure immigration status’ can mean someone is waiting for a decision from the Home Office on permission to stay, where, for example—

- their status is dependent on a partner, spouse or other family member;
- their stay in the UK is limited;
- someone is undocumented; or
- they have no legal right to be in the UK, but might secure their legal status if supported to do so.

19. Section 115 of the Immigration and Asylum Act 1999 (the 1999 Act) states, that a person subject to immigration control will have No Recourse to Public Funds (NRPF). The 1999 Act provides a list of what is included as a public fund, but generally it includes non-contributory benefits such as child benefit, universal credit, and disability benefits. It also includes the Scottish Welfare Fund. The NHS and education do not count as public funds.

20. A ‘fresh claim’ is a second asylum claim made where there is new evidence or there has been a change in the law as a result of previous court decisions.
Causes of destitution

Destitution is not something anyone should experience. It’s like being tied in a black tunnel.  

21. Before considering public authorities response to destitution, it was important for us to establish the reasons why destitution is occurring in Scotland when people are seeking asylum or have insecure immigration status.

Destitution and asylum

22. We were given a clear message from the evidence received, support organisations and public authorities alike, that “destitution is built into the UK asylum process”.

23. Andrew Morrison from CoSLA summed up this view when he said destitution was an “inevitable consequence” of the immigration system as it sought to create a hostile environment for those who do not have a legal right to be in the UK.

24. However, there was an acknowledgement amongst the witnesses that this approach was not just a feature of the current UK Government policy, but that of successive UK governments over the last two decades.

25. An example of how the asylum system creates destitution is provided in an account from a 32 year old from Cameroon, who arrived in the UK in 2015 and claimed asylum at the airport.

I was interviewed, detained and after a few hours was driven to a detention centre in the middle of nowhere.

I had no lawyer, no friends and no family. I got depressed, day and night and my emotions got worse. I contacted one of the lawyers. He came to see me and was willing to take my case but a few weeks later, I got transferred to Scotland and was suddenly released after a few weeks. On my release, I was only given a train ticket to Glasgow, no money, no accommodation or even shelter or a hostel…

…I am homeless. I get food from anywhere and nowhere to shower or place to go and have a little privacy”. Case A (via Unity Centre, Glasgow)

26. Graham O'Neill, SRC, advised there was significant risk of exploitation to newly arrived asylum applicants, he said “they go into a twilight world and we do not know how they get to Croydon”. They are vulnerable to exploitation, including sexual, to fund travel to access the asylum process in Croydon. Graham O’Neil described the policy as “inhumane” and “senseless”.

27. Evidence showed destitution occurred at various points throughout the process, but that asylum seekers were most at risk of experiencing destitution when their asylum claim had been refused and they had no recourse to public funds.

28. Asylum Seeker Housing Project (ASH Project) stated over 60% of claims were refused at the Initial Decision stage. This meant a significant number of asylum
seekers would be evicted from their properties. ASH Project believed Serco removed many asylum seekers before they had appealed and also before they had time to make alternative accommodation arrangements which led to destitution.  

29. Once destitute, it was much harder for people to re-engage with the asylum process, whether this was accessing advocacy assistance or travelling to appointments. Statistics provided by the SRC for the past decade showed that around 20% of people who had been made destitute because they were refused asylum, went on to be successful by making a ‘fresh claim’.  

30. Making a ‘fresh claim’ had been made more difficult argued Graham O’Neill from the SRC. He advised that from January 2015 the only place where people who had been refused asylum could make a fresh claim was in Liverpool, except in exceptional circumstances.  

31. Third sector organisations told us on our visits they had provided money for travel, arranged childcare and on occasions overnight accommodation where it was essential the person had to attend appointments in England.  

32. The SRC called for the Home Office to make use of its extensive network of local and regional offices, including in Glasgow, to make accessing the system more accessible for newly arrived destitute women, men and children to register their claim to prevent destitution.  

33. Oddly, we learned the risk of destitution was present even for those who had been granted refugee status or other forms of international protection.  

34. Those who have acquired refugee or protected status are required to vacate their ‘asylum accommodation’ after 28 days and to access their housing and welfare benefits entitlement. The SRC advised new refugees experience destitution at this point “persistently and at very high levels” because of delays accessing benefits.  

35. It is understood the Home Office is reviewing the 28-day move-on period and will bring forward a change if the evaluation shows that to be necessary.  

36. In his written evidence to the Committee Robert Goodwill MP, Minister of State for Immigration, stated on the asylum and immigration support provisions—  

No person who has sought asylum in the UK need be destitute whilst awaiting a decision on their claim. All asylum seekers whose claims have been fully determined and have exhausted any in-country appeal rights are required to leave the UK voluntarily as soon as practicable.  

36. During her evidence to the Committee, Angela Constance MSP, Cabinet Secretary for Communities, Social Security and Equalities (“The Cabinet Secretary”) said—  

It is, to be frank, outrageous that people who are fleeing war, terror and persecution should end up destitute or homeless in the country where they have sought refuge and sanctuary. I very much agree with the other witnesses who said that destitution is built into the asylum system, whether through the rate that is set for asylum support, the length of time that people wait for support, or the ending of support for many people who are refused asylum.
Destitution and insecure immigration status

37. From our discussions with organisations and people who were experiencing destitution who had insecure immigration status the reasons seemed more linked to issues of domestic abuse, domestic slavery and threat of retribution from wider family members, for example—

- A woman who was forced into a marriage of domestic slavery, but having escaped, had no documentation to prove who she is.
- People living in fear for their life and the lives of their children, including fear of honour killing, Female Genital Mutilation, incarceration and death.
- Women who have stayed with abusive partners so as not to become destitute, or had left abusive partners and were now destitute.

Conclusion and recommendations

38. It is clear to us the asylum and immigration system is peppered with points at which the risk of destitution becomes likely. The sheer complexity and inaccessibility of the process makes it unnecessarily difficult in practical terms for someone new to the UK, who is destitute, to initiate the process. Destitution is further built into the system by there being only certain geographical locations in the England where parts of the process can be accessed.

39. We know people arriving in Northern Ireland do not have to travel to Croydon to make an initial claim. It is unacceptable that destitute, vulnerable people are forced to continue in the UK what will have already been a difficult journey. We are in no doubt destitution should not happen as a result of failings in the system, as we heard about with refugees moving from asylum accommodation.
From the evidence we heard, people with insecure immigration status find themselves destitute for a combination of reasons but mainly linked to human trafficking or abusive relationships. This is covered in more detail in the section on impact on human dignity, health and wellbeing.

We recognise that policy and the power to legislate on asylum and immigration are reserved matters to the UK Government and Parliament. As such we cannot make recommendations directly to the Home Office. The majority of the Committee therefore asks the Scottish Government to intensify its negotiations with the Home Office to ensure people who arrive in Scotland and wish to claim asylum should be allowed to register their claim in Scotland and not have to travel to Croydon. Similarly, those who wish to make a fresh claim for asylum should not be required to travel to Liverpool, but instead should be able do that at locations in Scotland. The Scottish Government should seek to establish the rationale behind the decision not to allow initial claims and fresh claims to be lodged routinely Scotland.
42. In addition, we ask any essential travel, whether local or further afield, including overnight accommodation where necessary, should be fully funded by the UK Government. This would reduce the risk of exploitation and ensures the process is open, accessible and sustainable. We ask the Scottish Government to report back to us on the outcome of its discussions with the Home Office one year from the publication of this report.

Jeremy Balfour MSP dissents from the recommendation in Paragraph 41. He has asked for more information to be given to the Committee on any implications of any change, and what happens in Northern Ireland.
Number of people who are destitute

43. Recently, the British Red Cross said it had come to the aid of 14,909 destitute refugees and asylum seekers, including dependents, without adequate access to food, housing or healthcare in the last year in the UK. This was an increase of nearly 10% on the 13,660 people they saw in 2015.

44. In Scotland, it was reported by the British Red Cross in Scotland (BRC(S)) that the number of destitute refugees and asylum seekers it had helped in Glasgow had increased from 326 in 2014 to 820 in 2016. BRC(S) said the figures reflected, to some extent, the overall increase in the number of people seeking protection. However it was also claimed that changes made in 2014 to support and advice offered by the Home Office had increased destitution. 10

The Home Office provides statistics on immigration and asylum. As at 30 September 2016, the number of asylum seekers supported in the UK was 37,958, of which 3,245 were supported in Scotland. Approximately £16.6 million was spent on providing Section 95 support (support provided before a final decision on asylum is made) in Scotland and £2.1 million on Section 98 support (emergency support) in
Scotland. There is no Scottish figure for Section 4 support (support for refused asylum seeker who have exhausted all appeal rights and are destitute) although we know 2,424 people are receiving support in the UK.  

46. Refugee Survival Trust data from 2011/12 to 2015/16 confirmed a steady rise in the number of destitution grants awarded to predominantly young, male, single and homeless refused asylum seeking population. In 2011/12, 485 grants (£31,889) were provided and this had risen to 877 grants (£58,000) in 2015/16.  

47. In terms of people who have insecure immigration status and NRPF, North Lanarkshire Council have started to keep a record of those who present to the Council for assistance.  

48. Angela Constance, Cabinet Secretary, Communities, Social Security and Equalities said—  

We are open minded, with some caveats, to considering recommendations in the knowledge that data and information are important, but some of those challenges emanate from the Home Office, and I am conscious that we have front-line and third sector organisations that are trying to deliver a front-line service.  

Conclusions and recommendation

49. From the evidence we received it shows that there is an increasing number of destitute asylum seekers. It is clear to us, however, the exact numbers are not known in the UK or for Scotland and although the numbers do not appear to be vast in terms of the size of population, it should be remembered this group of people are one of the most vulnerable groups in our society who deserve to be treated with fairness and dignity.  

50. We believe more work must be undertaken to identify the scale and nature of destitution in Scotland, particularly as we found in carrying out this inquiry, visible homelessness is the tip of the iceberg and destitution is largely hidden in plain sight, with many organisations picking up the pieces.  

51. We ask, as part of a Scottish anti-destitution strategy, that the Scottish Government, working with public authorities and third sector partners, and the Home Office, seeks to identify the number of destitute asylum seekers and those with insecure immigration status in Scotland. We anticipate this information, and for example, data on the gender, age and any particular needs or vulnerabilities, will inform policy responses to mitigate destitution and monitor the progress of any interventions. We ask the Scottish Government to report back to us on the outcome of its discussions and on the information collated on the scale and nature of destitution in Scotland a year from the publication of this report.
Impact on human dignity, health and wellbeing

Increased risk of exploitation

52. We were told women and children survivors of domestic abuse were at increased risk of destitution. Scottish Women’s Aid advised “women with insecure immigration status experience specific patterns of abuse such as domestic servitude, restrictions from learning English, or working outside the home that are underlined with threats relating to their immigration status that increase the potential power of the perpetrator and restrict women’s agency”. 14

53. They also explained that the 2010 Destitute Domestic Violence Concession has had a significant positive impact and stated this gives women who entered the UK on spousal visas access to benefits for 3 months while they apply for Indefinite Leave to Remain in the UK, where she can prove her marriage has ended because of domestic abuse. However, Scottish Women’s Aid believed many women remain excluded, including women who entered the country on other visas and subsequently get married, who came to the UK as students, or women who are here as the victim of illegally human trafficking. 14

54. We heard how vulnerable children and adults who had been trafficked faced difficult choices as they might believe they were better off with their handlers than being destitute. This could lead to them being retrafficked. Sean Bell, City of Edinburgh Council, recalled a case where a young person's traffickers had found him and taken him to work in a cannabis farm in England. 15

No recourse to public funds

55. Scottish Women's Aid, stated “some Women’s Aid groups have also been informed by their local authority that as a condition of their funding they cannot accommodate women with no recourse to public funds or provide them with any support unless they are able to demonstrate this has not been provided using public funds.” 14

56. The Glasgow-based women’s aid charity Hemat Gryffe claimed local authorities needed to respond appropriately in cases where women with NRPF have children. It was their experience the local authority did not meet its duty of care to families with NRPF in line with United Nations Convention on the Rights of the Child (UNCRC), the Children (Scotland) Act 1995 or Getting it Right for Every Child (GIRFEC). 16

57. We visited Shakti Women’s Aid in Edinburgh, where we heard from a number of women who were struggling to access support because of NRPF. They told us about their horrific experiences at the hands of their abuser and how they were now trying to survive without funds, for example, by using pillowcases as nappies, while still traumatised from their abuse and trying to secure their status. The support workers had to explain to the women they could not help them because they were not allowed use public funds for their support. They wanted to support them and so
they fundraised in order to assist the women with accommodation and cover basic living costs.

58. From our initial briefing on 13 December 2016, we heard changes to UK benefit entitlements for European Economic Area\(^ {ii} \) nationals had created additional barriers and risks for women from these countries experiencing domestic abuse. These rule changes failed to take account of gendered patterns of care and employment. Victims of domestic abuse were “doubly disadvantaged” from being able to meet these requirements, due to the coercive and financially controlling behaviour of the abuser.

59. The Anti-Trafficking Monitoring Group called for practical barriers to accessing legal advice and representation to be addressed. While asylum seekers and victims of trafficking may be entitled to free legal aid there could be delays in accessing appointments with solicitors willing to take on these cases.\(^ {17} \)

60. Police Scotland stated in their evidence to us that destitution, in all its forms, undoubtedly increases an individual’s vulnerability to be exploited by criminals.\(^ {18} \) Chief Inspector Alastair Muir of Police Scotland, referred to an old saying, “if society is not engaging with individuals, criminality will”.\(^ {19} \) It was acknowledged by Chief Inspector Muir, that Police Scotland had an awareness and understanding, particularly in Glasgow, of some of the issues relating to lack of finance or accommodation or to mental health. However, they did not have the analytical tools to look at the matter in detail and described destitution as an “emerging issue for policing” due to the concealed nature of the issue.\(^ {19} \)

61. One of the main barriers for the police was to build trust with a group of people who had a distrust of law enforcement in their country of origin. In addition there was a fear authorities would detain and deport them. Police Scotland had sought an ‘Identified Intelligence Requirement’ to assist with their understanding of the issues.\(^ {18} \)

Conclusions and recommendations

62. We welcome Police Scotland’s proposal to seek an ‘Identified Intelligence Requirement' through its National Intelligence Bureau to gain a more comprehensive understanding of the nature and scope of destitute asylum seekers and those with insecure immigration status. We ask Police Scotland to provide us with an update on their findings on the ‘policing picture’ of destitution one year on from the publication of this report.

\(^ {ii} \) The European Economic Area (EEA) is the area in which the Agreement on the EEA provides for the free movement of persons, goods, services and capital within the European Single Market, as well as the freedom to choose residence in any country within this area.
63. We ask the Scottish Government to investigate the reasons for the delay in accessing legal aid for victims of trafficking and put actions in place to resolve those delays and report back to us on progress by the end of 2017. We will also write to the Justice Committee bringing this issue to their attention.

64. We believe there are huge risks associated with not tackling destitution in Scotland. Destitution is harmful to those experiencing it. It places individuals in unsafe, dangerous and exploitative situations, including domestic servitude, prostitution, exploitation by organised criminal gangs and abusive relationships. We need a compassionate response to destitution. Also, there is a knock-on effect on the third sector and public authorities charged with supporting people out of violent and exploitation situations.

65. We welcome the Scottish Government’s commitment to tackling violence against women and children and recognise the recent Scottish Government and CoSLA Strategy, Equally Safe: Scotland’s strategy for preventing and eradicating violence against women and girls, has done much to strengthen the approach. However, we ask the Scottish Government to negotiate with the UK Government to extend the scope of the Destitute Domestic Violence concession so that it includes all women with insecure immigration status, including asylum seekers, until they return to their countries of origin.

66. In addition, we ask the Scottish Government to work with the UK Government to enable all women to access safe refuge accommodation, regardless of their entitlement to housing benefit, immigration status, or access to public funds. We ask the Scottish Government reports back to us on the outcome of its discussions a year from the publication of this report.

67. Meanwhile, we ask the Scottish Government to consider creating a destitution fund to mitigate the impact of restrictions on access to public funds for those with insecure immigration status and European Economic Area migrant women experiencing domestic abuse and to report back to us a year after publication of this report setting out progress.

**Impact on health and wellbeing**

68. According to the Home Office, those receiving section 95 support (support for the period until a final decision on an asylum application is made.) have free access to NHS healthcare. The Home Office discharges its duties on health matters by ensuring relevant asylum seekers have all the necessary information, in a language that they understand, to access and register with their local health service delivered by the relevant health authority. 8
Access to healthcare

69. Many of those who work with, or support, destitute people explained destitution made accessing healthcare and treatment of ongoing conditions more difficult. This in turn had serious implications for an individual’s health and wellbeing and, in some cases, for those around them.

70. Although asylum seekers and those with insecure immigration status should be able to access healthcare, we heard from practitioners being destitute limited that access. Glasgow City HSCP stated—

Guidance supports the provision of full access to health, care and treatment for asylum seekers regardless of stage in the asylum process including failed. The challenge for the individual and health is that the person has no access to funds so is often unable to pay for transport to appointments which essentially limits access to treatment. If the person has no shelter this significantly impacts on the person’s physical and mental health and can lead to hospital admissions and they would then be discharged to no accommodation which reduces the efficacy of the care and treatment received in hospital.

71. During a fact-finding visit to Glasgow, we met with an asylum seeker referred who had fled a civil war in his home country in sub-Saharan Africa and came to the UK 15 years ago. He had been destitute in Glasgow for several years and slept in the Men’s Shelter until he developed a serious medical condition which required surgery.

With the assistance of the SRC, he was referred to a specialist in the NHS who confirmed he needed surgery. Though legally entitled to this under immigration law, it required explicit approval of the Home Office to be carried out. His clinicians at NHS Greater Glasgow and Clyde sought this, however it took nearly 15 months for them to grant approval, despite repeated engagement by NHS staff.

72. A member of the Samaritans, moved by his story, provided him with accommodation in his own home. He has to be out of the house for most of the day as the owner works, and lives on his own. Like other asylum seekers we spoke to, he spent most of his days in libraries or in the offices of NGOs like the SRC or BRC(S).

73. At the start of 2017 the Home Office finally got approval and he had his surgery. However, he now needs to walk a near 4-mile round trip every other day to the hospital to have his dressings changed, so as to avoid infection. He feared for his survival. He could only get day bus tickets from the SRC’s office in Glasgow, however, the journey to collect added to his daily walk, and caused him further pain and discomfort. While awaiting the outcome of his latest application for asylum, he feared for his health if he was sent back to his home country as he would not get the medical aftercare and treatment he needed after such major surgery. This was affecting his mental state.

Transmittable diseases

75. A briefing we received from specialist public healthcare nurses on the prevalence and treatment of destitute asylum seekers with Tuberculosis highlighted some
people came to the UK with Tuberculosis, but also that the disease disproportionately affected the poor, and so, destitute asylum seekers were at particular risk.

76. Of specific concern to the nurses were the difficulties in treating destitute patients. Keeping in contact with patients who were ‘sofa-surfing’ or using night shelters to ensure continuity of treatment was very time consuming, but vital, as there was potential for transmission of Tuberculosis to others they came into contact with. We heard about one patient who was highly infectious and had had 11 addresses in the same amount of months. He had come into close contact with 40 people during that time. Screening of these people identified five new cases, three of which were children. Another issue we noted was that if treatment was not fully completed, the disease could become drug resistant, which might lead to an increase in drug resistant Tuberculosis in Scotland. Increased transmission rates and the cost of treating drug resistant Tuberculosis had the potential to increase costs to health and social services.

77. Waverley Care, a Scottish HIV and Hepatitis C charity, raised similar issues. Loss of privacy associated with staying with friends or accessing shelters made adherence to HIV medications very difficult. With cultural perceptions and stigma surrounding HIV, many people stopped taking their medication because they were worried about disclosing their HIV status to others. An extract from Case Two, Ruth, provides an insight into being destitute with HIV—

Mental health problems like depression and anxiety, especially when I am getting kicked out of accommodation... It makes me have feelings of worthlessness and life not worth living. [...] Financial difficulties have been there but it makes it worse when you are not able to afford food to support taking your HIV medication. 21

Mental health

78. Rachel Morley, a Consultant Clinical Psychologist who works with unaccompanied young people and adults who have experienced very severe traumas, including torture, rape and trafficking, was concerned aspects of the asylum process were exacerbating mental health difficulties. She said “the process can systematically erode people’s emotional and physical resilience and lead people to be vulnerable to further trauma, revictimisation and experiences of violence.” 22 A client at the Glasgow Psychological Trauma Service (GPTS) expressed the view—

Mental health gets worse because of destitution and destitution causes mental health problems. 2

79. In supporting an individual’s mental health, the UK charity Mental Health Foundation, advised there were three core elements, “a place to stay, a role to play, and a community to belong to”. 23

80. This was also borne out by the discussions we had with the asylum seekers we met during our fact-finding visits and briefings.
81. Under the asylum process, asylum seekers are not allowed to work in the UK. They can only apply for permission to work if—

- they have waited for over 12 months for an initial decision on their asylum claim, or they have been refused asylum but have not received a response to further submissions submitted over 12 months ago; and

- they are not considered responsible for the delay in decision-making.

82. Permission to work only allows asylum seekers to take up jobs on the UK’s official shortage occupation list. It expires once the asylum claim has been finally determined (i.e. when all appeal rights are exhausted).

83. A number of the men we spoke to told us the single biggest factor that affected their mental health was their inability to work, this was made worse if they had a family to support. They were eager to work and give back to the community.

84. An asylum seeker we met in Glasgow, told us how he had been in the UK for 17 years. As a young man he was drafted into the national army of his home country to help fight in its civil war. Alarmed at the abuses he was expected to carry out he fled and made his way to the UK. He feared being deported home where he would be imprisoned, or executed, for desertion. He had made numerous appeals for refugee status, but these were all rejected.

85. He told us of the psychological impact 17 years of being in effective immigration limbo in the UK has had on him. He is destitute and sleeps in a men’s shelter in Glasgow from 8pm to 8am each day.

86. Evidence from research and the experiences of clients within the Glasgow Psychological Trauma Service showed that people chose prolonged periods of destitution in the UK, regardless of the negative mental and physical health consequences, over return to their countries of origin where they would likely face further trauma. Being destitute can impact detrimentally on people’s mental and physical health affecting their ability to access and maintain treatment. It can exacerbate mental health issues and lead to suicidal thoughts and attempted suicide.

Maternity services

87. According to Maternity Action, a UK charity, vulnerable women, including asylum seekers and those with insecure immigration status, were at particular risk of poor health during pregnancy, birth and the post-natal period. There was an increased incidence of maternal death, as newly arrived women could have underlying, and possibly unrecognised, medical conditions which resulted in maternal deaths, including, for example, congenital cardiac disease, HIV/AIDS and Tuberculosis.

88. Additionally, pregnant women were reluctant to seek maternity care because of fears about immigration status, or shame felt about the pregnancy or for other reasons, such as having traumatic experiences in conflict and war zones including rape or trafficking for sexual exploitation. Women who had undergone female
genital mutilation were also at increased health risk, especially if disclosure is very late in pregnancy. 24

89. Destitution in this group of women significantly increases the health risks faced by pregnant women, new mothers, and by their babies.

### Conclusion and recommendations

90. Destitute asylum seekers and people with insecure immigration have particular issues accessing and continuing treatment due to the lack of a place to stay. There are also sensitivities regarding maintaining treatment plans for people diagnosed with communicable diseases. We ask where clinicians consider communicable disease treatment requires accommodation this should be funded by the Scottish Government as a preventative measure. We ask for a progress report one year from this report.

91. We would also welcome assurances from the Scottish Government that all relevant health staff, including midwives and non-medical staff have access to sufficient guidance and training to be informed and understand the issues faced by asylum seekers and people with insecure immigration status. This will be imperative where a local authority area elects to take part in the dispersal process for asylum seekers. Again, we ask for an update a year from the publication of this report.

92. We believe there should be a more co-ordinated, compassionate response to asylum seekers and those with insecure immigration status experiencing mental health difficulties linked to trauma and destitution. Glasgow Psychological Trauma Service has gathered together relevant research sources into the links between destitution and exploitation and the mental health impact of destitution. We ask that this research is used by the Scottish Government to inform a Scottish anti-destitution strategy.

93. We received evidence which pointed to a lack of transport options for destitute asylum seekers and people with insecure immigration status to access essential services like health appointments. This is especially true for people with young children. Most cannot afford public transport on a regular basis, and while some councils like Glasgow offer some public transport options, these are often for limited times (a day) or journeys.

94. We ask the Scottish Government to examine the feasibility of extending the National Entitlement Card/Free Bus Travel Scheme to provide a short duration bus pass (6/12 months) to allow destitute asylum seekers and people with insecure immigration status, to travel to appointments more easily which could
have a beneficial effect on their health and wellbeing. And ask for a progress report a year from the publication of this report.

95. We recognise the UK Government’s approach to asylum seekers is that they should not ordinarily be allowed to work. Many asylum seekers, however, are willing and wish to contribute to their communities whilst living in the UK through paid or unpaid activity. The right to work and access to opportunities that reduce the likelihood of severe poverty is an important factor in supporting the mental and physical health needs of asylum seekers. We ask the Scottish Government to negotiate for the right of asylum seekers to undertake paid or unpaid community work in Scotland. As well as minimising the health impacts of destitution it allows the community integration process to start in line with the Scottish Government’s Day 1 approach to integration. We ask for an update on the outcome of its discussions one year from the publication of this report.
Current devolved response to destitution

96. Scotland’s approach to integrating refugees and asylum seekers and its cross-sectoral coordination and local delivery has been praised by the Equality, Local Government and Communities Committee of the National Assembly of Wales. We do not demur from this view – this is our starting point – we recognise all the excellent work that is being undertaken by those providing support and delivering services, including the work of local authorities. Our focus has been tightly drawn by looking at ways to improve the situation when people find themselves destitute or with No Recourse to Public Funds.

97. The evidence we received showed the considerable breadth of experience, expertise and knowledge accumulated in supporting destitute asylum seekers and those with insecure immigration status. Most of that expertise is based in Glasgow which reflects the fact that Glasgow is currently the only asylum dispersal area in Scotland. However experience is growing with public authority engagement in the Syrian Vulnerable Persons Resettlement Programme.

Syrian Vulnerable Persons Resettlement Programme (VPRP)

98. The VPRP was established in 2014 to provide a route for selected Syrian refugees to come to the UK. It first prioritised victims of sexual violence and torture, older people and disabled people trying to survive in neighbouring countries. Several hundred refugees were expected to arrive to the UK over three years, although there was no fixed quota.

99. The scheme was extended in September 2015 and the UK is now planning to resettle up to 20,000 refugees from the Syrian region over the next five years. The resettled refugees are given five years’ Humanitarian Protection status, with permission to work and access public funds and the programme is only open to Syrian refugees registered in Egypt, Iraq, Jordan, Lebanon, and Turkey.

100. Andrew Morrison, Strategic Migration Officer with CoSLA, advised "31 out of 32 councils" were taking part in the Programme. Many of the witnesses held up the Resettlement Programme as the ‘gold standard’ approach.

101. The Cabinet Secretary also considered the Syrian resettlement programme had been a huge success and said 1,600 refugees had been resettled in Scotland.

102. In relation to the Home Office support provided, the Cabinet Secretary said—

We are arguing strongly that integration support should be fundamental and should be part of support for accommodation. We should not look at support for refugees and asylum seekers to rebuild their lives in silos—finance, accommodation and integration, for example. The system should be end-to-end and holistic in the support that is offered to all refugees and asylum seekers, as opposed to there being bespoke programmes that work well. We cannot have a two-tier system.
103. The Home Office advised the Immigration Act 2016 removes incentives for migrants to remain in the UK where they have no lawful basis for doing so. They also state—

>We rightly provide greater support to those who we resettle here, such as those arriving through our Resettlement Schemes.

### Conclusion and recommendation

104. We are struck by the contrast between the involvement and experience of Scottish local authorities in delivering on the success of the Syrian Resettlement Programme and yet Glasgow City Council is the only dispersal area in Scotland for other asylum seekers.

105. We are extremely concerned the approach being taken by the UK Government through its resettlement programmes is creating a two-tier system. A recent cross-party MPs report ‘Refugees Welcome? The Experience of New Refugees in the UK’ “found that UK Government policies were creating a costly ‘two-tier system’ of refugee protection leaving many homeless and destitute, seriously damaging their prospects of integration”. We believe it cannot be fair that a person makes a difficult journey from say one part of Aleppo in Syria, to the UK, and is then deemed less worthy of assistance than a refugee from another neighbourhood in Aleppo just because they were not lucky enough to be part of an official Syrian Resettlement Programme.

106. Again, whilst acknowledging the reserved nature of asylum and immigration policy, we request the Scottish Government addresses the inequality of the system with the UK Government and seeks assurances resettlement schemes are either open to all asylum seekers in the UK who meet/met the criteria or funding is increased for asylum seekers outwith resettlement programmes to restore the balance. We ask the Scottish Government to report back to the Committee on the outcome of its discussions one year from the publication from this report.

### Integration of refugees

107. The Scottish Government has a strategy ‘New Scots: Integrating Refugees in Scotland’s Communities 2014 –17’ prepared in partnership with CoSLA and the SRC. A second report, published in March 2016, set out progress on the second year of implementation of the strategy. A final report has now been published.

108. ‘New Scots’ established a framework to coordinate the efforts of all organisations involved in supporting refugees in Scotland. The strategy has been implemented by a range of partners working across six key thematic areas. This report highlights progress which has been made to improve support for refugees in Scotland. It includes case studies and examples of specific projects and work which has taken place. It also explores the impact of the humanitarian crisis and Scotland’s response.
Recommendation

110. We agree destitution impacts on an individual’s ability to integrate into the community. We are concerned the ‘two-tier’ approach will have an impact on how an individual feels valued and therefore how successfully they integrate into Scottish society. We ask the Scottish Government to address this in its ‘New Scots’ work programme with a view to mitigating the impact of the ‘two-tier’ approach to asylum and ask for a progress report to be available one year from the publication of this report.

Funding to tackle destitution

Local authority funding

111. Derek Mitchell from CoSLA described the asylum system as ‘fracture beyond repair’. He considered destitution as a policy tool which meant costs were being shifted from national government to local government and the third sector. 29

112. Andrew Morrison, Policy Officer with CoSLA, explained since the introduction of COMPASS (commercial and operating managers procuring asylum support) contracts in January 2013, millions of pounds have come out of asylum services and communities, with local authorities and third sector partners forced to pick up the pieces. He cautioned this was not sustainable and also reflected that a desire to widen the dispersal areas was symptomatic of this situation. 3 Derek Mitchell, CoSLA, concurred with this and added when Glasgow City Council had the contract a range of wraparound services were provided, although not funded for, there was flexibility to provide them which made for a more holistic approach. 30

113. Serco iii holds the contract for asylum seekers accommodation in Scotland. In evidence to the Home Affairs Select Committee, in February 2016, Serco advised its average income per month per service user was around £300, but that the average cost to Serco was around £450. For a full year, the average revenue Serco is paid per service user is around £3,600, and the loss per service user per year is around £1,850. Rupert Soames OBE, Chief Executive of Serco, in evidence to the Home Affairs Select Committee, advised one of the problems was that Serco underbid when the contracts were originally let. He had concerns that a system of reverse
Dutch auction conducted over the internet may not be the best way to establish pricing for a contract to provide care to tens of thousands of people.  

114. The Cabinet Secretary said in response to the funding gap identified—

"National and local government, the third sector and charities in Scotland are all literally paying the price of the UK Government’s policies; they are all paying for the services and support that would not be required if people were not being left destitute by the asylum and immigration system."  

9

115. She went on to draw a comparison with the VPRP—

The success of the Syrian resettlement programme shows what can be achieved when programmes are sufficiently funded, but it also shows that there is a chasm between the support that people who arrive on resettlement programmes receive and what is available to people in the asylum system, including those who have refugee status, which is a complete lack of support. That is driving the creation of a two-tier system and risks there being division between communities.”  

9

116. The Cabinet Secretary pointed to the Scottish Government’s commitment to three-year funding for the equality fund, which supports violence against women and girls projects as well as some equality projects and outlined the funding currently being provided in respect of asylum seekers and refugees—

"From the equalities budget [of] £820,000, goes primarily to the SRC, which gets in the region of £500,000, as well as other organisations. We have also invested £1 million in the refugee task force. Some of that funding has been used creatively on, for example, the retraining refugee doctors programme and peer English-language learning to complement the more formal learning. Nearly £800,000 is being invested in tackling human trafficking, and some of the funds that we distribute through the housing voluntary support grant go to organisations that work with and support refugees."  

32

Conclusion and recommendations

117. We understand it is difficult to identify the level of local authority funding directed at tackling destitution amongst asylum seekers and those with insecure immigration status. Based on the evidence we have received there is a sense Glasgow is coming to a crunch point and that Glasgow City Council and third sector organisations cannot sustain the services they are providing without specific funding. Local authorities are extremely cautious about becoming involved in the dispersal scheme. This could mean for some time to come the epicentre of the pressure will remain in Glasgow.

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iii Serco Group plc is an international service company responsible for the provision of accommodation, transport and related support services for asylum seekers in the North West of England and Scotland & Northern Ireland.
We ask the Scottish Government to work with local authorities and health authorities to identify the costs incurred to address destitution in the asylum seeker population and people with insecure immigration status. We believe once the actual costs of addressing destitution are identified this will further inform other local authorities’ decision-making about whether to become involved in the dispersal scheme. This financial information should also help inform the Scottish Government’s negotiations on UK funding to tackle destitution. Putting to one side the human cost of destitution, accurate financial information would establish whether the cost of prevention is more cost efficient than treating the cost of the problems caused by destitution. We ask for a report back to us on progress made a year from the publication of this report is required.

### Provision of support by non-government organisations

119. There are a number of third sector and voluntary organisation projects which have been set up in response to issues with the asylum and immigration process, including destitution. It would be difficult to list them all in this report, but a few examples, show the range of activities.

120. Asylum Seeker Housing Project (ASH) conducts research into housing and support provision, empowers service users by raising awareness of their rights and responsibilities and also supports services users to engage with, and report issues to, statutory agencies.  

121. Glasgow Night Shelter was established in December 2011 for destitute asylum seekers and people with insecure immigration status in Scotland. It is currently for men only, but there are attempts to seek a larger space that can accommodate women. On average there were between 18 and 30 destitute men staying every night on mattresses on the floor of a church hall. There are no showers. The only washing facilities are three small basins in the men's toilets. The shelter is only open from 8pm to 8am every night.

122. Refugee Survival Trust provides “last-resort short-term financial support to destitute individuals and families”.

123. Destitute clients are provided with a basic food parcel with non-perishables, fresh fruit and vegetables, and toiletries by St Rollox Community Outreach. In the last 5 years, the project has supported over 80 different people on their destitution support programme and supports 10-15 individuals a week.

124. Third sector organisations have called for funding to carry on meeting the needs of destitute asylum seekers and those with insecure immigration status.
Recommendation

125. We ask the Scottish Government undertakes a similar exercise in conjunction with third sector partners to establish the additional amount of resources being used directly to support destitute asylum seekers and those with insecure immigration status. This will help to provide a clearer overall picture of the funding gap. We ask for a report back on progress made one year from the publication from this report.

Crisis fund for destitute people

126. Positive Action in Housing (PAIH) pioneered the concept of refugee hosting with the Room for Refugees programme which has grown since the start of the Syrian Civil War. They also provide crisis grants through their Emergency Hardship Fund. In 2015-16 the fund distributed over £41,000. 35 Robina Qureshi, Chief Executive of PAIH anticipated next year PAIH would pay out between £45,000 and £55,000. 36

127. We also heard from Neil McKittrick from the British Red Cross (Northern Ireland) who explained the Executive Crisis Fund was created by the devolved Northern Ireland Executive following a campaign after an incident when a lady lost a leg to frostbite because she was destitute and sleeping in a doorway in Belfast. On the benefits of the Fund he said it had been a “game changer” and added, “as well as providing a tangible resource, it gathers evidence that allows us to understand what causes destitution and what practical steps we can take to address it”. 37

Recommendations

128. We welcome the essential safety net provided by third sector, voluntary and charitable organisations and note that their case loads are increasing. During our inquiry we spoke to many clients supported by the organisations and were heartened to hear about the lifeline services provided, in what were at times the most desperate of circumstances. There was again a belief these organisations were picking up the ‘tab’ for destitution. This, we heard, was preventing organisations from doing their core, funded work, because rightly they often wished to help.

129. We ask the Scottish Government to investigate the potential to create a Crisis Fund, which could provide a central point from which to gather data on the scale and nature of destitution in Scotland and thereafter inform the direction of policy and funding decisions. We ask for a progress report one year from the publication from this report is required.
Local authorities and no recourse to public funds

130. If a person with NRPF becomes destitute, they might turn to their local authority for support. Local authorities can provide financial support to prevent homelessness or destitution. Such assistance can be provided to—

- Families, where there is a child in need (for example, because the child is homeless or the parent cannot afford to meet the family's basic living needs);

- Young people who were formerly looked after by a local authority, for example, because they were an unaccompanied asylum seeking child (UASC), or other separated migrant child;

- Adults requiring care and support due to a disability, illness or mental health condition.

131. There was broad agreement in the evidence we received that immigration law is complex, changes often, and must be applied in the devolved context. This has led to different interpretations of how local authorities in Scotland should support those who have NRPF.

132. During our visits we were told asylum seekers and those with insecure immigration status had experienced frontline staff delivering different interpretations of what NRPF meant.

133. CoSLA wrote to us following the evidence we had received to clarify the extent of involvement of local authorities where the person had NRPF. They considered evidence provided to us, and media coverage, had seemed to misunderstand the extent of the powers and responsibilities of local authorities when asylum and immigration law limited local authorities' involvement. CoSLA explained local authorities could not provide accommodation to asylum seekers. Local authorities could provide support under social work and children's legislation and, in the case of adults, can only be used when a person has needs over and above destitution. At best CoSLA stated the powers were "a sticking plaster to provide protection to people who would otherwise fall through the gaps in the Home Office system". 38

134. Glasgow City Health and Social Care Partnership were clear they could not legally specifically address the issue of destitution of asylum seekers. However, asylum seekers with care needs, other than destitution and homelessness, had a right to be referred, assessed and receive social work services in the same way as any Glasgow resident. 20

135. Alexis Chappell of Dundee Health and Social Care Partnership, said the welfare rights team were the first port of call as they had been trained in the Office of the Immigration Services Commissioner to enable them to provide free-of-charge immigration advice. 39

Guidance for local authorities on NRPF

136. Evidence across the public and voluntary and third sector highlighted the need for appropriate guidance for local authorities on NRPF. It was unclear if all Scottish
local authorities were aware of the 2012 CoSLA guidance, Establishing Migrants’ Access to Benefits and Local Authority Services in Scotland.

137. A number of organisations argued the guidance produced by CoSLA needed to be updated with input from partner organisations. CoSLA stated, the guidance should not be viewed as “either definitive or prescriptive” as there were equally valid ways to interpret current legislation and in the absence of relevant case law local authorities must take their own legal advice in response to specific cases. CoSLA added the guidance goes out of date very quickly due to changing legislation in this area, for example, the Immigration Act 2016 and the welfare reform. 38

138. CoSLA was open, however, to refreshing the guidance if funding was available.

139. The Cabinet Secretary acknowledged there were challenges around guidance on NRPF. She advised the Scottish Government co-funded the CoSLA migration population diversity team and that it had rightly been spending time working on issues around unaccompanied children and the Syrian resettlement programme. 40

Recommendation

140. We ask that the Establishing Migrants’ Access to Benefits and Local Authority Services in Scotland guidance is updated as a matter of urgency. It is likely the guidance will have greater utility if wider dispersal takes place and also as refugees have their status reviewed in the coming years and then seek to access support. We feel strongly the guidance should be an agile, living document, which has functionality for all relevant staff, including frontline staff. It could be more effective as series of targeted living documents. We consider the Scottish Government and CoSLA should co-fund the process.

Unaccompanied asylum-seeking children

141. Separated children are children and young people who arrive alone in the UK and claim asylum or have been trafficked into the UK. They are referred to as ‘unaccompanied asylum-seeking children’ (UASC). Unlike adults, UASC are the responsibility of the local authority in which they initially present. As the majority of children arrive in South East England, the UK Government has sought to transfer children around the UK. The Immigration Act 2016 provides the power to compel local authorities to participate.

142. In 2015 a total of 3043 unaccompanied children applied for asylum in the UK, a 56% increase on 2014.

143. The Cabinet Secretary said in respect of Scotland, 35 unaccompanied children had come to Scotland under the Dubs amendmentiv, and 150 unaccompanied children had made their way to Scotland by spontaneous routes. Those children were supported by the guardianship service. 26 She commended the fact that 27 local
authorities had expressed “willingness and interest to do more to support unaccompanied children”. 27

144. We were advised by the Cabinet Secretary that work undertaken by CoSLA shows there is a shortfall of about £10,000 per child per annum. Discussions are on-going between CoSLA, the Scottish Government and Home Office officials, and there is some suggestion that the Home Office is reviewing levels of support. 41

145. Susanne Millar, Glasgow City Health and Social Care Partnership told us about a ground-breaking new scheme of finding carers for unaccompanied 16 and 17-year-olds. She advised through faith communities and the third sector, specifically Positive Action in Housing, they had identified a group of 85 families who had expressed an interest in offering accommodation and support to an UASC. 42

146. Section 67 of the Immigration Act 2016, also known as the ‘Dubs’ amendment ensures the Secretary of State must, as soon as possible after the passing of this Act, make arrangements to relocate to the UK and support a specified number of unaccompanied refugee children from other countries in Europe. The Dubs Scheme closed on 8 February 2017 having taken in approximately 350 children. Robert Goodwill MP, Minister for State for Immigration announced on 26 April 2017 a further 130 children would be taken in under the scheme. 43

147. The Cabinet Secretary said in response to the UK Government’s scrapping of the Dubs Amendment [scheme] which provided the only legal route for unaccompanied children out of the middle east and north Africa to reach the UK—

I find it difficult to understand how the UK Government could be so heartless as to remove the route to safety that was provided by the Dubs amendment for the most vulnerable unaccompanied children in Europe. 26

148. She added—

With the news of the destruction of the camp near Dunkirk in a fire earlier this month, I fear that the plight of children without homes and without their families can only get worse. 26

Age-disputed children

149. Concern was raised by witnesses, and on our fact-finding visits, about the age assessment of children on arrival to the UK. Some children had experienced trauma while journeying to safety and feared telling authorities their real age and that they were alone. BRC(S) claimed children were being age assessed in England and then dispersed in the UK asylum system as adults, even though they may not have exhausted all legal challenges to their age assessment. This meant they were not entitled to the same level of support as someone who arrived in the UK and was legally recognised as a child. 44

iv The Dubs Amendment refers to an amendment to the 2016 UK Immigration Act tabled by Lord Alf Dubs. It has since been incorporated into the law, as Section 67 of the Immigration Act 2016.
The Cabinet Secretary confirmed, if a child who came to Scotland had been deemed to be an adult by the UK immigration system and there was then a social work assessment that considers that adult to be a child, that assessment and the child’s need for support stands.” 45

Arun Singh, South Lanarkshire Council, advised they were skilled at conducting age assessment of children. He explained, as children felt more safe and secure to tell their real life stories, Dungavel House Immigration Removal Centre would contact them to do an age assessment. 46 They took a pragmatic approach and moved at the pace of the young person as building trust was important.

Looked-after status

Tam Baillie, the then Children and Young Peoples’ Commissioner for Scotland (CYPCS), provided assurance children coming to Scotland through the various programmes/schemes would be looked after, and that the local authority would have to dispense to them all the new and pending responsibilities that were required by their looked-after status. 47 With regard to UASC who made their way independently to Scotland, there was still some dubiety whether they were being dealt with under section 22 of the Children (Scotland) Act 1995 or afforded status under section 25 of the 1995 Act.

The Cabinet Secretary considered the law to be clear in this regard. She said—

"Section 25 refers to the need for unaccompanied children to be looked after, and more recent legislation—the Children and Young People (Scotland) Act 2014— is very clear about the continuing care and aftercare to which looked-after children are entitled. We need to be very clear about what the law says about children, and the law is clear." 48

She advised that the UASC dispersal working group had discussed with her officials whether it would be helpful to have additional guidance on sections 22 and 25 of the 1995 Act and so far this was not thought to be necessary 49.

Helen Happer from the Care Inspectorate did not have any inspection data on the application of sections 22 and 25 of the 1995 Act in respect UASC presenting to social work services. She said where numbers were substantial, and there were specialists, social workers could get support and advice quite readily. Other areas, with fewer presentations of young people she considered it would be unwise to feel that everybody had all the knowledge and cautioned “knowledge is one thing; practice confidence is another”. 50

Dungavel Immigration Removal Centre is an immigration detention facility in South Lanarkshire, Scotland.
Implementation of child protection legislation

Children (Scotland) Act 1995

156. Section 22 of the Children (Scotland) Act 1995 has been used by local authorities to provide services for children in need and their families.

157. It requires local authorities to safeguard and promote the welfare of children in their area, who are in need. Local authorities should have regard to the child’s cultural, racial, religious and linguistic background. A service may be provided for the child or for the family. Services may include giving assistance in kind, or in exceptional circumstances, cash.

158. However, concerns were expressed about how section 22 was currently being interpreted by local authorities. One concern was that children might be separated from their parents when there were no safeguarding or care reasons to justify the separation.

159. We received examples of local authorities being willing to provide support for a child in a family, but not to the parent(s), under section 22 of the Children (Scotland) Act 1995. Asylum seekers report being told that their child or children could be taken into care under section 22 support.

160. The Asylum Seeker Housing Project provided the following examples—

They use threatening words. Usually they say go back to Sri Lanka, now they using take baby away! (Service user X)

In a situation whereby I had nowhere to go, they think about the well-being of the child, so that was to put the baby in with another family, that’s what they threatened me with. (Service User K)

They gonna say to take the baby away from us, we can provide the house for your baby, not for you. So my wife cried, I cried, this is our baby! My wife said, I cut my belly because of my son, so to give to you guys! They never care about this. (Service User X)

…I feel like the local authority has actually surpassed the Home Office treatment, because this has a baby involved. (Service User K) ⁶

161. BRC(S) stated, “On several occasions families with young children, including a baby being breastfed by its mother, have been told by social workers that they have no duty to offer support or assistance to the parent and will meet their duties to the child by removing them from their parent and placing them in care despite there being no protection concerns for the child.” ¹⁰

162. Fiona MacLeod, BRC(S) argued where there were no protection concerns it would be hugely detrimental to remove a child from their home and that section 22 of the 1995 Act should only be applied to protect the family unit and serve the best interests of the child. ⁵¹

163. The Cabinet Secretary acknowledged clarity was needed—
“Scottish Government—have a responsibility to be very clear about what the law in Scotland says. Under the Children (Scotland) Act 1995, the rights and needs of the child are paramount. I know that the committee has discussed in great detail section 22 of the 1995 act, which makes it clear that children should be assessed in the context of the family.” 48

164. She stated—

“We need to always challenge ourselves about what more we can do to make the position crystal clear that children in Scotland are assessed in the context of their family and that they are taken into care only as a last resort or where there are issues of child protection or neglect.” 52

165. When the Cabinet Secretary was asked about families being left sitting in the waiting area of social work local area offices she said, “that dignity, fairness and respect are not just for our new social security system. Leaving people to sit in a waiting room all day when they are vulnerable, have mental health problems and are at the end of their tether is no way to treat them.” 53

Recommendations

166. There is unquestionably an issue around interpretation and application of child protection legislation. We ask Glasgow City Health and Social Care Partnership to review its practice to ensure consistency of delivery across the Glasgow area. This should include delivery of continuous training and regular updates of social work guidance to ensure it is clear and unambiguous. We recognise the issues we heard about might be isolated incidents, or, they could be indicative of a system which is under sustained and growing pressure. Any review of service delivery should seek to ascertain the underlying reasons. It would be unfortunate if all the good work being undertaken by Glasgow was undermined.

167. Additionally, we ask all local authorities to review their training and guidance to ensure the interpretation and implementation of child protection legislation is clear and unambiguous. Local authorities should report to us on their actions one year from the publication of this report.

168. We also ask the Care Inspectorate to consider how it can contribute to better social work practice around young asylum seekers and families with children, particularly as it is unlikely these groups will complain, the Care Inspectorate should therefore take a more proactive approach to ensure standards are set and being met, as we believe with scrutiny brings awareness, consistency and action. We ask for an update on the action undertaken a year from the publication of this report.
Destitution and human rights

169. Many of the third sector organisations argued that destitution of asylum seekers and people with insecure immigration status should be considered, first and foremost, as a humanitarian and human rights issue.

170. The SRC stated “clearly immigration status is an important factor in destitution in the UK and in Scotland but it is not the only one. International, European and domestic human rights instruments (and their associated monitoring mechanisms) have frequently censured states including the UK, for rendering, inter alia, undocumented migrants or those without requisite legal status, into situations of destitution”. 5

Human rights assessments

171. The No Recourse to Public Funds Network guidance in England - advises that assessing risk (and possible breaches) on return is integral to human rights assessments and to inform decisions on support.

172. The human rights assessment must determine—

• Whether the adult can freely return to their country of origin;

• Whether return to country of origin would cause a breach of the adult’s human rights under the European Convention on Human Rights (ECHR);

• Whether return to country of origin would cause a breach of the adult’s rights under European Community treaties (applicable to EEA nationals and family members of EEA nationals).

173. The SRC was concerned, the CoSLA guidance, ‘Establishing Migrants’ Access to Benefits and Local Authority Services’ which covers human rights assessments, focused on what no support would mean in terms of a human rights breach in the UK, and not the risks that may be faced if a person returned to their country of origin. 5

174. During our visits, it became apparent there was significant disparity in practice when undertaking human rights assessments. In some cases, we heard that the human rights assessment would be done at a later date after the initial social work assessment, which meant elements of a good case could be lost. Also, those advocating for the individual or family told us at times they had had to argue to have a human rights assessment undertaken at all.

175. In England, the No Recourse to Public Funds Network published practice guidance for English local authorities, covers the need for local authorities to undertake a human rights assessment which assess the risk of a person returning to their country of origin. Graham O’Neill, SRC, said, “knowledge is essential for a local authority to ensure that it is acting lawfully when it makes a decision on whether to give somebody support under the relevant legislation, and that the decision-making process is transparent and the decision can be justified if it is challenged.” 51
176. The Cabinet Secretary said it should be an integral part of a child’s needs assessment and, indeed, other community care assessments. It should become the way in which we do things, because we are all challengeable on whether we are fulfilling our human rights obligations. 54

Human rights challenges

177. Fiona MacLeod from BRC(S) stressed the importance of undertaking a human rights assessment because it not only reassured people their human rights were being considered, but also demonstrated the local authority had a fair and transparent process on which to base its decisions. Currently, she believed the process to be “completely impenetrable” making it difficult for people to “challenge social work or practice”. 55

178. Kirsty Thomson, IPLA, also considered the right to challenge decisions. She questioned the fundamental ability of destitute people to challenge whether their human rights had been breached. She considered although the route was available in principle the complexity of the legislation, the processes, and the ability to access specialist legal advice, meant there was a ‘deficit’ in access to justice. 56

Recommendations

179. We believe the human rights assessment is an area where there appears still to be a level of misunderstanding of roles and practice. We ask that the CoSLA guidance, ‘Establishing Migrants’ Access to Benefits and Local Authority Services’, is updated and clarifies these aspects as a matter of urgency. We ask for an update within three months from the publication of this report.

180. We ask local authorities to undertake Human Rights Assessments at the same time as an initial needs assessment is carried out. We ask for an update on implementation and effectiveness to be provided a year from the publication of this report.

Advocacy support

181. We were told changes in the provision of advocacy had made accessing the asylum process more difficult.

182. Migrant Help were appointed by the Home Office in 2014 to provide independent assistance to asylum seekers throughout the UK. The assistance includes telephone advice and literature in a wide range of languages, as well as face to face briefing. The advice they provide is tailored to local practices and legislation and includes referral to qualified solicitors where issues of a legal nature arise. 8
183. The Home Office advised a project had been established to design, develop and deliver new arrangements for asylum accommodation and support following the current contracts in 2019.  

184. Organisations told us advocacy support was as important for people at the end of the process as at the start. BRC(S) believed access to independent advocacy had a clear role in preventing people becoming destitute. Many of the destitute clients they see should be receiving some Home Office support, but due to the challenges engaging with the system and the high level of evidence required remained destitute.  

185. Rachel Morley, GPTS, considered a service for vulnerable adults, much like the Scottish Guardianship Service for young people, would be beneficial as there was a lack of support and advocacy for adults. She advised having to change what they hoped to do with people in terms of psychological therapy, because they were firefighting, doing advocacy, practical problem solving and safety planning.  

Olivia Ndoti  

186. Olivia Ndoti told us of her experience of destitution while pregnant and as a new mother and about how she had to struggle to get support for her son. Natalia Jane Farmer, a social work researcher from Glasgow Caledonia University, focuses
her research on people with no recourse to public funds and their interactions with social services and the local authority.

187. She told us about her involvement with Olivia Ndoti and said it had been a “quite gruelling fight” to secure her housing accommodation and appropriate financial support”. 59 Her biggest concern was about the “gatekeeping”. She advised In the assessment meetings, it was disturbing how Olivia was spoken to, even with her there as an advocate. She was called an illegal immigrant in meetings, which she found highly disturbing and inappropriate. Olivia had an IS96 form and is not in the UK unlawfully. 60

188. During our visits and briefings we also heard about 'gatekeeping' and the importance of advocacy support for clients at meetings to gain financial or other support.

189. Advocacy is fundamental to people’s ability to access their rights and entitlements. From the evidence we received there is a large proportion of people who do not get positive outcomes from the asylum process in the first instance, but once independent, skilled advocacy is in place go on to access financial support and accommodation and so have their destitution addressed. It can take many months or years to get assistance if you have NRPF because of insecure immigration status. We believe the current provision of advocacy through Migrant Help is inadequate for those who have become destitute.

Recommendations

190. We ask the Scottish Government, CoSLA and third sector partners to consider providing a fully funded independent advocacy service for destitute asylum seekers and people with insecure immigration. We believe early advocacy would save the public purse in the long-term through saving on, for example, health care and social services. It would provide the best opportunity for people to start the integration process. We ask for a progress report on the establishment of an independent advocacy service one year from the publication of this report.

191. Allied to the recommendation for a funded advocacy service we ask for a national coordinated practitioners’ network to be established, which would include, Scottish Government officials, representatives from health boards, CoSLA and local authorities, non-government organisations and third sector organisations, and legal practitioners. This will enable all parties to share best practice and highlight concerns which may have arisen with changes to legislation or practice. The practitioners’ network should be integral to the development of the Scottish anti-destitution strategy. Again, we ask for a progress report one year from publication of this report.
Increasing levels of destitution

Wider dispersal of asylum seekers

192. Dispersal is the process by which the Home Office moves someone it is supporting to accommodation around the UK. They are first moved into initial accommodation while their application for asylum support is processed. Once the application has been processed and approved they are moved to dispersal accommodation.

193. While Glasgow has been the sole dispersal area in Scotland, a small number of people in the asylum process who do not require housing and/or support continue to live in different local authority areas. 61 A letter from Rt Hon James Brokenshire MP, then Minister for Immigration, to the House of Commons Home Affairs Select Committee in January 2016 listed all local authorities in the UK which housed asylum seekers in dispersal accommodation up to that point. In addition to Glasgow, this included Lanarkshire and Renfrewshire. 62

194. There have been discussions between the Scottish Government and the Home Office to increase the number of local authorities in Scotland involved in dispersal of asylum seekers. The Scottish Government notes that—

“This process is likely to take some time, but, depending on the outcome of these discussions, there will be work for the group to do in terms of sharing learning with new councils and inviting them to become involved in the strategy”. 61

195. The House of Commons Library published a background briefing on dispersal policy, for a debate in April 2016, which refers to widening the asylum seeker dispersal arrangement across the UK. 63

196. While there is clearly a desire from local authorities to provide all they can to support asylum seekers and people with insecure immigration status, many considered they do not currently have the experience, expertise, knowledge or resources to adequately support wider asylum dispersal. A number of barriers were identified, including—

- Lack of financial resources
- Lack of knowledge and expertise
- Language challenges
- Local housing capacity
- Access to a support network from the third sector.

197. On financial resources, Angus Council agreed to be involved in a pilot programme, but had concerns—
“Availability of funding for local authorities, partnerships or health boards for some of the programmes and reducing funding for others which does not help to negate the increased risk of homelessness and the potential resource requirement via homelessness services. Unknown longer term cost implications due to potential outcomes of asylum applications and the consequent processes for people to be either assimilated into the UK or be deported.” 64

198. The Cabinet Secretary felt it was important that participation in programmes for the dispersal system was voluntary—

“Local authorities’ reticence is in relation to the support—particularly financial—that is available for them to participate. There is an overwhelming desire to help, and concerns are usually around the immigration and asylum system.” 41

199. In terms of provision of legal advice to potential dispersal areas, the Immigration Law Practitioners’ Association (ILPA) stated there were "challenges" because legal advice on immigration is concentrated in Glasgow and Edinburgh (with some private immigration law advice concentrated around Aberdeen but for a very different client group from the destitute). There were also challenges where there was a lack of interpreters in the area where the person lived. 65

Recommendation

200. We ask when considering the wider dispersal of asylum seekers to other areas of Scotland, the Scottish Government should give consideration to ensuring that there is a sufficient and resourced provision of trained and knowledgeable immigration lawyers accessible to the proposed place of dispersal. The recommended establishment of a multi-agency network should also help local authorities build up their knowledge and expertise quickly should they become involved with wider dispersal. We ask for an update one year from the publication of this report.

Immigration Act 2016

201. The UK Government has said that the Immigration Act 2016 will “introduce new sanctions on illegal working, prevent illegal migrants accessing services and introduce new measures to enforce immigration laws”. 66

202. Section 66 of the Act (not yet in force) aims to restrict the support given to people whose claims for asylum have been rejected (and their dependents). The UK Government “expect more illegal migrants to leave the UK rather than access support”. 67
203. Currently, families with children who have had their asylum claim rejected, continue to receive support under section 95 of the Immigration and Asylum Act 1999. This support will stop.

Section 4 will be repealed and support will only be available to failed asylum seekers and any dependent children if there is a genuine obstacle that prevents them from leaving the UK at the point their appeal rights are exhausted. 67

204. Sections 68-73 of the Immigration Act 2016 create a mechanism for UASC to be transferred from one local authority to another either voluntarily or under an enforced scheme. This applies in England but can be extended to other parts of the UK by secondary legislation. 68

205. Section 68 and Schedule 12 of the Immigration Act 2016 creates an exception to local authority care obligations based on migration status. A local authority would no longer be required to support a formerly looked-after child who reaches the age of 18. This applies to England with a power to extend to Wales, Scotland and Northern Ireland by secondary legislation. The UK Government stated—

These are adult migrants whose asylum claims and any subsequent appeal have failed. As such, it is wrong that Local Authorities should have to support them under Children Act provisions geared to the needs of those leaving Local Authority care whose long-term future is in the UK. We also want to discourage unaccompanied children from seeking to come to the UK to claim asylum for the wrong reasons, especially where this involves dangerous travel routes controlled by people smugglers and traffickers”. 68

206. Kirsty Thomson, ILPA, was interested in the potential for legal challenge in Scotland to possible secondary legislation stemming from the 2016 Act. 69 Particularly, the use of secondary legislation to implement certain provisions in Scotland meant that where the provisions were found to be incompatible with the Human Rights Act 1998 the regulations could be struck down, whereas provisions of primary legislation could only be declared incompatible. It is also understood the UK Government has indicated it does not consider legislative consent motions are required for the extensions. 70

Conclusion and Recommendation

207. We heard refused asylum seekers and people with insecure immigration status are unlikely to return to their country as they fear the treatment in their home country more than being destitute in the UK. The impending 2016 Act and subsequent changes to support have real potential to compound the issue of destitution. The reduction in support, coupled with the power to compel local authorities to participate in dispersal, gives rise to significant concerns. The majority of the Committee believes, based on current experience, the 2016 Act risks exposing more people to destitution which could either further traumatising people or make them vulnerable to exploitation. vi
208. We ask the Scottish Government to undertake a Scotland-wide consultation before any regulations are made to extend the Home Office regulated local authority support provision contained within Schedule 12 of the Immigration Act 2016 to Scotland in order to assess properly the impact of destitution for migrant children and families. A progress report is required within one year of the publication of this report.

vi Jeremy Balfour MSP dissents from paragraph 207 as he does not accept the conclusion reached. Annie Wells MSP also dissents from this paragraph.
Annex A

**5th Meeting, Thursday 23 February 2017**

1. Destitution and Asylum in Scotland (in private): The Committee considered its approach to the inquiry.

**7th Meeting, Thursday 16 March 2017**

1. Destitution, asylum and insecure immigration status in Scotland: The Committee took evidence from—

   • Fiona MacLeod, Senior Policy and Public Affairs Officer, British Red Cross (Scotland);
   • Tam Baillie, Commissioner, Children and Young People's Commissioner in Scotland;
   • Judith Robertson, Chair, Scottish Human Rights Commission;
   • Graham O'Neill, Policy Officer, Scottish Refugee Council;
   • Jo Ozga, Policy Worker, Scottish Women’s Aid;

   and then from—

   • Neil McKittrick, Refugee Services Manager, British Red Cross (Northern Ireland);
   • Kirsty Thomson, Co-Convenor, Immigration Law Practitioners Group in Scotland;
   • Robina Qureshi, Director, Positive Action in Housing;
   • Rani Dhanda, Researcher, Positive Action in Housing;
   • David Bradwell, Refugee Co-Ordinator, Scottish Faith Action on Refugees.

2. Destitution, asylum and insecure immigration status in Scotland (in private): The Committee considered the evidence received.

**8th Meeting, Thursday 23 March 2017**

1. Destitution, asylum and insecure immigration status in Scotland: The Committee took evidence from—

   • Andrew Morrison, Policy Manager, COSLA Strategic Migration Partnership;
   • Alexis Chappell, Service Manager, Dundee City Health and Social Care Partnership;
   • Rachel Morley, Principal Clinical Psychologist, NHS Greater Glasgow & Clyde Psychological Trauma Services;
   • Jane Smith, Welfare Rights Officer, Angus Council;
   • Annette Finnan, Head of Area Services, and Arun Singh, Child and Family Services Manager, South Lanarkshire Council;
• Sean Bell, Acting Senior Manager, Children's Practice Teams, the City of Edinburgh Council.

2. Destitution, asylum and insecure immigration status in Scotland (in private): The Committee considered the evidence received.

9th Meeting, Thursday 30 March 2017

2. Destitution, asylum and insecure immigration status in Scotland: The Committee took evidence from—

• Natalia Jane Farmer, Social work researcher, and Olivia Ndoti, Service User, ASH - Asylum Seeker Housing Project;

• Derek Mitchell, Chief Officer, CoSLA Strategic Migration Partnership;

• Susanne Millar, Chief Officer for Strategy, Planning and Commissioning, Glasgow City Health and Social Care Partnership;

• Chief Inspector Alastair Muir, Police Scotland.

3. Destitution, asylum and insecure immigration status in Scotland (in private): The Committee considered the evidence received.

10th Meeting, Thursday 20 April 2017

2. Destitution, asylum and insecure immigration status in Scotland: The Committee took evidence from—

• Helen Happer, Chief Inspector, and Thirza Wilson, Service Manager for Registration and Inspection, Care Inspectorate;

and then from—

• Angela Constance, Cabinet Secretary for Communities, Social Security and Equalities, Lesley Irving, Head of Equality Policy, Equality, Human Rights and Third Sector Division, and Carolyn Younie, Head of Corporate Parenting and Formal Care, Scottish Government.

3. Destitution, asylum and insecure immigration status in Scotland (in private): The Committee considered the evidence received.

12th Meeting, Thursday 11 May 2017

1. Destitution, asylum and insecure immigration status in Scotland (in private): The Committee considered a draft report.

13th Meeting, Thursday 18 May 2017

1. Destitution, asylum and insecure immigration status in Scotland (in private): The Committee considered a revised draft report.
Annex B

Written Submissions of Evidence

- Anonymous via Central and West Integration Network (CWIN) in Glasgow - CWIN5
- Anonymous via CWIN - CWIN6
- Anonymous via CWIN - CWIN7
- Anonymous via CWIN - CWIN8
- Anonymous via CWIN - CWIN9
- Anonymous via CWIN - CWIN10
- Anonymous via CWIN - CWIN11
- Anonymous via CWIN - CWIN12 with translations into Farsi
- Anonymous via CWIN - CWIN13 with translation into Farsi
- Anonymous via CWIN - CWIN14 with translations into Farsi
- Anonymous via CWIN - CWIN15 with translations into Farsi
- Anonymous via CWIN - CWIN16 with translation into Farsi
- Anonymous via CWIN - CWIN17 with translation into Farsi
- Anonymous via CWIN - CWIN18 with translation into Arabic
- Anonymous via CWIN - CWIN19 with translation into Arabic
- Anonymous via CWIN - CWIN20 with translation into Arabic
- Anonymous via CWIN- CWIN21 with translation into Arabic
- Anonymous via CWIN - CWIN22 with translations into Farsi
- Anonymous via GLADAN
- Anonymous via GLADAN- JH: experience of hosting
- Anonymous via GLADAN - JH: experience of hosting
- Anonymous via GLADAN - JH: experience of hosting
- Anonymous via GLADAN - JH: experience of hosting
- Anonymous via GLADAN - JH: experience of hosting
- Anonymous via Unity Centre, Glasgow - 1
• Anonymous via Unity Centre, Glasgow - 2
• Anonymous via Refuweegee
• Anonymous via Refuweegee
• Anonymous via Refuweegee
• Anonymous via Refuweegee
• Anonymous via Refuweegee
• Anonymous via Refuweegee
• Anonymous via Refuweegee
• Aberdeenshire Council
• Aberdeenshire Health and Social Care Partnership
• Angus Council
• Angus Health and Social Care Partnership
• Anti-Trafficking Monitoring Group
• Argyll and Bute Council
• Asylum Seeker Housing Project
• Barnardo's and NSPCC Scotland
• Beaumont, Sally Ms
• City of Edinburgh Council
• Comhairle nan Eilean Siar/Western Isles Council
• COSLA
• Dumfries and Galloway Council
• Dumfries and Galloway NHS Board
• Dundee Health and Social Care Partnership
• East Ayrshire Council
• East Dunbartonshire Health and Social Care Partnership
• East Lothian Council
• East Renfrewshire Health and Social Care Partnership
• Falkirk Health and Social Care Partnership
• GLADAN
• Glasgow City Health and Social Care Partnership
• Glasgow Night Shelter
• Glasgow Psychological Trauma Service
• Healthcare Improvement Scotland
• Hemat Gryffe Women's Aid
• Highland Council
• Immigration Law Practitioners’ Association (ILPA)
• Law Society of Scotland
• Maternity Action
• Mental Health Foundation
• Midlothian Council
• Netto, Gina Dr
• NHS Education for Scotland
• NHS Fife
• NHS Grampian
• NHS Health Scotland
• NHS Lanarkshire
• NHS National Services Scotland
• NHS Tayside
• NHS24
• North Ayrshire Council
• North Lanarkshire Council
• NUS Scotland
• Orkney Islands Council
• Quakers in Scotland (the tripartite submission from the following organizations: the Religious Society of Friends in Britain, Quakers in Scotland and the Quaker Asylum and Refugee Network)
• Perth and Kinross Health and Social Care Partnership
• Police Scotland
• Positive Action in Housing
• Red Cross
• Refugee Survival Trust
• Refugee Women's Strategy Group
• Refuweegee
• Renfrewshire Council
• Scottish Ambulance Service
• Scottish Borders Council
• Scottish Faiths Action for Refugees
• Scottish Refugee Council
• Scottish Women's Aid
• South Ayrshire Council
• South Lanarkshire Health and Social Care Partnership
• Stirling Council
• St Rollex Community Outreach
• Swiney, Margaret Ms
• Waverly Care
• West Dunbartonshire Council
• West Dunbartonshire Health and Social Care Partnership
• Williamson, Andrea E. Dr
• Williamson, Andrea E. Dr and Caitlin Jones

**Supplementary Submissions:**

• the European Committee of Social Rights (ECSR), Council of Europe
• the Office of the High Commissioner for Human Rights (OHCHR)
• Scottish Refugee Council
• COSLA
• ILPA Recommendations for Scotland Destitution Inquiry
Equalities and Human Rights Committee

Hidden Lives - New Beginnings: Destitution, asylum and insecure immigration status in Scotland, 3rd Report (Session 5)


[34] St Rollox Community Outreach. (2017). Written submission.


[38] CoSLA. (2017). Supplementary written submission.


