Response to the Equalities and Human Rights Committee consultation

Destitution and Asylum in Scotland

The Mental Health Foundation

Changing minds, changing lives

Our vision is for a world with good mental health for all.

Our mission is to help people understand, protect and sustain their mental health.

Prevention is at the heart of what we do, because the best way to deal with a crisis is to prevent it from happening in the first place. We inform and influence the development of evidence-based mental health policy at the national and local government level. In tandem, we help people and communities to access information about the steps they can take to reduce their mental health risks and increase their resilience. We want to empower people to take action when problems are at an early stage. This work is informed by our long history of working directly with people living with or at risk of developing mental health problems.

The Mental Health Foundation is a UK charity that relies on public donations and grant funding to deliver and campaign for good mental health for all.

Website  www.mentalhealth.org.uk
Twitter  @MHF_tweets
Facebook  www.facebook.com/mentalhealthfoundation
Contact  Mohamed Omar, Policy and Development Officer (Refugees)  Momar@mentalhealth.org.uk
The Mental Health Foundation is pleased to have the opportunity to respond to the Equalities and Human Rights Committee consultation on destitution and asylum in Scotland. As a public mental health organisation centred on preventing mental ill health, our response will explore the effect of the gaps in the response to destitution from Scottish public authorities on asylum seekers and those with insecure immigration status in Scotland, and identify opportunities to better support and protect wellbeing moving forward.

Our response will be centred around the protection of three core elements that can support an individual’s mental health; having a place to stay, having a role to play, and having a community to belong to. Evidence suggests that these measures of wellbeing are not provided to destitute asylum seekers which have a very real and negative impact on the mental health of this vulnerable group.

**Mental health and destitution**

Research from the Mental Health Foundation, published alongside NHS Health, on destitution found that “the effect of destitution have further implications on material wellbeing and individual assets, and ability to make choices about one’s life...this also has direct impact on a personal emotional and psychological wellbeing”\(^1\).

Although this study was open to both asylum seekers and refugees, destitute asylum seekers were also able to take part in the participatory research and the key findings were as follows:

- The impact that seeking asylum has on a person is not addressed properly (for example, in relation to trauma, mental health, and emotional wellbeing).
- Racism and islamophobia are serious concerns within healthcare provision. This was found to be less of a systemic issue, rather more of a problem at the individual level (for example, in relation to individual receptionists, individual GPs, and hospital staff).
- The majority of participants felt as if their human rights were either violated, not taken into consideration, or were not fulfilled.

The research demonstrated that symptoms of depression, anxiety, and agoraphobia are common among asylum seekers and refugees in Glasgow. In most cases this can be linked to bereavement, displacement, and/or torture. This issue is aggravated further because destitute asylum seekers have very little access to support. The lack of support include and are not limited to secure access to food and accommodation which often leaves asylum seekers in a growing sense of hopelessness.

**The 'trauma' of the immigration system**

The trauma that asylum seekers and refugees experience in their country of resettlement as a result of pervasive racism, violence, social isolation and hostility has further negative implications on this groups mental health and wellbeing. As stated in our 2016 participatory study, once you wear a headscarf “...they know your religion, they don’t care”. In addition, many of those who are destitute

---

1 Quinn et al. (2011) An evaluation of the Sanctuary Community Conversation programme to address mental health stigma with asylum seekers and refugees in Glasgow Evaluation of Sanctuary Community Conversation programme to address mental health stigma with asylum seekers and refugees, pp 6


have been in the asylum system for a long time, some for years. Nigerian and Zimbabwean people are particularly ‘trapped’ in this way. The study highlighted the cycle of destitution experienced by this vulnerable group; some of those involved in the study have been asylum seekers for years, are made destitute, then are forced to have new claims raised – the cycle then continues. This process proves detrimental for the anxiety induced by the lack of control of those affected.

The effects of the complex immigration system, and of being made destitute, put strain on peoples’ everyday lives and therefore mental wellbeing. The individual in question must lodge an application and undergo a ‘screening’ interview either on arrival at a port or airport, or, if already in the UK, in Croydon. If destitute and eligible for support, applicants will be relocated on a no choice basis to a dispersal area around the UK, where they will attend an asylum interview and await a decision from the Home Office on their application. For instance, the mental wellbeing of parents affects their children. For instance, another participant expressed, “I stay strong for my children. They cannot see me like this (weak and afraid)”.

Housing and access to healthcare

When a person is made destitute, access to vital facilities such as housing and healthcare made much more difficult and can have serious implications for their health and wellbeing. Lynnda Wardle, Acting Director at Interfaith Glasgow, describes destitute asylum seekers as “forgotten people”. She outlines how people who are destitute often have very real difficulties accessing healthcare they need. For instance, temporary housing in shelters can make managing hospital appointments very challenging as this does not provide the individual with a permanent address therefore reducing the chances the individual will be able to receive the support they require.

Similar issues can be seen in relation to housing. Jamie Spurway, Training Consultant at Spurway Training outlines how even those who are ‘sofa-surfing’ and do not get exploited will almost inevitably experience negative effects on their mental health. Destitute asylum seekers talk about slowly burning through all their friendships, as acquaintances let them sleep on their floors and feed them but eventually start to resent the burden. He adds, with just over £5 per person, per day, asylum seekers who still have an active claim do not have enough money to adequately feed and clothe themselves let alone an additional person. Jamie Spurway states that the ‘host’ asylum seeker also risks being evicted from their accommodation and having their own support terminated if it is discovered that they are allowing a refused asylum seeker to stay with them.

Destitution and risk of exploitation

Refugees and asylum seekers already experience extreme vulnerability in the community are made even more so when made destitute; this is especially true of women, those with pre-existing mental health issues (for example torture survivors) and the young. Jamie Spurway, a recognised expert in this field, comments that pregnant women can even be made street homeless by the asylum system. All children are protected by law from being made street homeless, but shockingly, the

---

2 http://www.socialwork.ed.ac.uk/__data/assets/pdf_file/0003/148881/TheycallmeyouareAIDS.pdf
3 http://www.scottishrefugeecouncil.org.uk/assets/0001/1369/Anti-stigma_briefing_FINAL.pdf
5 https://spurwaytraining.com/tag/jamie-spurway/
unborn child does not have the same rights! The Mental Health Foundation has developed *Amaan – a guide to support asylum seekers and refugees mental health and ways to look after your wellbeing for asylum seeking and refugee women* to alleviate the pressure and address mental health issues within this community.

**What are the next steps?**

The Mental Health Foundation refugee team are delivering several programmes to support asylum seekers and refugees including those who are most vulnerable and have greatest need. Our programmes work directly to empower individuals and communities. We also work at strategic level with local integrated partnerships and boards in addition to supporting the New Scots Strategy. We believe that:

1. Peer research can best help us understand this issue further – especially the mental health impact of destitution combined with additional risk factors.
2. That we can help address the needs of destitute asylum seekers through community and service developments.
3. That we should explore all options for progressive policy development at a UK-level and/or through greater devolved powers in Scotland.

Our refugee programme team of Amal Azzudin and Mohamed Omar have extensive personal and professional expertise in this field and would be delighted to provide oral evidence. We are happy to support this review further.
KEY MENTAL HEALTH FOUNDATION REPORTS FOR CONSIDERATION


