

Meeting the health needs of the asylum seeking population: workshop

Health Inclusion Team

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Who are refugees, asylum seekers and undocumented migrants?



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Refugee

Defined by the UN Geneva Convention 1951,
is a person who:

- has a well-founded fear of persecution for reasons of race, nationality, membership of a particular social group, or political opinion; and
- is outside the country they belong to or normally live in; and
- is unable or unwilling to return home for fear of persecution



- **Asylum seeker**

a person who is making an application for asylum and is awaiting a decision (includes appeals)

- **Failed asylum seeker**

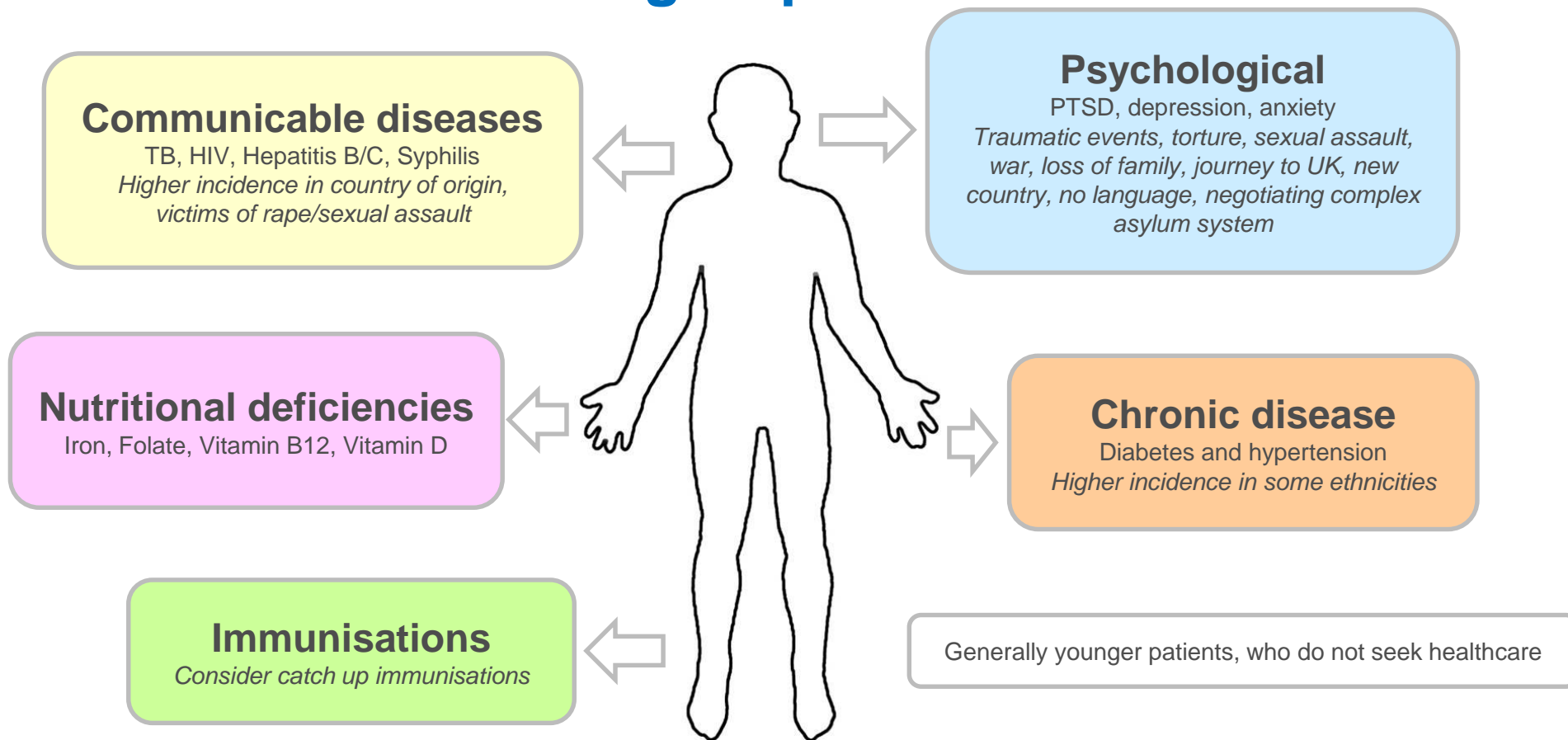
refused asylum, including appeals

- **Undocumented migrant - “illegal immigrant”**

What are the health needs of client group?

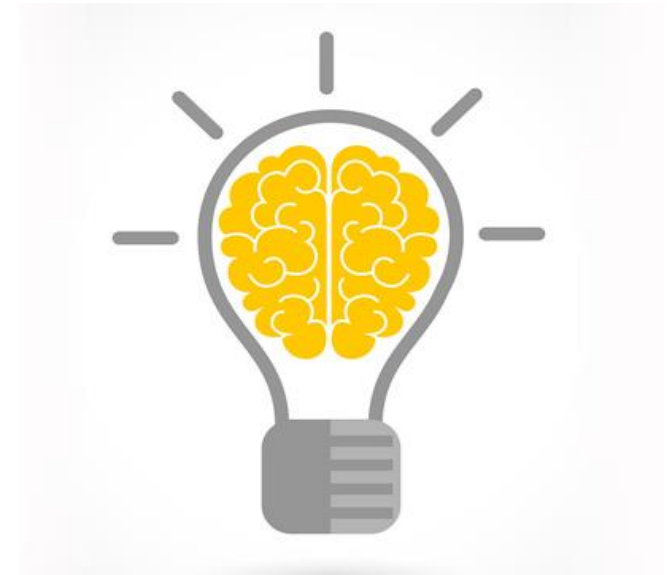


Health needs of client group



Scenarios x 4

- Groups of 5 people
- 15 minutes to discuss your case
- Relate to your own practice/experience



Points to consider

1. What are your main concerns for this client?
2. What immediate action would you take?
3. What additional information would help you in making your decision?
4. What would your long-term follow-up be?

Scenario A

Aziz is a 35-year-old male from Iran. He arrived in the UK 1 year ago. He was placed in Home Office Initial Accommodation yesterday.

Aziz has presented today with stress, anxiety, difficulty sleeping and is requesting medication. He explains he previously had thoughts of suicide, but denies having these thoughts at present.

Aziz reports that he was tortured in Iran by police officers. When he came to the UK, his first application was refused and this increased his stress levels.

Possible actions

- Register with GP
- Freedom from Torture referral
- Community Mental Health Team referral
- Consider sexual assault/rape?
BBV screening

Scenario B

Nertila is a 22-year-old Albanian lady recently arrived in the UK. She has presented at your clinic at approximately 30 weeks gestation with no prior antenatal care.

During the consultation, Nertila discloses that she does not know who the father of the pregnancy is; she was trafficked and used as a prostitute in Belgium. She managed to escape to the UK. Nertila was not happy with the pregnancy at first. She now wants to go ahead with the pregnancy as abortion is against her religion.

Today, Nertila is experiencing abdominal pain that started last night.

Possible actions

- Referral to Maternity Assessment Unit
- Referral to local antenatal team
- Register with GP
- Referral to Human Trafficking National Referral Mechanism
- Potential child protection issues?
- Long-term – look into client's emotional well-being and possible referrals from this

Scenario C

Aisha is a 19-year-old lady who has arrived in the UK alone. Aisha speaks no English and tends to keep to herself.

In clinic, with an interpreter present, Aisha explains that she feels anxious and lonely. She does not know where her family is and is worried about her asylum claim because she finds the system and interview process confusing and scary. Aisha denies any personal history of abuse, torture or imprisonment but describes her journey to the UK as very stressful.

Today, Aisha is presenting with difficulty sleeping and feeling very isolated.

Possible actions

- Register with GP
- Referral to Improving Access to Psychological Therapies (IAPT)?
- Therapeutic Counselling Service (Refugee Council)
- Community support groups
- Red Cross – family reunion

Scenario D

Nasser is a 25-year-old man sofa-surfing between different friends' homes. He works odd jobs, cash in hand carrying out manual labour. Nasser is an undocumented migrant.

He has presented today complaining of a persistent cough, night sweats and lethargy. He has no significant past medical history.

Possible actions

- Referral to Community TB Team
- If clinically unwell, refer to A&E
- Register with GP
- Voluntary organisations for social support

Support contacts

General Support:

- *British Red Cross* – orientation, destitution, support for young people, family reunion
www.redcross.org.uk/What-we-do/Refugee-support
- *Migrant Help* – Advice, policy guidance, advocacy, asylum support
www.migranthelpuk.org/

Support contacts cont...

Human trafficking:

- *The Salvation Army* – Referral into NRM, safe-houses, emotional support

www.salvationarmy.org.uk/human-trafficking

- *Modern Slavery Helpline*

0800 0121 700

- *Police*

101/999

Support contacts cont...

Emotional counselling and support:

- *Refugee Council* - counselling, women's projects, psycho-social group work
www.refugeecouncil.org.uk/what_we_do/therapeutic_casework
- *Freedom from Torture* – psychological support specifically for those who have experienced torture
www.freedomfromtorture.org/
- *IKWRO* – Counselling support for those experiencing DV, FGM, forced marriage, violence (For Middle Eastern and Afghan women only. Must be Kurdish, Arabic, Turkish, Farsi, Dari, Pashtu or English speaking)
<http://ikwro.org.uk/need-help-now/counselling/>

Thank you!

- Hand out of useful contacts for practitioners
- Hand out on entitlements to healthcare
- Any questions?

