

## **1. Background: Analysis of the legal and policy framework**

### **a. Legal and policy framework**

**What are the regulations in place regarding access to basic services for migrants (non-nationals) in regional and/or national law? Is there a difference of treatment in terms of access to basic services between nationals and migrants (non-nationals) in your country?**

In 2019, British Red Cross Refugee Support services across 58 towns and cities in all four nations of the UK provided support to over 35,000 people of whom 16,000 people accessed destitution support. We support people at all stages of the asylum process and vulnerable migrants, including people newly arrived in the UK and people refused asylum. Each year we support thousands of people who face destitution and homelessness because their immigration status means they are not allowed to work, have no access to public funds or housing and struggle with accessing and living on asylum support<sup>1</sup>.

#### **Access to welfare support and ‘Public Funds’**

Many people in the UK who have insecure immigration status or who are ‘subject to immigration control’, as set out by section 115 of the Immigration and Asylum Act 1999, are restricted from accessing public funds, including welfare benefits, housing and homelessness support from public authorities and in some cases secondary healthcare.

People in this situation are described as having ‘No Recourse to Public Funds’, this can either be an official restriction printed on their Biometric Residence Card or connected to having no leave to remain in the UK, including people who have overstayed visas or people seeking and refused asylum. There are some exceptions to these restrictions and some welfare benefits are not considered ‘public funds’ for the purposes of immigration control<sup>2</sup>.

#### **Access to healthcare**

In the UK primary healthcare services including GP and nurse consultations and treatment are free of charge to all. For secondary care services, the UK’s healthcare system is residence-based, which means that people without settled status in the UK or without secure immigration status can be charged for access to secondary healthcare, including hospital treatment such as maternity services, although people should not be denied ‘urgent or immediately necessary treatment’. Immigration checks can be carried out on people seeking secondary healthcare in the UK. In practice this causes confusion and can cause significant barriers, including fear of immigration enforcement, for people from migrant backgrounds<sup>3</sup>.

#### **Support for people seeking asylum**

People seeking asylum in the UK are not allowed to work and do not have access to public funds, including mainstream welfare benefits and housing. The UK Government provides accommodation and support to people seeking asylum who are facing destitution ‘Asylum Support’.

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<sup>1</sup> <https://www.redcross.org.uk/about-us/what-we-do/we-speak-up-for-change/improving-the-lives-of-refugees/ending-refugee-poverty>

<sup>22</sup> For a full list of welfare support measures considered ‘public funds’ see <https://www.gov.uk/government/publications/public-funds--2/public-funds>

<sup>3</sup> <https://www.equalityhumanrights.com/en/publication-download/making-sure-people-seeking-and-refused-asylum-can-access-healthcare-what-needs>

Access to Asylum Support requires the applicant to prove they are destitute meaning that they do not have 'adequate accommodation or any means of obtaining it' and/or 'cannot meet their other essential living needs'. Asylum support can be requested at an asylum screening interview or by completing a 33-page application form and gathering relevant supporting evidence. Generally, applicants require support from voluntary sector agencies to prepare applications.

Asylum support is provided in the form of shared accommodation including shared bedrooms and basic financial support of £37.75 per person per week. People refused asylum can also apply for accommodation and voucher based financial support if they meet specific criteria, including taking steps to leave the UK. The £37.75 that people seeking asylum receive per week contrasts with between £85 to £102 per person per week that people receive through mainstream welfare support in the UK<sup>4</sup>.

#### **b. Measures adopted by States/Governments in the context of COVID-19**

**What measures has your country adopted during COVID-19 (measures aimed at containing the spread of the virus, compensatory funds, etc.)**

The UK Government has introduced different measures across 2020 in response to Covid-19. Some of the welfare support measures include:

- Increase to basic Universal Credit welfare payments by £20 per week
- Coronavirus Job Retention Scheme and Self-Employed Income Support Scheme
- Ban on evictions from private rented accommodation
- Funding for Local Authorities to provide Local Welfare Cash Assistance, emergency food provision and other essential needs
- Funding for 'Everyone In' scheme to house all rough-sleepers during the pandemic

**To what extent were migrants included (or excluded) in policies aimed at preventing and responding to COVID-19 and its impact? And How effective have policies put in place by local/national governments (if any) been in addressing the vulnerabilities experiences by migrants? Did these policies include any kind of “firewalls” or measures to safeguard migrants’ personal information (including about their legal status) when accessing services?**

The International Federation of the Red Cross Red Crescent has set out that migrants, including people seeking asylum, are among the [Least Protected, Most Affected](#) across the world during the Covid-19 pandemic. The UK is no exception, many of the welfare support measures introduced in response to Covid-19 have excluded migrants with No Recourse to Public Funds (NRPF). The British Red Cross and organisations across the UK have raised concerns that existing government policies can place vulnerable migrants at additional risk during Covid-19 and may pose wider public health concerns unless emergency measures are introduced to ensure people can access healthcare, meet their immediate material needs and continue to access a functioning immigration and protection system.

Some of the emergency measures introduced in response to Covid-19 have included support for migrants and there have been specific emergency measures introduced in the immigration and asylum system in response to Covid-19 restrictions.

#### **1. Access to essential services and living needs**

Across the UK devolved governments, Local Authorities<sup>5</sup>, social landlords, parliamentary select committees<sup>6</sup> and charities<sup>7</sup> have called for the government to lift restrictions on access to public funds for those subject to the No Recourse to Public Funds condition during the pandemic to ensure that everyone can access basic services and have the support they need to keep themselves, their loved ones and their communities safe. The government has not introduced any lift to the restrictions around access to public funds for people with insecure immigration status. However, some of the emergency measures introduced in response to Covid-19 have included support for migrants.

### Financial support

Migrants with NRPF and people seeking asylum are excluded from accessing welfare benefits in the UK or any local welfare assistance payments from their Local Authorities. A recent study by the Joseph Rowntree Foundation of destitution in the UK found that “people who had migrated to the UK faced disproportionate risks of destitution and had less access to cash and in-kind forms of support than UK nationals living in destitution”.<sup>8</sup>

People seeking asylum who are destitute may be eligible to access asylum support payments of £37.75 per week. In response to the pandemic the UK government introduced an uplift to asylum support payments in June 2020 of £1.75 per week, this contrasts to the £20 per week increase to Universal Credit introduced in March 2020 for people with settled status and UK nationals. The British Red Cross and partners wrote to the Home Secretary to request a reconsideration of this decision<sup>9</sup> but since then the only change has been a further 3 pence per week increase, bringing the total weekly payment to £39.63. Asylum Support rates do not allow people to meet their basic living needs in normal times let alone during this pandemic. People in the asylum system are struggling to meet their essential living needs and are faced with impossible choices between buying food or a phone top up to speak to their loved ones.

**Everyone should be supported to meet their basic needs and keep themselves and others safe.** To achieve this, the Home Office should:

- Suspend No Recourse to Public Funds conditions during the pandemic
- Increase asylum support rates in line with the £20 uplift to Universal Credit

### Housing and homelessness

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<sup>5</sup> <https://www.local.gov.uk/councils-call-suspension-no-recourse-public-funds-during-covid-19-crisis>

<sup>6</sup> <https://publications.parliament.uk/pa/cm5801/cmselect/cmworpen/178/17807.htm>

<sup>7</sup> <https://www.citizensadvice.org.uk/about-us/policy/policy-research-topics/welfare-policy-research-surveys-and-consultation-responses/welfare-policy-research/nowhere-to-turn-how-immigration-rules-are-preventing-people-from-getting-support-during-the-coronavirus-pandemic/>;  
[https://www.crisis.org.uk/media/242412/home\\_for\\_all\\_policy\\_briefing.pdf](https://www.crisis.org.uk/media/242412/home_for_all_policy_briefing.pdf)

<sup>8</sup> Destitution in the UK 2020, Joseph Rowntree Foundation and Herriot Watt University, December 2020  
<https://www.jrf.org.uk/report/destitution-uk-2020>

<sup>9</sup> See letter here <https://asylummatters.org/2020/06/10/over-220-organisations-write-to-the-home-secretary-demanding-an-increase-asylum-support-rates/>

The UK Government announced March 2020 that all evictions from asylum support would be suspended in response to the pandemic<sup>10</sup>. This safeguarded nearly 50,000 people seeking asylum from risks of homelessness and destitution.

In March 2020 the UK government also set out the 'Everyone In' homelessness scheme which aimed to provide accommodation to everyone who was rough-sleeping, including people with No Recourse to Public Funds. Many Local Authorities provided emergency accommodation to migrants who were sleeping rough through this funding scheme. Around 50% of the 5,400-people taken into emergency accommodation in London during 'Everyone In' had NRPF or were European nationals not eligible for support under normal circumstances<sup>11</sup>.

Some Local Authorities such as the Greater London Authority explicitly committed to safeguarding person data and immigration status, however this was not the case across Local Authorities meaning people might fear that their data would be shared for immigration enforcement purposes if they accepted housing support. The Government did not make any changes to 'No Recourse to Public Funds' restrictions or the legislative powers and duties connected to eligibility for housing support. This led to mixed practice across different local government authorities who were left to make decisions between the public health measures and existing funding and legislative constraints<sup>12</sup>.

These measures have all been temporary interventions. Despite increasing cases of Covid-19 and connected restrictions, the funding for the 'Everyone In' scheme ended in June 2020 and in September 2020 the Government announced it planned to restart evictions from asylum support. These decisions leave vulnerable people facing homelessness and destitution at a time when the UK faces rising cases of Covid-19 and increasing restrictions and local lock-down measures in response to public health risks. In a contrasting example of good practice, devolved governments in Scotland and Wales explicitly committed to ongoing housing for all rough-sleepers throughout the pandemic, including migrants and people with No Recourse to Public Funds.

As research by the British Red Cross [Can't Stay, Can't Go](#) found, many people refused asylum face barriers to leaving the UK leaving them trapped in limbo and destitution because they can't get travel documents or are stateless – their country refuses to recognise them as a citizen. Others may be working to gather evidence for an appeal or to make a fresh claim for asylum. They may believe the decision made on their asylum claim is incorrect and they will be in danger if they return home. Migrants and people refused asylum have few alternative support options as they are excluded from mainstream housing support. At present voluntary sector services, including smaller hosting schemes and night shelters that provide temporary support to alleviate some of the worst impacts of destitution, are simply not able to operate at the same capacity or provide support in line with local public health restrictions.

**No-one should be evicted into homelessness and destitution** - The Home Office should extend the suspension on evictions from asylum support throughout the pandemic and the

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<sup>10</sup> British Red Cross press release <https://www.redcross.org.uk/about-us/news-and-media/media-centre/press-releases/welcomes-announcement-that-home-office-will-pause-all-evictions-from-asylum-accomodation#:~:text=The%20British%20Red%20Cross%20has,accommodation%20in%20the%20coming%20months>.

<sup>11</sup> Data from <http://www.ngdp.org.uk/lessons-learnt-councils-response-rough-sleeping-during-covid-19-pandemic#issues>

<sup>12</sup> For more detail see <https://www.nrpfnetwork.org.uk/information-and-resources/policy/covid-19-and-everyone-in>

UK government should ensure all people housed through the 'Everyone In' scheme are provided with access to longer-term housing and support options

Asylum support is provided in the form of shared accommodation, often in houses of multiple occupancy and unrelated adults are routinely required to share bedrooms. During the pandemic the Home Office and accommodation providers have been working to phase out the use of bedroom sharing in response to public health advice. However, many people seeking asylum across the UK are still forced to share bedrooms with unrelated adults, people sharing rooms include pregnant women, people with disabilities and people with complex mental health problems such as Post-Traumatic Stress Disorder.

In 2019 the Home Office awarded new contracts to provide asylum support to voluntary agencies and private sector companies through the Advice, Issue Reporting and Eligibility (AIRE) and the Asylum Accommodation and Support Services Contract (AASC). The transition to these new contracts faced many issues, including accessibility, delays in asylum support application processing and payments and accommodation supply which led to widespread use of hotels as emergency contingency accommodation. These issues were particularly concerning as these services were required to step up provision for the current covid-19 emergency.

The lack of available and appropriate dispersal accommodation has resulted in prolonged use of hotels and other forms of contingency accommodation which has only increased during the pandemic. Full-board accommodation is intended to be a temporary measure until longer-term dispersal accommodation can be sourced and people living in this type of accommodation are not provided with any financial support. More recently the government has made use of military barracks as accommodation sites. By their very nature, military bases are not an appropriate place for people seeking asylum to be sent to. Many will have fled unimaginable horrors, including conflict, persecution and imprisonment in their home country, before seeking sanctuary in the UK. The British Red Cross is providing emergency support to people accommodated at these temporary sites to ensure that everyone has the appropriate information and support, access to legal advice and essential practical items including winter clothing. We continue to urge the UK government to find alternative, safe, more humane accommodation options.

**People seeking asylum should have access to safe, dignified and appropriate accommodation at all times, this is especially urgent during a global pandemic.**

## Healthcare

People seeking asylum and with insecure immigration status often face barriers to accessing healthcare. These barriers include the availability of multi-lingual public health advice and information, charging for NHS care and fear about contacting life-saving public services due to concerns about data sharing for the purposes of immigration enforcement.

The government introduced an exemption to ensure that migrants and people with insecure immigration status will not be charged for testing for COVID-19 (even if the test shows they do not have COVID-19) and treatment for COVID-19. No immigration checks are needed for overseas visitors if they are only tested or treated for COVID-19.<sup>13</sup> However, people will still be charged for any other tests and treatment for comorbidities that are not exempt, and people still face the fear of data-sharing for the purposes of immigration enforcement.<sup>14</sup>

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<sup>13</sup> <https://www.gov.uk/guidance/nhs-entitlements-migrant-health-guide>

<sup>14</sup> For further details see joint letter with Doctors of the World <https://www.doctorsoftheworld.org.uk/letter-calling-for-suspension-of-nhs-charging-regulations/> and detailed research on barriers to accessing healthcare

**Everyone should have safe access to healthcare** - The Home Office and Department of Health and Social Care should suspend all charging for National Health Services and data-sharing for the purposes of immigration enforcement and launch a public communications campaign to ensure this information reaches asylum seeking and migrant communities

## **2. Immigration and asylum system**

### **Access to the asylum system**

In-country access to the UK's asylum system usually requires people to travel to in-person appointments in two specific locations, the Asylum Screening Unit in Croydon and the Further Submissions Unit in Liverpool. The requirements to travel to Croydon to claim asylum and Liverpool to lodge further submissions present barriers to accessing protection that have a disproportionate impact on vulnerable people such as those with health concerns, children or those facing financial hardship. For people submitting further submissions there is no requirement for a face to face appointment, meaning people are often making the long journeys to Liverpool simply to hand over their papers.

One of the first emergency measures the Home Office announced was the temporary suspension of the requirement for Further Submissions to be lodged in person in Liverpool. The Home Office cancelled all existing appointments and advised applicants wishing to lodge a Further Submission in support of a fresh claim for asylum to submit via e-mail to a dedicated inbox or through the pre-existing postal route.

In late April 2020, the Home Office [announced that new regional asylum screening intake units](#) would be stood up in response to covid-19 emergency. The Asylum Intake Unit (AIU) in Croydon would continue to operate but would be additionally be supported by limited operations in Glasgow, Belfast, Liverpool, Leeds, Solihull and Cardiff in order to “enable asylum seekers to attend appointments without having to travel long distances”

These changes were necessary to avoid travel during the pandemic however there have been long-standing concerns about the requirement to travel long-distances to access the asylum system and these positive changes that should be made permanent.

### **Immigration Detention**

In the year to March 2020, the UK detained 23,075 people for immigration purposes. Prior to Covid-19, there were around 1,700 people detained at any one time. This includes people detained in Immigration Removal Centres (IRCs) and those held under immigration powers in prisons.

British Red Cross research<sup>15</sup> has highlighted the long-lasting mental and physical harm that being detained can cause. According to the Home Office's data, in the year to March 2020 only 35% of people leaving detention left because they were removed from the UK. This means that two-thirds of those who were detained were released into their communities, calling into question the reason for detention in the first place.

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‘An Unsafe Distance the impact of Covid-19 on Excluded people in England’ Doctors of the World <https://www.doctorsoftheworld.org.uk/letter-calling-for-suspension-of-nhs-charging-regulations/> and recent media coverage <https://www.independent.co.uk/news/uk/home-news/migrants-health-coronavirus-covid-doctors-nhs-charging-hostile-environment-b905671.html>

<sup>15</sup> Never Truly Free: the humanitarian impact of the UK detention system, British Red Cross <https://www.redcross.org.uk/-/media/documents/about-us/research-publications/refugee-support/never-truly-free-march-2018.pdf>



The number of people detained has dropped significantly as a result of covid-19, mostly a result of restrictions on overseas travel making removal highly unlikely. Statistics published in May 2020 report that the number of people held in IRCs dropped from 1,278 at the end of December 2019 to 313 people at the beginning of May 2020. 97% of those who continued to be detained were people who have served (and completed) criminal sentences.

This significant reduction in the use of detention should be welcomed, and offers an opportunity for the UK to rethink how the role that immigration detention plays in the immigration system. Following two independent reviews by Stephen Shaw since 2015, the number of use of detention has gradually declined. More recently, this has been accompanied by the start of a number of trials of community-based alternatives to detention that allow people to remain in their communities while their immigration cases are resolved. Not only are such alternatives more humane, they are also far less expensive than detention and evidence from other schemes shows they are more effective.

As the UK moves to the next stage of the covid-19 response, rather than returning to former levels of detention, the Government should continue to invest in making the system more person-focused. This should include introducing a maximum time-period that someone can be detained for immigration purposes.

To achieve this, the Home Office should:

- **Only ever use detention as a last resort** and for the purposes of removing an individual from the UK
- **Introduce a time-limit of 28 days on how long an individual can be detained for immigration purposes**
- **Continue to invest in community-based alternatives to detention.** Those individuals who have been released from detention as a result of covid-19 should be provided with support and advice so that they can resolve their immigration cases

## Reporting

In the British Red Cross report 'Never Truly Free', the impact that reporting requirements had on individuals was shown to be avoidable. People subject to immigration control can be required to physically report to a Home Office location anywhere between every six months to every week. Reporting centres can be many miles from the place someone is living, and for people not in receipt of any financial support and without the right to work in the UK, being able to meet reporting requirements can be extremely difficult. The actual process of reporting is usually a "tick-box" exercise, with no conversation about progressing a case towards resolution.

People can, on occasion, be detained when they go to report. As there is no prior warning given to the individual, this can be extremely distressing. To prepare for this, some people – particularly if they have been detained previously – take measures such as taking extra clothing with them or making sure a friend can look after their possessions. This makes reporting an extremely stressful event, and one that can take people a number of weeks to recover from.

The Home Office should:

- **Not require people to report more often than is necessary**
- **Make greater use of alternatives to physically reporting, such as digital methods**
- Ensure that if people do need to physically report, they are provided with financial support to enable them to do so

- Not detain people when they go to report unless prior notice has been given of this intention