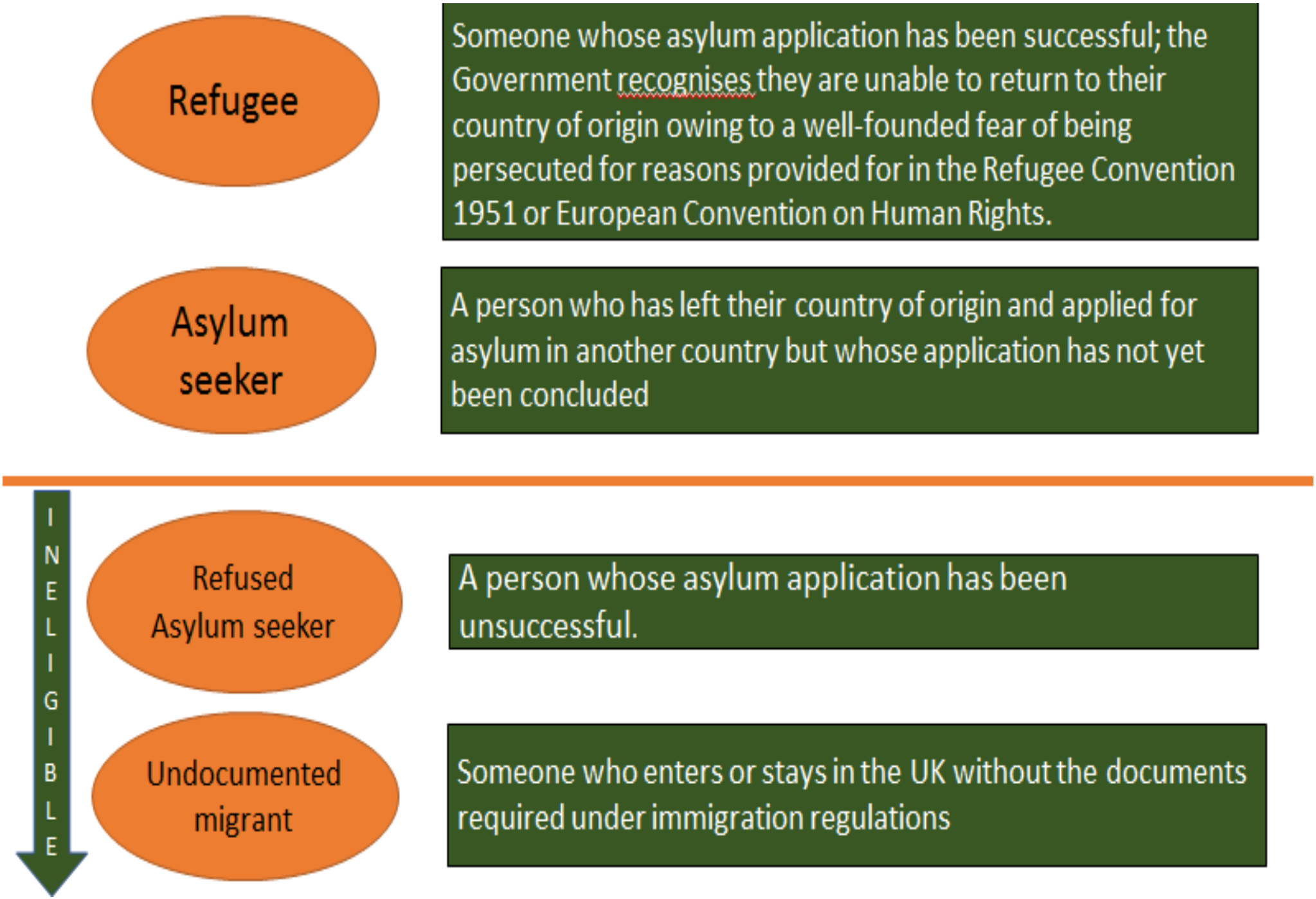
UK immigration policies are **not good** for women's health

Dr Fionnuala Finnerty

SpR HIV & Sexual Health

Brighton

"We don't feel safe in our tent and at night we can't sleep till the morning."


Refugee
Someone whose asylum application has been successful; the Government recognises they are unable to return to their country of origin owing to a well-founded fear of being persecuted for reasons provided for in the Refugee Convention 1951 or European Convention on Human Rights.
Asylum seeker
A person who has left their country of origin and applied for asylum in another country but whose application has not yet been concluded
INELIGIBLE
Refused Asylum seeker
A person whose asylum application has been unsuccessful.
Undocumented migrant
Someone who enters or stays in the UK without the documents required under immigration regulations

HIV infection prevalence in refugee & undocumented migrant population

- 1.5% - asylum centre Italy (Tafuri et al BMC Infectious Diseases, 2010)

- 3.4% pregnant asylum seekers Netherlands (Goosen et al, PLOS One 2015)

- 2.9% undocumented migrants France (Berdougo, IAS 2017)

HIV in the UK 2016 – migrants

In 2016 migrants were :

55% of those accessing care

55% of those newly diagnosed

Source: Public Health England

Post migration acquisition of HIV

RESEARCH ARTICLE

Sub-Saharan African migrants living with HIV acquired after migration, France, ANRS PARCOURS study, 2012 to 2013

A Desgrées-du-Loû [1,5], J Pannetier [1,5], A Ravalihasy [1,5], A Gosselin [1,5], V Supervie [2], H Panjo [3], N Bajos [3,5], F Lert [3,5], N Lydié [4,5], R Dray-Spira [2,5], The Parcours Study Group[5]

RESEARCH

England's most disadvantaged groups: Migrants, refugees and asylum seekers

An *Is England Fairer?* review spotlight report (4 of 4)

"The aim is to create here in Britain a really hostile environment for illegal migration … What we don't want is a situation where people think that they can come here and overstay because they're able to access everything they need." Theresa May, 2012

Example A – Healthcare charging

ENTITLEMENT TO SECONDARY CARE

IMMEDIATELY NECESSARY AND URGENT CARE

- Must be given regardless of someone's ability to pay.
- Patients should not be discouraged from accessing it.
- Patients should not have their treatment delayed to determine chargeability.
- It must be provided and then billed afterwards.

Only clinicians can make an assessment as to whether a patient's need for treatment is immediately necessary, urgent or non-urgent.

All maternity services, including routine antenatal care, are immediately necessary.

What is not being charged for....
Primary care
A and E care
Family planning (not TOP)
Treatment for communicable diseases (e.g. TB/HIV)
Treatment for mental/physical conditions as a result of torture, FGM or SGBV
Compulsory psychiatric service (people detained under the MHA)
111 telephone service
Palliative care provided by charities or community interest companies

Example B – Immigration Detention

‘the UK detains too many people, for too long a time, and that in far too many cases people are detained completely unnecessarily’.

News › UK › Home News

'Slap in the face of desperation': Yarl's Wood women on hunger strike for 'dietary' reasons, claims Home Office

'We feel voiceless, forgotten and ignored. This is a desperate measure due to desperate circumstances'

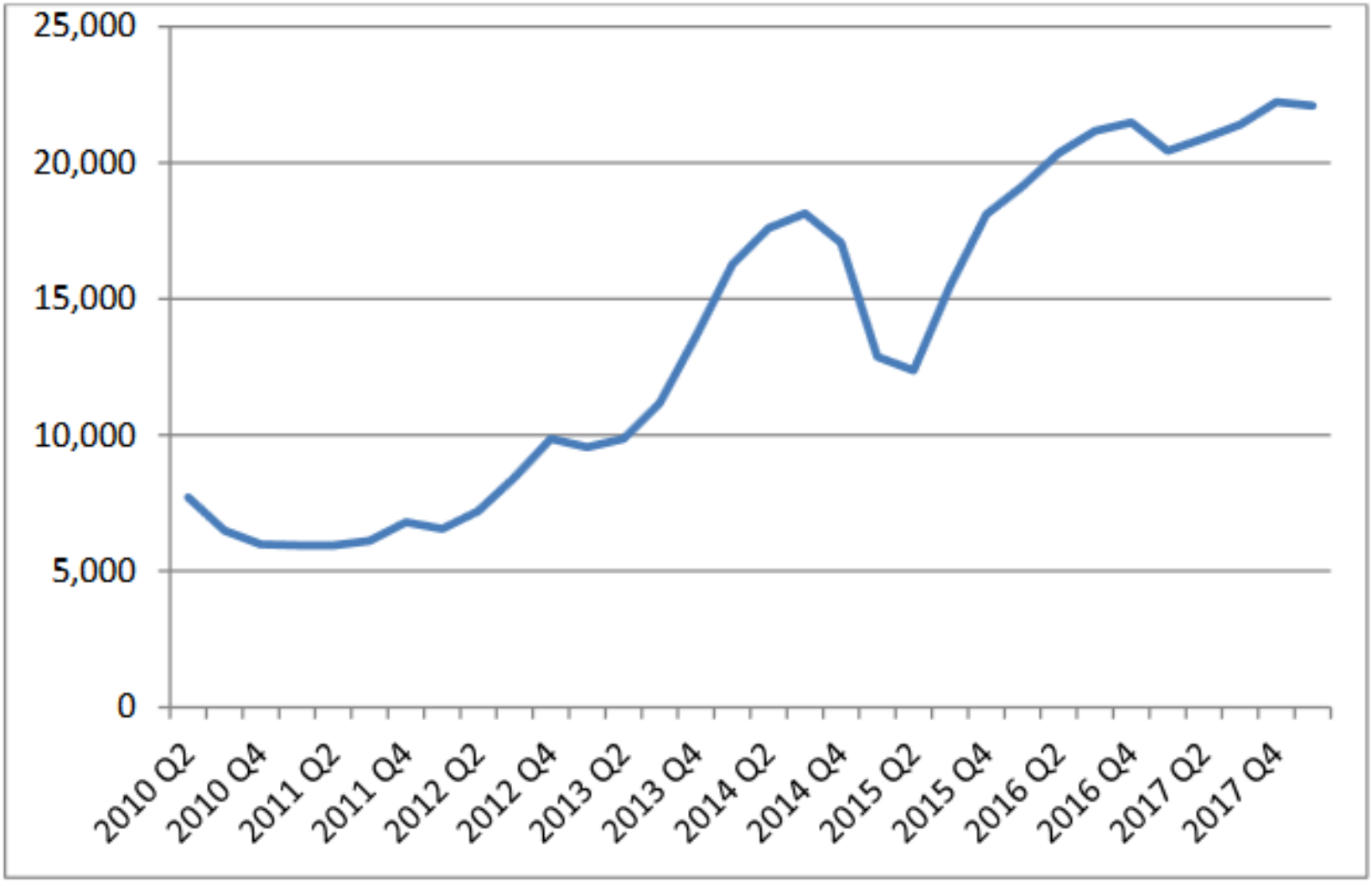
Sophia

Terrence Higgins Trust

Women and HIV Invisible No Longer

A national study of women's experiences of HIV

Asylum claims



NUMBER OF ASYLUM CLAIMS AWAITING AN INITIAL DECISION

Source: Refugee Council

Politics | Parliaments | Brexit

'Serious flaws' in UK immigration system, Law Society warns

12 April 2018

Share

News › UK › Home News

Detention of Windrush generation not just a ‘mistake’ but symptom of ‘systemic failure’ by Home Office

In Q1 of 2018 (Jan-March) 74% of asylum claims were refused **26%**

Appeals - More than **50%** accepted!

More likely to get accepted on appeal than initial claim

Where to find good quality information/help

- Refugee Council
- Right to remain toolkit
- Doctors of the World (Healthcare charging)
- Women for refugee women

Useful telephone contacts

Rights of women immigration advice line (England & Wales)

020 7490 7689

Monday 10am – 4pm, Thursday 10am – 4pm

Southall Black Sisters (London)

020 8571 0800

Mon, Wed, Fri 9.30am - 4.30pm

- Keep copies of all your paperwork
- Legal aid
- If you are ineligible for legal aid then you can try and apply for pro-bono
- Don’t give up if asylum claim refused
- Ask your lawyer questions
- Ask you friends to help you
- Help each other