

The experiences of refugee and asylum-seeking women during the pandemic

By the Sisters Not Strangers coalition:

Coventry Asylum and Refugee Action Group, Development and Empowerment for Women's Advancement (Sheffield), Oasis Cardiff, Refugee Women Connect (Liverpool), Swansea Women's Asylum and Refugee Support Group, Women Asylum Seekers Together Manchester, Women for Refugee Women (London) and Women with Hope (Birmingham)



Refuges Women Connect

women with hope











Contact: sistersnotstrangers@gmail.com

Cover photo: Agnes Tonah of Women with Hope addresses the National Refugee Women's Conference in February 2020 (credit: Sara Sakharkar).

All names of women quoted in this report are pseudonyms, to protect their anonymity.

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Foreword, by Loraine Mponela

I have sought asylum in the UK, but I am now living destitute with no access to any state support or paid work. I am proud to be doing essential voluntary work in my community to help fellow destitute women who are seeking asylum in the UK. I have lived in Coventry for more than four years, as I was moved here at the beginning of 2016 after claiming asylum. I was immediately connected with the Coventry Asylum and Refugee Action Group (CARAG), a grassroots community group made up of over 100 people seeking asylum, refugees and migrants living in the West Midlands. I initially served as Secretary for two years before being voted as Chairperson in 2018, the position I still hold.

During lockdown we have helped the women in our network by making phone calls to find out how they are coping, and sharing information on what support is available to them. We have co-ordinated cooked food deliveries and occasional shopping for those who don't have enough food. We have also supported women to get on Zoom to catch up so that they feel less isolated, and identified women who have become particularly vulnerable and

need mental health support. Lockdown has not been easy for anyone, but it is especially difficult for asylum-seeking women. It has been the most difficult time of our lives for many of us.

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This research is so important because when we speak as individuals it can sound as if we are trying to dramatise the situation. It's not drama, it's real life. These are the problems that we are going through on a day-to-day basis as asylum-seeking women.

At the start of this year more than eight organisations came together to launch our joint campaign #SistersNotStrangers to end destitution among asylum-seeking women in the UK. During the pandemic, this solidarity has continued. I have been joining weekly meetings with other refugee



women leaders from various parts of the UK to discuss the problems we are seeing in our communities and how we are coping. We discussed the idea of this research, how it could be carried out, and the issues that the survey should cover, before it was shared with the women in our networks. Working together with women, including refugee women, across the country allowed us to share tips and build resilience amongst ourselves in the midst of coronavirus, and has strengthened me in many different ways. I believe this unity will carry us through this crisis and also enable us to work together after the pandemic to create a more equal and safer society for women.

I believe that unity will carry us through this crisis.

Executive summary

Sisters Not Strangers, a coalition of eight organisations, surveyed over 100 asylumseeking women from England and Wales to hear how they are surviving during the COVID-19 pandemic. The survey was completed by women seeking and refused asylum, as well as those with leave to remain. These responses were supplemented by a survey of 24 staff and volunteers who have been supporting asylum-seeking women since the outbreak.

The government's review found that Black, Asian and minority ethnic (BAME) women are almost three times more likely to die from COVID-19, compared to white women. The intersection of gender, race and immigration status, coupled with the trauma of their past experiences, means that asylum-seeking women are among those BAME women most affected by the consequences of the outbreak.

With charities closed, women have been unable to access meals and small hardship payments that have become so crucial both for women within the asylum system, who live in poverty, and women refused asylum, who are so often left destitute. Three quarters of the women surveyed went

hungry, including mothers who struggled to feed their children.

A third of women were at high risk from coronavirus, reporting a serious health condition such as asthma, heart disease and diabetes. While the government emphasised social distancing, a fifth of women were homeless, relying on temporary arrangements with community members, and moving from one house to another. Self-isolation was impossible for the 21% of women who were forced to sleep in the same room as a non-family member. Frequent handwashing was a serious challenge for the 32% of women who struggled to afford soap and other hygiene products. A fifth of staff and volunteers had supported women who were trapped in unwanted or abusive relationships during the pandemic.

As women went hungry and struggled to secure safe housing, mental health inevitably deteriorated. Barriers to accessing NHS mental healthcare and a lack of IT equipment increased isolation, with a guarter of women saving that their mental health was "much worse than before".

Most of the women in our networks have fled gender-based violence, but their experiences of persecution are frequently disbelieved by the Home Office, whose practices have been shown to be racist. Women seeking asylum are further disadvantaged by sexism, with insufficient understanding of gender-based violence often shown by Home Office decisionmakers. Shortages in legal representation and difficulties in disclosing traumatic experiences also jeopardise fair decision making. After refusal, many of these women are deprived of support but also of the agency to support themselves. Our findings show that refused asylum-seeking women are among the most vulnerable during the pandemic, going hungry, sharing rooms with strangers, and working illegally in exchange for shelter.

In exposing deep structural inequalities along existing fault-lines of gender, race, citizenship and class, the pandemic is testing our society. We cannot simply return to normal. We must seize this opportunity to build back better, and to create a society centred on solidarity and human dignity in which the lives of women seeking asylum, and women of colour, are fully valued.

Key findings

Our findings are drawn from the experiences of 115 women who have claimed asylum, and who are currently living in England and Wales.

Immigration status

- ▶ 47% of 113 women were seeking asylum.
- ▶ 38% had been refused asylum.
- ▶ 15% had some form of leave to remain.
- ▶ 35% of 112 women said they had a hearing on their asylum claim delayed or cancelled during the pandemic.

Food

- ▶ 74% of 115 women were not able to get enough food during the pandemic.
- ▶ 47 women stated that they went hungry because they could not access their usual support from charities.
- ► Half of the 47 women with young families struggled to feed their children.
- ▶ 50 women said they were too scared to visit shops.

More than a fifth of women were homeless during the pandemic

Housing

Three quarters

of women were

hungry during the

pandemic

- ▶ 16% of 115 women said they had moved from one house to another during the pandemic.
- ▶ 21% said they had slept in the same room as a non-family member/ partner.
- ▶ 15% said they had slept in the same room as someone who was not their family member/partner and who had coronavirus or coronavirus symptoms.
- ▶ 21% of 113 women were homeless. staying with a community member or friend.
 - ▶ Eight women said they were sleeping on the sofa or on the floor.
 - Four women were in emergency accommodation provided by the local council.
- Two women were in emergency accommodation provided by the Home Office.
- One woman was sleeping outside.
- ▶ 14% of 111 women said they were forced into illegal work during the pandemic in exchange for shelter and other basics.

Mental health

- ▶ 82% of 101 women said their mental health had worsened during the pandemic:
- ▶ 59% stated that it was "worse than before".
- ▶ 23% stated that it was "much worse than before".
- ▶ 92% said they had felt lonely during the pandemic.
- ▶ 38% said they had "generally felt very alone".

Health and hygiene

- ▶ 32% of 113 women struggled to access water, soap and cleaning products during the pandemic.
- ▶ 34% of 111 women said they had a serious health condition that could increase their risk of suffering a severe reaction to COVID-19.
- ▶ 13 women said they would not approach the NHS for treatment for this condition during the pandemic.
- ▶ 21 women said that they or a family member had COVID-19 symptoms and did not feel able to approach the NHS.

Lo Lo's story

I came to the UK to seek safety, but instead I was forced into more exploitation. I spent many years homeless or being abused for work before getting any help.

This changed when I met a solicitor who explained to me about trafficking and asylum. She helped me to submit my asylum application based on the danger I face in my country, and the Home Office gave me accommodation. I hoped that this would be a new chapter in my life, but it was no better. The accommodation was filthy and overcrowded. There were cockroaches and rats everywhere and we didn't have any hot water.

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I was in that accommodation for the start of this lockdown and I felt so unsafe there. I have serious health problems that mean it would be particularly dangerous for me to catch the virus. But it was impossible to self-isolate in that place. I was terrified because men kept coming into my room without permission, even while I was sleeping. I felt so stressed and my depression got worse.

I had been submitting complaints about the accommodation for months, but the Home Office wouldn't listen to me. In the end, I felt too afraid to be there so I left. For a week during lockdown, I slept on buses. I went from one side of London to the other, because it was free to travel on the bus then. I didn't have any money for hand sanitiser or a facemask but at least people were keeping their distance on the bus.

After a week, the local authority put me in a hotel which is being used for homeless people. The walls are mouldy and there are bed bugs. Because of my serious medical problems, I can't eat the food that they give us. For the first two weeks I had almost nothing to eat, until a charity gave me a supermarket voucher. Nothing is easy. Now I am here it is hard for me to get to my medical appointments because the hotel is so far away from the hospital.

Don't oppress me and take away my voice because I am a woman and because of my race. We are all the same. Listen to us, hear our voices!

It feels for me as a woman that life is one big cycle of abuse. I would like the government to respect us, let us be safe and treat us with dignity as human beings. Don't oppress me and take away my voice because I am a woman and because of my race. We are all the same.

Listen to us, hear our voices!

Financial support and food

Women in the asylum process live in extreme poverty, and women whose claims have been rejected are often completely destitute, with no right either to claim benefits or to work. Many local groups and charities which have historically supported people seeking asylum were forced to close their doors at the start of lockdown, while others have been under immense pressure to support increasingly vulnerable communities. At the same time, food prices began to rise and stocks were low in many areas. In May, the Independent Food Aid Network reported that demand for food banks had increased by 300% in some areas of the UK.

Of the 115 women who answered this survey, 74% said they were not always able to get enough food during the pandemic. Forty-seven women said that their access to food was affected because of problems in obtaining hardship payments from charities that they have been reliant on because of inadequate or no asylum support.

Women receiving Home Office support, social services support and welfare benefits were among those who struggled to access

enough food. Zara, who was receiving Section 95 support, told us: "The money I get from the Home Office is not enough, so I rely on food banks. I am unable to get sufficient healthy food as I have no choice in the type of food donated to me, which I'm not always able to eat."

Previous research has highlighted the serious challenges that refused asylumseeking women experience when trying to meet their most essential needs. Likewise, this survey also found that women who have been refused asylum were particularly affected by hunger, with the majority of these women stating that the outbreak had worsened access to food. Sandy from Coventry has been living with no support and no right to work since her asylum claim was rejected some years ago: "I used to eat at a charity. They have closed. [Another] centre used to give me a [food] voucher twice a week. But I can't have that anymore. Because I am on no support life is really hard. I was already begging from one charity to another but asking for help during the lockdown... has been really hard."

Of the 47 women who were caring for

children during the pandemic around half struggled to feed their families: Grace told us, "At the beginning of the lockdown I had food in the house just for one day for me and my two boys. I was scared. I did not eat so that they could eat." Though many asylum-seeking families are eligible for free school meals, government guidance and school practice on eligibility were complex, and there were delays in receiving vouchers, as women without email access. struggled to navigate the system.

I used to eat at a charity. They have closed. Because I am on no support life is really hard.

- Sandy

Many refused asylum-seeking women, who received no government support, struggled to afford travel fares in order to visit shops, with women on Home Office support experiencing similar difficulties. Jade, who

was receiving Section 95 support, shared: "At the beginning where I lived the shops like Morrisons and Aldi were so busy and people were buying everything fast so there was nothing left. We need transport money to go to these places, so access was restricted and I felt stressed when I spent some of my money to go there and then couldn't get anything."

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- Grace

Section 4 support is cashless, provided on a card that can only be used in specific ways, and as a result some women could not obtain everyday staples because nearby shops had run out of these goods; yet they were unable to travel further afield on public transport. Fifty women reported being too scared to visit shops, a fear that

was exacerbated for some by insufficient access to cleaning products and face masks, by their underlying physical health conditions, or the lack of clarity around government guidance on shielding and vulnerability.

Seventy-four percent of women said that the outbreak had affected the type of food they ate, with many stating that they were unable to afford fresh fruit and vegetables; vital donations from food banks - which many women have relied on during the pandemic - generally comprise non-perishable tinned and dried goods. "With limited money it's difficult to get healthy food," said Julie, who was receiving Section 95 support. This was frightening for women with underlying health conditions, such as diabetes and heart disease, which can be exacerbated by poor nutrition.

Although in theory Section 4 support should have become more available to people who have been refused asylum during the pandemic (see appendix 1 on policy changes, page 17), many women in our networks felt unable to make use of this assistance. Section 4 support comes as a package of financial assistance together with no-choice accommodation so, in order to receive this support, women have to run the risk of being moved across the country. Nineteen women in this survey, who had

been refused asylum, did not apply for Section 4 support during the pandemic. Some of these women cited fears of being dispersed to areas far from their support networks, particularly vital for LGBT women and survivors of gender-based violence, and others expressed fears about conditions in Home Office accommodation.

With limited money it's difficult to get healthy food.

- Iulie

Meanwhile, other women who tried to access support were unable to do so, or do so in a timely manner, as a result of Home Office practice. One support worker voiced her frustration that letters granting Section 4 support were sent to office premises during the lockdown, even though she clearly stated on the applications that all decisions should be notified to her via email. Some staff and volunteers said that evidence requirements for asylum support applications had not been sufficiently relaxed, such that they experienced difficulties in proving destitution in order to demonstrate eligibility.

Housing

Almost half of the women who answered the survey were in housing provided by the Home Office, as they were receiving asylum support, and 10% of women were living in council housing. A fifth of women were homeless and staying with a community member or friend, the majority of whom were women whose asylum claims have been refused.

Almost all staff and volunteers identified poor and insecure accommodation as the primary problem faced by refused asylum-seeking women. Twenty-four asylum-seeking women who answered the survey said they had slept in the same room as someone who was not their family member or partner at some point during the pandemic, and 18 women were forced to move several times; the majority of these were women whose asylum claims had been refused. Seventeen women said they had slept in the same room as someone who was not their family member or partner and who had coronavirus or coronavirus symptoms, 12 of whom were women who had been refused asylum.

Insecure living conditions not only increase the risk of contracting COVID-19 but also

of experiencing abuse and exploitation. As a result of having no access to support and no right to work, 16 women said that they had been forced into exploitative work in exchange for shelter and other basic needs during the pandemic. Claire, a woman who has been refused asylum and so has no right to work, told us: "I do housework where I live right now. And look after the children. Sometimes you can say I am working [for] 24 hours, making meals, [and] in the night I have taken care of the autistic child. I haven't been sleeping properly."

Only two women who answered the survey were in emergency hotels provided by the Home Office (with access to shelter and food, but no cash). As explained, although Section 4 support became more available in theory, many asylum-seeking women in our networks were too afraid to make use of this assistance. As one support worker said: "Refused asylum-seeking women [were fearful] of seeking support from the Home Office... due to mistrust of sharing their information and what that might mean, as well as fear of [sharing] accommodation... with unknown individuals - [and] dispersal."

"As a failed asylum seeker [the Home

Office] would eventually have to throw me out [of the housing]," said Noor, who did not apply for Section 4 support. Some women were frightened that Home Office accommodation would suddenly be terminated and that they would be made street homeless, preferring to make temporary arrangements with community members.

I do housework where I live right now. And look after the children. Sometimes you can say I am working for 24 hours, making meals, and in the night I have taken care of the autistic child. I haven't been sleeping properly.

For women within the asylum system who were living in Home Office accommodation inadequate sanitation was reported by 70% of staff and volunteers as a key housing-related concern, while living with strangers was cited by 78%. Susan, an asylum-seeking woman in our network, who was in Home Office accommodation, told us: "There are 15 other people in my NASS accommodation, it is very crowded. I have felt very unsafe during the pandemic because it is hard for me to social distance when there are so many of us sharing communal spaces. It has made me feel like I am detained again and my mental health has got much worse." Similarly, Patricia, who was in Section 95 housing, told us: "There are 12 people sharing a bathroom... with this virus going around it's worrying but there's nothing we can do."

Four asylum-seeking women reported being in emergency accommodation provided by local councils. Despite guidance from Westminster to house all those at risk of sleeping outside, women with no recourse to public funds (NRPF) experienced significant difficulties. With limited funds and confusion over how councils could legally accommodate people with NRPF, it is unsurprising that some destitute asylum-seeking women were denied emergency housing, and instead

told by local authorities to approach the Home Office.

There are 12 people sharing a bathroom... with this virus going around it's worrying but there's nothing we can do.

- Patricia

Some support workers have also reported incidents where destitute asylum-seeking women had been asked to submit online applications to the local authority in order to request housing. For women on the streets or for those who have no data or WiFi access, the need for an online application acted as a significant barrier to securing housing during a public health emergency. Other staff and volunteers who assisted women in accessing accommodation reported delays in provision. One refused asylum-seeking woman, Tina, is a survivor of trafficking, and has been living destitute since her asylum claim was refused some months

ago. During the pandemic, she was forced to spend two nights sleeping outside, while waiting for the local council to allocate emergency housing.

Women in asylum accommodation do not have any control over where they are sent to live. Sudden moves during lockdown posed challenges for many. One family, for instance, was sent from Swansea to Cardiff in the first month of lockdown, with just one set of clothes each, leaving a single mother and her children isolated and hungry in a guesthouse in Cardiff, unaware of lockdown restrictions.

Staff and volunteers reported that access to hotels became increasingly difficult, with rooms quickly filling up, and with few lawyers being willing to challenge local authority refusals of emergency housing. As lockdown eases, and for those who secured emergency housing, there are serious concerns about what comes next. Reports suggest that the Home Office has lifted its suspension on evictions from asylum accommodation, and with no additional funding ring-fenced for continuing the 'Everyone In' scheme, vulnerable people seeking asylum are at high risk of becoming homeless once again.

Violence against women

The majority of asylum-seeking women in the UK have fled gender-based violence,1 with many experiencing further violence on their journeys to safety and while in the UK. Recent research found that a third of asylum-seeking women who fled sexual violence in their country of origin were sexually abused again in the UK - with the vast majority not turning to the authorities for fear of detention or deportation.

These experiences of violence have been exacerbated during the current crisis. In society at large, domestic abuse during COVID-19 has been described as a pandemic within a pandemic, with rates of intimate partner abuse rising rapidly during lockdown, and deaths between 23 March and 12 April from domestic abuse more than doubling the average rate, as compared to the last 10 years. For refugee women, COVID-19 has created tinderbox conditions comprising of increased economic hardship, blocked escape routes and the closing down of places where

women would normally feel able to seek help, particularly face-to-face services. A recent study found that refugee women survivors have been left isolated, anxious and often trapped in abusive situations as a result.

The lockdown traps women in violent situations and makes them so vulnerable.

- Support worker

Due to ethical considerations, we did not ask women questions on their experiences of violence but eight staff and volunteers said they had worked with women who were forced to stay in unwanted or abusive relationships during the pandemic, voicing concerns that women may feel trapped in difficult situations due to a lack of safe options. Four staff and volunteers reported having assisted women who experienced honour-based violence, while three said they had supported women who had experienced sexual violence. Staff and

volunteers reported that women were reluctant to leave abusive households due to fears around alternative accommodation that may be provided or of moving during lockdown in the midst of a pandemic.

One support worker explained that while she believed rates of sexual and gender-based violence to have increased, "[Women] might not realise that what they are going through [is] abuse and that they have options, as they are not visiting charities." She added: "It might be that the women I have been talking to do not feel comfortable disclosing abuse over the phone... (especially those whom I have never met in person) or [that] they are too scared." A staff member from another organisation stated: "One asylum-seeking woman we are in contact with has young children and during the lockdown called the police on her partner, due to his violence. We have continued to try to support her in every way possible but I really worry that while she is so isolated during this lockdown she is unable to find the support network that would enable her to prepare to leave him and find other accommodation. The lockdown makes women like her so vulnerable."

¹ For the purposes of this report gender-based violence includes rape, sexual abuse, female genital mutilation, domestic abuse, sexual exploitation and 'honour' based abuse.

Health and hygiene

Even before the pandemic, asylumseeking women faced barriers in accessing healthcare, due the effects of hostile environment policies. They might face issues registering with a GP, or be deterred by NHS charging or fears of data-sharing with the Home Office, amid widespread misinformation on their entitlements.

Our findings show that access to healthcare has worsened for asylum-seeking women. This is particularly concerning when viewed alongside the severe challenges in accessing adequate food and the poor living conditions that many women who answered the survey experienced, as well as the fact that 38 women reported suffering from a serious health condition that increased their vulnerability to COVID-19.

99p hand wash went to £3, can you imagine? It isn't affordable.

- Monique

Asylum-seeking women's access to soap, hand sanitiser, masks and cleaning

products during COVID-19 has been poor and inconsistent, with 92% of staff and volunteers identifying a lack of hygiene products as an issue. Almost a third of women reported insufficient access to soap and cleaning products, while 28% have had no access at all to hand sanitiser. "I've had no soap", said Yemi, a refused asylum-seeking woman who receives no government support and has no right to work. Similarly Najat, who was in Home Office housing, shared: "Sometimes we didn't have soap and toilet roll. ... Our housing providers were aware of these problems but nothing changed. Two days ago, we got some gel in the house for the first time, but it was one little bottle for four people and it's all gone."

Destitution and increased costs of hygiene products forced women to choose between food or hygiene products such as soap and period protection, and inevitably it was generally the latter they went without. Monique, a refused asylum-seeking woman who was not receiving any support, shared: "99p hand wash went to £3, can you imagine? It isn't affordable." Thirty-three percent of women had no access at all to facemasks.

Overwhelmingly women with COVID-19 symptoms did not get tested and women who tried were frequently told that they needed a car to access drive-through testing. Twenty-one women who said they or a family member had experienced symptoms of COVID-19 did not feel able to approach the NHS for treatment, mainly due to a fear of NHS bills, reports of the virus disproportionately impacting Black, Asian and minority ethnic communities and experiences of racism in healthcare. Similarly, 13 women with serious underlying conditions said that they would not access NHS care for these conditions if they needed treatment

Sometimes we didn't have soap and toilet roll.

- Najat

Fifty-seven women said they did not have anyone who could shop for them while self-isolating. Some staff and volunteers reported that women who did access healthcare for COVID-19 were discharged into multiple occupancy housing.

Mental health

The UN Secretary-General has stated that the COVID-19 pandemic "has the seeds of a major mental health crisis." Within that crisis, women who have sought asylum are among those at greatest risk. Many women are struggling to understand the current situation, fearing for their health and safety. Others are being pushed into abusive and exploitative situations, while some are experiencing increased anxiety because they cannot regularise their immigration status. In this survey, 83 women said that their mental health had worsened, and 23 of those said it had become "much worse than before".

Ninety-two percent of women said they had felt alone during the pandemic, and almost 40% said they had "generally felt very alone". Around 70% of staff and volunteers had assisted women who experienced flashbacks to past traumatic experiences. Reem from Saudi Arabia, who was living in lockdown in Cardiff with other asylum-seeking women, said: "Past traumas and bad experiences came flooding back for many of us. Staying indoors all the time transported me instantly to Saudi Arabia where I was not allowed to go outside." Staff and volunteers from Liverpool, Manchester, Halifax and London said they

had assisted women who had self-harmed or tried to kill themselves during the pandemic.

Past traumas and bad experiences came flooding back for many of us.

- Reem

Women in our networks also struggled to access mental healthcare. Recent research found that 24% of people who were trying to access mental health treatment had trouble contacting a GP or a community mental health team during the pandemic. Sarah, a refused asylum-seeking woman in our networks, who tried to take her own life after being made destitute, was told that she could not register with a GP during the outbreak. As a result, she could not obtain medication for almost two months. In the meantime, she moved from one house to another, sleeping on the floor in the room of a male stranger, and cooking and cleaning in order to avoid street

homelessness. Another asylum-seeking woman, Betty, shared: "I have struggled with severe PTSD and depression [for a long time]. I was on the waiting list for [NHS] counselling, but this got delayed because of lockdown. I can feel myself shutting down. It's like hitting a wall. I can't get out of bed. I stopped eating and drinking and I don't want to answer the phone anymore... I feel so nervous and afraid."

Staff and volunteers also reported long waiting lists for accessing therapeutic treatment, as well as a lack of digital tools and skills among some asylum-seeking women to engage in remote therapy. The deteriorating mental health of women, coupled with challenges in accessing therapy, put a strain on the groups involved in this survey, who do not have sufficient resources to support an increasing number of women with complex mental health issues. Despite this, many are working imaginatively and energetically to support women's mental health, with regular phone calls, Zoom meetings and even singing groups, which have provided a lifeline to many very vulnerable women: "This is the one place where our voices are being heard," said Maxine about her local organisation.

Communication needs

Many asylum-seeking women in our networks experienced issues in accessing phones and the internet prior to COVID-19. Lockdown has exacerbated this exclusion as face-to-face contact is removed and essential living costs have increased, making it increasingly difficult for women to afford to stay connected. These factors intersect to create a situation in which women, particularly those who are destitute, face a difficult choice of how to spend small amounts of money. Inevitably access to communication and information has worsened, jeopardising safety and increasing isolation.

Forty-seven percent of women who answered the survey stated they have not had phone credit on a regular basis, whilst 42% have not had regular access to the internet. Julie, a refused asylum-seeking woman, shared: "Charities are closed, [so I aml not able to see other women like me. Nowhere to go. [I was] always jumping from one organisation to another and meeting other people. The problems I have had with WiFi [now] have made me feel even more lonely... You are just there doing nothing..."

As services moved to remote delivery there were increased costs associated

with staying connected and accessing practical support, creating barriers for asylum-seeking women. The importance of staying connected to support services is highlighted when we consider that 48% of women received their information about COVID-19 and the government's guidance from such organisations. Many organisations have been providing data and phone credit to asylum-seeking women, so that they can access information, services and support networks.

Sixty-six women who responded to the survey stated they had only understood "some" of the government's COVID-19 guidance. Staff and volunteers stated that a reduction in the accessibility of interpreters and a lack of official guidance in first languages have caused misunderstanding among many women. A volunteer from Sheffield noted that women were afraid to visit the shops because they "did not understand the cause and infection mechanism [of COVID-19]."

Digital exclusion also meant that some mothers struggled to access vouchers for free school meals that were emailed to them. A lack of internet access also

impacted the education of these children while schools are closed, as so much learning has been moved online on the assumption that families can use the internet. While the government introduced a scheme to increase access to laptops and tablets, this has not reached many of those in greatest need.

The problems I have had with WiFi have made me feel even more lonely.

- Iulie

Many women reported sustained periods without working phones and internet access as incredibly challenging for their mental health. Drop-ins have been vital during ordinary times for providing a safe place where women can develop friendships and rebuild confidence. Some of our groups created virtual "drop-ins" during the pandemic, but the numbers of women who were able to "attend" have been small due to their inability to access equipment and low digital skills.

Immigration status

"It's better that we would be free, not in limbo and bondage. It's like a death sentence," said Lora, a refused asylumseeking woman.

On 19 March 2020, the Home Office cancelled substantive asylum interviews, subsequently announcing that it would serve decisions on cases where there was enough information to do so, with others effectively on hold.

Thirty-nine women who answered the survey said that a hearing on their asylum claim had been delayed or cancelled since the lockdown, the vast majority of whom were waiting for an initial decision. We did not ask women how long they had been waiting but systemic delays in processing asylum claims are well documented. Figures from this year revealed that the number of asylum-seeking people waiting longer than half a year for their claim to be decided hit a record high, surging by 76% in twelve months. Even before the pandemic, some individuals had been left in limbo for years.

Some women shared difficulties in finding solicitors in what was already a decimated legal aid system. Seventy-one percent

of staff and volunteers had supported women who had experienced problems in accessing legal support, either prior to an initial decision or after a refusal. "My asylum claim was delayed during the virus, and then I got the bad news that it was denied. I don't have a solicitor yet and I don't know when my next hearing date is." said Faith. There are concerns that recent legal aid changes to online appeals lodged during the pandemic would do "irreparable harm" by "[deterring lawyers] from taking on the most complex cases". As one support worker said: "If the client is [technologically skilled] and articulate, it's possible. But if it's a... very complex case which was refused, the women doesn't speak much English and [has] complex mental health issues... I can't... see how this can go to appeal."

Ninety percent of staff and volunteers cited Home Office delays as a barrier to regularising the status of refused asylumseeking women, while 50% expressed difficulties in gathering relevant evidence. One support worker shared: "It takes much longer to create a relationship of trust over the phone and women are understandably more reluctant to talk about [their]

trauma... which might be relevant to their claim... [Given the] increased demand for advice appointments, it has been difficult to give every woman enough time..."

Women granted leave to remain also experienced issues. "I was a [refused] asylum seeker for 17 years," said Rita. "I finally got accepted in March... a week before the courts closed but have not yet got my [documentation]." This delay has prevented her from accessing the labour market and vital benefits during the pandemic.

Barriers to regularising status prolong the periods that traumatised asylum-seeking women spend in poverty. Many destitute women have had their claims wrongly refused, because of the culture of disbelief at the Home Office, exacerbated by poor legal advice, lack of interpreters, delayed disclosure because of fear and shame, and difficulties in obtaining relevant evidence. They may have already spent lengthy periods, sometimes years, trying to survive with no support and no right to work. Existing barriers have been exacerbated during the pandemic, jeopardising safety and preventing women from rebuilding their lives.

Recommendations

Women seeking asylum in the UK have faced unprecedented challenges during recent months. Their experiences show us why we need to build a more equal, caring and connected society as we move out of the pandemic.

Our primary recommendation is for a grant of leave to remain to be given to all those with insecure immigration status, to ensure the safety of those seeking asylum, to protect public health, and to enable British society to rebuild more equally.

The organisations compiling this report also call for other vital reforms, in order to build back better following this crisis:

Equality

Everyone in the UK should be able to access sufficient income, safe housing and equality before the law.

- A meaningful uplift in asylum support, since £39.60 per week is wholly inadequate to meet basic needs;
- Financial support for all those who have sought asylum as long as they remain in the UK;
- Safe accommodation for all, so that women are not forced on to the streets or into abusive situations;
- Right to work for those seeking asylum whose cases have not been resolved within six months, unconstrained by the shortage occupation list;
- Reform of the legal aid system so that everyone seeking asylum can access quality legal representation.

Care

Everyone in the UK should be able to access care for their mental and physical health needs.

- Increased investment in mental healthcare throughout the UK;
- Measures to prohibit data sharing between the NHS and immigration enforcement.

Connection

Everyone in the UK needs to be able to access information about their rights and to be able to communicate effectively with others.

Internet provision in all social housing, including that provided by the Home Office and that provided by local authorities.

All these reforms would enable women to rebuild their lives and to play a full part in their communities as sisters, not strangers.

Appendix 1: Policy changes on provision of support and housing since COVID-19

Even before the pandemic, people seeking asylum live in extreme poverty. They are effectively banned from working and cannot claim mainstream welfare benefits. Women who are waiting for an initial decision on their asylum claim or the results of an appeal may receive Home Office support, provided they can demonstrate that they have no other means of support. This assistance – known as Section 95 support – can take the form of cash only, or accommodation and cash support. The cash support is £37.75 a week – that is £5.39 a day to cover food, toiletries, phone credit and travel. On 15 June 2020, after months of campaigning by charities and others, the government announced that it would make a provisional uplift to asylum support in light of the pandemic; the increase amounted to just £1.85 a week.

For those who have been refused asylum following an appeal, all support is generally terminated within 28 days, even if the woman cannot return to her country of origin due to fears of persecution. Those refused asylum may apply to the Home

Office for subsistence and accommodation - known as <u>Section 4 support</u> - but must satisfy extremely narrow criteria, for example, being unable to return because of a physical impediment or some other medical reason. Severe shortages in quality legal aid mean that it can be very challenging for refused asylum-seeking women to access this support.

Border closures as a result of the virus meant that it became impossible for people to return to their country of origin from the start of the pandemic. Although there was no official announcement by the Home Office, decisions by asylum tribunals from the end of March made clear that people who had been refused asylum who could demonstrate that they would otherwise become destitute would therefore be eligible for Section 4 support.

Additional changes to the asylum process during the pandemic include a threemonth suspension on evictions from Home Office accommodation. It was also announced that people receiving Section

95 support, whose asylum claims are refused, would be transferred to Section 4 support for the same period.

Other relevant changes include an announcement on 20 March by the Welsh government, instructing local authorities to accommodate the homeless during the pandemic, explicitly including people with no recourse to public funds (NRPF). This was followed by an announcement on 26 March by the Ministry for Housing, Communities and Local Government (MHCLG) in Westminster to house all homeless people sleeping outside, in hostels and night shelters. In contrast to the Welsh government, both the Home Office and the MHCLG have made clear that NRPF rules have not been amended. stating that local authorities nonetheless have discretion to support people with NRPF.

Appendix 2: Methodology

The women came from the following 31 countries: Afghanistan, Albania, Bangladesh, Cameroon, China, Republic of Congo, DR Congo, El Salvador, Eritrea, Ethiopia, Gambia, Ghana, Guinea, India, Jamaica, Kenya, Malawi, Myanmar, Namibia, Nepal, Nigeria, Pakistan, Russia, Somalia, Sierra Leone, South Africa, Sudan, Uganda, Yemen, Zambia and Zimbabwe.

The women were living in cities across England and Wales, including Birmingham, Cardiff, Coventry, Liverpool, London, Manchester, Sheffield and Swansea. We did not ask detailed questions on age but eight women indicated that they were aged 70 or over.

Responses were collected via a web-based survey, completed remotely and with the support of the organisations involved in this study. Questions were primarily multiple choice, with some space for additional description, focusing on women's experiences of the COVID-19 pandemic in order to assess whether the outbreak has led to a change in their vulnerability.

Given the risk of re-traumatising vulnerable women, we did not include questions about violence, or detailed questions about mental health, in the survey for asylum-seeking women. All women were asked to indicate consent on the survey following a detailed description of the purpose of the study. Care was taken to emphasise the voluntary nature of participation and that women were free to omit any questions they did not wish to answer.

A separate survey was created for staff and volunteers who have been supporting asylum-seeking women since the outbreak, in order to identify key challenges that they had encountered during this period.

'Anguish' by Andrea Ibarra-Abreu

Andrea is an 18 year old art student, who recently moved to the UK with her family from Venezuela, having fled political persecution. She says, "'Anguish' represents people during COVID-19 times. While some of us may feel bored inside our houses, thousands of others are dying surrounded by nothing but loneliness, despair and anguish. I want people to find these emotions in my picture."



Right now I feel hurt and lost. I want to be granted asylum instead of being in the darkness. I want to feel like a human being again and contribute to the country.

- Nina

- Lola

I want to be treated as a person.

I would like just to be safe and feel free.

- Adah

- Serena

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www.sistersnotstrangers.com sistersnotstrangers@gmail.com

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