Refugee Council: Making women visible

Strategies for a more woman-centred asylum and refugee support system
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woman-centred asylum and refugee support system

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Executive summary

This strategy has arisen from a review of its services that the Refugee Council undertook last year. Much of the information has been gained from refugee and asylum seeking women themselves. The review highlighted the extreme levels of deprivation and the fear women who have come to this country seeking safety often experience. As a result the Refugee Council has developed an internal strategy and work plan to improve its own services. This document aims to increase the awareness of government, other statutory agencies and the voluntary sector, both of the particular needs of refugee and asylum seeking women and their amazing courage and resilience. It looks at some of the specific issues facing women seeking asylum in the UK and makes recommendations for positive actions. In particular it emphasises the importance of working with refugee women themselves and empowering them to achieve change.

The strategy is not intended to be either a final blueprint or a comprehensive summary of all the issues faced by refugee and asylum seeking women. The research undertaken was limited and inevitably focused on some issues more than others. More work needs to be done in a number of areas including the impact of destitution, the health needs of refugee women, sexual abuse, and the particular barriers refugee women face in gaining employment.

Many of the women we spoke to had continued to suffer extreme hardship since arriving in this country. For the situation for refugee and asylum seeking women to improve, all agencies including the Home Office need to establish benchmarks of best practice and monitor and evaluate their services against those benchmarks. It is important that we all challenge poor practice, including the inappropriate or mistaken implementation of legislation and that we involve refugee and asylum seeking women in lobbying for improvements. Critically important to any strategy for improving services is ensuring that refugee and asylum seeking women are seen as key players in the discussions, and that they are facilitated to have their voice heard.

I would like to express my deep gratitude to the large number of individuals and organisations who so generously gave of their time to respond to questionnaires, participate in interviews and review the document. I would particularly like to thank Hildegard Dumper who facilitated our discussions and wrote this document on behalf of the Refugee Council.

Margaret Lally

The following organisations were interviewed:

Afghan Association of London
AHEAD
Chinese Information & Advice Centre
Iraqi Women’s League
Latin American Women’s Group (LWRS)
Midlands Refugee Council
Northern Refugee Centre
Peterborough Women’s Centre
Somali Advisory Bureau
Suffolk Community Refugee Team
Tamil Relief Centre
WARS (Wolverhampton Asylum Seeker and Refugee Advice Service)
Women in Exile

We also held a number of focus groups with refugee women in London and other parts of the country including the Oakington Detention Centre.

List of interviewers

Dawn Baker
Xia Chen
Hanadi Kerdasi
Rose Laker
Maud Mutika
Pearl Thevanayagam
Suzan Torabi

Written responses

Postal questionnaires and a draft copy of this document was sent to a wide range of organisations working with refugee women. We received over 120 written responses and also met with some agencies to discuss the issues in more detail. It is impossible to list all of the respondents separately.
1. Introduction

How this document came about

This document has emerged out of the work the Refugee Council's Women's Network has carried out to develop a Women's Strategy and Action Plan, detailing how the organisation will work towards ensuring its services are sensitive to the needs of women. The Refugee Council Women's Strategy and Action Plan is a response to the recognition that refugee women face particular obstacles in their journey to safety and have been disadvantaged by current asylum policies in specific ways. As noted in “Refugees: Renewing the Vision”1 women seeking asylum are often treated as dependants of the main asylum applicant, whilst having suffered persecution that would entitle them to refugee status in their own right. They may be reluctant to describe their experiences to a male interviewer; they may experience isolation because they are afraid to leave their accommodation and they often fail to get the support they need.

Why a strategy on women?

As an agency, the Refugee Council has been aware for some time of the specific difficulties faced by women that can often be overlooked and felt that it needed to develop a strategy for women. A strategy for women is important as it provides a benchmark against which an organisation can ensure it is providing a responsive service to its women clients. It ensures the organisation has:

- A common understanding of the needs of its female clients
- Identified ways of ensuring its women clients have equal access to its services
- Incorporated into its performance standards measures that ensure its women clients and users, as well as its male clients and users, receive the best possible service

How is this different from a gender strategy?

The term ‘gender’ describes the lives and experiences of men and women, which are socially constructed. ‘Gender’ is a useful term as it differentiates the norms and experiences of men and women’s lives, which are shaped by the society they live in, from those shaped by their biological sex. For example, the act of breastfeeding a baby is determined by a woman’s biological sex. Both men and women, on the other hand, can undertake childcare. This activity is determined by the culture and society they live in.

The fundamental aim of a gender strategy is to work towards the equality of men and women. It recognises that women and men, in most societies, do not benefit equally from the economic, cultural, social and civic life of a community, and that steps need to be taken to redress this imbalance. Women are more likely to be found in the lower scales of any poverty indicator, are often excluded from having a public voice and are more likely to have their quality of life curtailed by gross infringements of their basic human rights (such as right to schooling, employment, control over their sexuality and self determination). Men, particularly refugee men will also experience inequality. A gender strategy therefore, should contain active solutions to addressing these inequalities. In this context, it is appropriate to concentrate initially on analysing and identifying activities that address the inequalities women face. However, achieving gender equality need not exclude activities that target men, if the outcome leads to a greater equality between men and women.

The research that the Refugee Council undertook in producing a strategy focused specifically on the needs of women. Consequently as a first step, it has drawn up a women’s strategy rather than a gender strategy. Many of the recommendations made in respect of refugee women are, however, equally relevant to men.

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1 Refugees: Renewing the Vision. An NGO working paper on improving the asylum system. The Refugee Council in partnership with other agencies.
Methodology

A steering group was established to develop the strategy. A variety of methods were used to ensure wide participation in the exercise and that a range of views were incorporated into the strategy. Methods included postal questionnaires and interviews with clients and organisations working with women. A team of interviewers, nearly entirely made up of refugee women, were chosen for their ability to access targeted national groups and conduct interviews with a number of different organisations providing services to refugee women. They received training and support from the consultant leading the work. Focus groups were held with staff at different Refugee Council offices.

Aims of document

With this document, the Refugee Council aims to disseminate and make widely available the learning and thinking that have come out of the process of putting together an internal strategy on women. In addition, it aims to highlight and incorporate the knowledge that has been built up through research and experiences of other organisations into a document that can be used as a practical tool for change. It is hoped that this document will provide a helpful guide for organisations that are thinking of developing services that are more sensitive to the needs of women.

The document is aimed at all those who work with refugee women as well as refugee women themselves.

The term refugee will be used to describe asylum seekers and refugees, as well as those with leave to remain, unless clearly stated otherwise.
2. Success factors necessary for implementing a strategy for women

There are external and internal barriers to implementing a strategy for women. The model described here is not the only one. Organisations need to challenge themselves and develop a model that suits them. However, there are a number of key ingredients generally agreed to be necessary for the success of any policy addressing the inequality between men and women. The following are ones that the Refugee Council has adopted. These are:

- The support of senior management for gender equality objectives.
- Information specifically on women and their needs (this is sometimes known as gender disaggregated data) to be collected in order to inform policy development and monitoring.
- Resources need to be allocated for capacity building, management and implementation.
- There should be a focus on measuring gender equitable outcomes to create a framework for gender sensitive implementation.
- Gender focal staff e.g. women’s development workers need to be employed to work as advocates and act as catalysts, supporting and promoting gender related skills and approaches amongst colleagues.
- Existing champions within the different government institutions, refugee community organisations and other voluntary sector organisations need to be identified and the relationship fostered through exchange of information, joint strategies, networking, sharing of resources and so on.
- The capacity of refugee women needs to be built so that they can actively participate in the institutions and structures available to them in order to speak for themselves.
- Organisations should develop systems to take into account client/user views of an organisation’s work, especially those of refugee women.
- The skills and knowledge of refugee women in the UK should be made greater use of so that they can achieve their own integration.
- Communication systems need to be responsive to clients who may not be able to speak or read English. Organisations should ensure the availability and appropriate use of interpreters and information tools both internally and externally.
3. Providing protection to asylum-seeking women

Refugee women in the UK

It is not known exactly how many refugee and asylum-seeking women are in the UK. It is only recently that the Home Office has published gender-differentiated statistics. In addition, the data has tended to concentrate on spontaneous asylum seekers and, for instance, does not include those coming in through family reunion.

The latest figures from UNHCR show that women account for 49 per cent of the population of concern to them. In the UK in 2003, 31 per cent of the main applicants for asylum were female. With family reunion and the inclusion of dependants, this figure is likely to increase so that the proportion of men and women in the UK as refugees is likely to be similar. It is important to note that the proportion of women will be higher in some nationalities than others. For example, the numbers of women as the main applicant for asylum amongst Iraqis was 6 per cent, whilst 52 per cent of main applicants from Somalia were women.

The Immigration Appellate Authority Gender Guidelines give the following examples of why women seek asylum:

- Women may hide people, pass messages or provide community services, food, clothing and medical care;
- Women who fail or refuse to conform to behavioural norms (‘social mores’) imposed on them by the state or society may suffer ill-treatment;
- Women may be perceived as sharing the same political, religious, national, racial or other affiliations as their male relatives and have the affiliation and beliefs of their male relatives attributed or imputed to them;
- Women may be unable, or less able, for example for legal, economic or social (including economic) reasons to travel freely or to live on their own, or without family members thus limiting their ability to relocate within their country of origin. Women’s child care responsibilities may affect their ability to relocate;
- Women may be targeted because they are vulnerable, especially young women who can easily be sexually abused or mothers who will do anything to protect their children;
- Women may be targeted as a means of attracting or contacting or pressurising their male relatives or a whole community;
- Women may be persecuted by members of their own family and / or community;
- Women may be victims of domestic violence;
- Women may be persecuted because of their choice of sexual partners including same-sex partners; and
- Women may be victims of forced prostitution.

2 *Displacement, protection and solutions*. United Nations High Commissioner for Refugees
The reasons why women seek asylum

Women may seek asylum for many of the same reasons men do. For example, a woman’s life may be under threat as a result of her activities demonstrating her opposition to a particular political party in her country. In addition, however, women may seek asylum for reasons that are directly linked to their gender.

The legal framework

A person who seeks asylum in this country will have their claim assessed against three main pieces of legislation.

- The 1951 UN Convention Relating to the Status of Refugees and the Protocol Relating to the Status of Refugees 1967 (Refugee Convention). This defines a refugee as someone with a well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinion.
- The Asylum and Immigration (Treatment of Claimants, etc.) Act 2004 and its associated statutory instruments, guidelines and instructions.
- In addition, the UK has introduced the Human Rights Act 1998 (HRA) which implements the Convention for the Protection of Human Rights and Fundamental Freedoms 1950 (European Convention on Human Rights - ECHR). This ensures that all decisions made by immigration officers have to comply with the Human Rights Act. This is particularly relevant in providing protection to people who risk being tortured should they be returned to their country of origin.

Sometimes someone making a claim can draw on other areas of legislation to show that the experiences they have undergone, violate their basic human rights. The definition of men’s and women’s human rights has been developed over the years and produced a body of international agreements. Many of these agreements provide protection from human rights abuses that women still experience (see listed in the Appendix).

The development of a gender sensitive protection system

For some time, there has been grave concern at the way the international refugee protection system can fail women asylum seekers, by the failure of states to interpret the spirit of the UN Convention and recognise women’s gender-specific experiences as persecution.

It is only recently that it has been recognised that women may suffer the same scale of persecution as men e.g. imprisonment, flogging because they have not conformed to certain social constructions of how women are expected to behave e.g. conforming to dress codes or accepting restrictions on freedom of movement. In addition, they can experience forms of harm, specific to them as women that can be relevant to their asylum claim. These can include sexual violence, trafficking, forced marriage, honour killing and female genital mutilation (FGM).

The protection system itself however, can have barriers making it difficult for women to pursue a claim for asylum. If a woman is accompanied by a man and seen as his dependent then her claim to asylum is often not considered by legal advisors. When she makes a claim in her own right, there are often practical difficulties that make it difficult for her to adequately represent her experiences. These can include location of the interview, childcare arrangements and the use of male interviewers or interpreters.

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6 Available at: www.legislation.hmso.gov.uk/acts/acts2004/20040019.htm
In March 2004, the Home Office added guidance in the processing of asylum claims in its Asylum Policy Instructions for caseworkers.10

Case study:

A heavily pregnant mother of two, based in the London area, had to travel to Liverpool to attend her asylum interview. Her husband was also attending his asylum interview in Liverpool on the same day. They had no one to take and collect their children from school, so they decided to take their children with them. They thought that the father could look after the children whilst the mother would attend her interview. However, as a result of delay in her husband’s interview he was not released in time to take care of the children when his wife was called into her interview. The very sensitive nature of her claim - she had been sexually assaulted on several occasions in front of her children - meant that she did not wish her children to be present in the interview and a request was made for her interview to be delayed in order that her husband could look after the children.

The officer at reception refused to allow the interview to be delayed for half an hour to ensure that the children would not have to go into their mother’s interview, even though the husband had been in interview for two hours by this time and would be due out soon. This decision was contrary to UNHCR guidance according to which interviewers should “Provide women the opportunity to be questioned by themselves, out of the hearing of other members of their family. Victims of sexual abuse may not feel comfortable recounting their experiences in front of their fathers, husbands, brothers or children”.9 Rather than allow the interview to be delayed the reception officer threatened this woman with the issue of a non-compliance refusal.

In March 2004, the Home Office added guidance in the processing of asylum claims in its Asylum Policy Instructions for caseworkers.10
4. Overview of the issues faced by women seeking protection in the UK

The issues facing women seeking asylum in the UK have, over the years, been well documented by organisations such as Refugee Council, Refugee Action, the Refugee Women’s Research Project (RWRP), Refugee Women’s Association, Maternity Alliance and others (see Appendix). Refugee Council research indicates that there are still issues to be addressed. This section primarily highlights the key concerns that were raised in the interviews the Refugee Council conducted during the course of its consultation exercise. They reflect the current overriding concern about the impact the UK asylum protection system is having on all asylum seekers in this country and the pressure this is putting on the limited resources of refugee assisting organisations. This section aims to draw out the specific ways in which women are affected. Areas such as detention, employment and training are not examined in any great depth as these are covered more adequately in reports.

Impact of current asylum policy on women

Poverty and destitution

There is a deep concern amongst service providers at the level of poverty and destitution being experienced by asylum seeking women. The withdrawal of support to those whose claim for asylum has come to the end of the process, has created a group of people in the UK who are experiencing desperate poverty, but for whom refugee assisting services have insufficient resources to help. With the denial of the right to work, both men and women at the end of the asylum process often end up homeless and may work illegally in order to survive. Women are however particularly vulnerable in this situation. There are isolated but increasing reports of individual women turning to prostitution. The following are some of the issues that were raised during the Refugee Council’s research:

- Many reported feeling intimidated by social work staff, threatening to put asylum seekers’ children into care. (During this period, Section 9 of the Asylum and Immigration Act 2004 came into force which allows for the withdrawal of support from families who refuse to return. Voluntary sector agencies are unclear whether or not this will result in children being taken into care).
- There are increasing numbers of women who are pregnant, who have come to the end of the asylum process and are without support.
- The social services definition of ‘special needs’ is often very restrictive when applied to refugees and asylum seekers leading to their refusal to take responsibility for a significant number of cases.
- The lack of subsistence support for women who have opted out of dispersal.
- Lack of support for those who refuse to sign for voluntary assisted return.

Dispersal

Whilst the Refugee Council is not opposed to dispersal in principle, it is concerned about inappropriate dispersal and particularly its impact on women. The issues include:

- The refusal by some women to be dispersed away from their friends and community, a source of essential emotional and practical support. They fear facing isolation or racial harassment in the area they may be sent to. A consequence of this is that they lose access to National Asylum Support Service (NASS) support.
- Delays in dispersal mean that women and often children are being accommodated in Emergency Accommodation, which is unsuitable for long-term stay, and particularly unsuitable for children. Dispersal becomes more difficult if children have already started school in London.
- Absence of specialist services for refugee women in some of the regions outside London such as access to specialist mental health services.

11 The Home Office has the power to withdraw support from families whose applications have been refused and who are not cooperating with efforts to deport them. Since children cannot have support removed under the Children Act 1989, they could be put into local authority care. The scheme is currently being piloted in Manchester, North London and Yorkshire.
Accommodation

Following the publication of the Refugee Action report *Is it Safe Here?*, the appropriateness of women’s accommodation continues to be a source of concern. In many cases, accommodation continues to fail health and safety standards. Women have complained about harassment in mixed accommodation, filthy living conditions and poor food.

Some work has already been undertaken to improve standards in accommodation. However there needs to be greater monitoring of the standards of both EA and dispersal accommodation. Consideration should be given to developing more ‘women only’ accommodation and EA should not be used for the very vulnerable or for long periods of time.

“Why did I have to stay in line with men to get my drink? Sometimes I took just one cup because I have to cross the whole dining room and you feel everyone is watching you. I was shaking just going to get a drink.”

“...It is very hard, because you know men always want to bully me, saying things like ‘I like you. etc.’ and if you tell them no, they always start on that.”

“When I saw men and women together in detention I was really shocked....Some of the men they shout at you when you walk by - saying things like ‘big bum’. ...I don’t eat often because I don’t like going to the dining room when men are there.”

Health issues

The British Medical Association has drawn attention to the deterioration of asylum seekers’ health on arrival to the UK. Contributory factors are a low standard of accommodation, poor diet and overcrowding. These were concerns that were also raised in this research. They affect all asylum seekers but women will have particular needs. Many women coming to this country will have routinely suffered sexual abuse at the hands of the police or prison guards, inflicted in order to intimidate them or their family and associates. As a result, some women arrive pregnant and/or are infected with sexually transmitted diseases, including HIV/AIDS. They will also be very traumatised by their experiences of having to flee from their home and often their family. These experiences contribute to the difficulties refugee women face when accessing health care.

In particular they face problems accessing mental health services. Generally, statutory services are mainly concentrated on people with acute mental illness; the result of a combination of Care in the Community policies and pressures on resources. As with the general population, it is difficult for asylum seekers to access help unless they are so distressed that they are close to being a danger to themselves or others.

Access has become even more problematic with changes in legislation. On 1 April 2004 Statutory Instrument 2004 no 614 came into force. This meant that people who were not ‘lawfully resident’ in UK were liable for NHS hospital charges. This has had a particularly negative impact on asylum seekers who are at the end of the process in that they are not now entitled to NHS hospital care unless they have an “immediately necessary or life threatening problem” for which they will be treated and then be charged despite the fact that they are not entitled to any benefit and in most cases are debarred from work. But as well as denying care to some of the most vulnerable - asylum seekers at the end of the process - it has inevitably created confusion about “entitlement” with some asylum seekers who do fit the legal criteria being denied treatment. Further there has been confusion about the implementation. For instance, pregnant women who are at the end of the process may end up being charged in advance for their delivery, although that is explicitly against the guidance. The Refugee Council has started collecting evidence of how this is affecting asylum seekers.

Examples of cases of asylum seekers at the end of the process being denied necessary care include:

- An insulin dependent diabetic who is in renal failure who was given a bill for £70,000.
- A pregnant woman being charged £2,300 for her antenatal care.

There are, however, also examples of good practice with strategic health authorities explicitly encouraging their trusts to ensure that people with an immediate or potentially life threatening condition are treated without delay with issues around charging to be resolved later.

Whilst the research was being undertaken, the Government issued proposals to exclude overseas visitors from eligibility to free NHS Primary Medical Services. If these proposals come into effect it would mean the withdrawal of all free health care except in “immediately necessary for life threatening situations or for certain infectious diseases”. Many health professionals have expressed deep concern about these proposals and have made powerful arguments that any link between immigration status and health entitlement should be removed, and that asylum seekers should have free health care. Again there is already evidence that GP receptionists may deny access to clients whom they believe are not entitled to primary care.

Maternity

The most acute health concerns relate to those women who are pregnant or with children. The following description, given by one health visitor attending to women in Emergency Accommodation, is a snapshot of a situation that is being replicated throughout the country.

Many of the women suffer from severe anaemia and are ketotic (lack of protein). Post nata tally the women have serious problems with breastfeeding due to the lack of nutrition. If mothers cannot breast feed their babies, they have to give them formula milk, but don’t have access to proper sterilising equipment etc. They are given only one type of baby food and the babies simply don’t thrive. Health visitor interviewed during this research.

The section above refers to some of the difficulty pregnant women experience accessing care but there are also concerns about lack of sensitivity from Maternity Services towards the needs of female refugees and their partners. The Maternity Alliance has produced a number of recommendations detailing good practice in their report Mothers in Exile. A joint approach towards taking forward some of the recommendations would strengthen the case for change.

Detention

A number of detained women were interviewed as part of this research and their experiences have contributed to some of the issues identified in this report. A deeper analysis is covered by the report issued by Bail for Immigration Detainees (BID) and the RWRP They took me away. Two of the key findings from the RWRP/BID report were:

- The women we interviewed were clearly upset and traumatised by their experiences of immigration detention in the UK. They suffered fear, uncertainty and a profound sense of injustice and bewilderment.
- They were often unable to exercise their legal rights or secure legal representation to challenge their detention. They were not able to find out what was happening in their case and did not feel that their rights and entitlement had been explained in a language they could understand.

The Refugee Council will be working with other Non-Governmental Organisations (NGOs) to try to develop better access to legal advice generally and for women in particular. This issue is made more important in view of the government’s stated intention in its recently announced Five Year Strategy to increase the number of female bed spaces at Yarl’s Wood by a further 50 and to use these for fast tracking. Since Yarl’s Wood, where most women are held, is an area remote from most immigration practitioners the whole issue of access to competent, sensitive legal advice is of great concern. There are also concerns about the treatment and removal of pregnant women in detention. There are no clear guidelines from the Department of Health or the Royal College of Midwives on this matter.

15 Williams, P Dr. Proposals to exclude overseas visitors from access to free NHS primary care services. 2005
16 Cutler and Ceneda. They took me away. 2004. Asylum Aid.
Accessing information on rights and responsibilities

Briefing and advice for asylum seekers

It is common for the initial main briefing of asylum seekers to be provided to the head of household who is most often male. Women asylum seekers who are dependants often miss out on what is often the only opportunity for them to hear and understand their rights and the choices available to them.

Dissemination of information

There is a need for greater availability of information specifically targeting refugee women. Key areas of information that have been requested by women in the research are information on sexual health, welfare benefits, domestic violence, health, gender related persecution asylum claims, education and employment. There is a growing awareness that women are affected in specific ways by these issues and the specialist advice and expertise they need is not readily available.

The internet is a growing source of information for all. It is increasingly a source of information for refugee community organisations and their communities abroad.

Sexual exploitation of refugee women

Sexual abuse

It is extremely difficult to put a quantifiable figure on the number of women claiming asylum who have been sexually abused. It was beyond the scope of this consultation process to investigate in a comprehensive and systematic way the sexual abuse and harassment that refugee and asylum-seeking women have experienced, in their country of origin, on the journey here as well as in the UK. Nor was it possible to investigate the extent to which women were turning to prostitution as a means of survival. There is an urgent need for a more thorough investigation. However, this research confirms that there is strong evidence that many women who are seeking asylum in the UK suffered gross sexual violations before arriving in the UK. In addition, the research raised the issue of sexual abuse from individuals coming into contact with refugee women through their professional services, such as gas meter readers or legal advisers.

Trafficking

A small scoping exercise initiated by the Refugee Council in this area highlighted that a number of teams were involved in work with clients (male and female) who have been trafficked. Other organisations have reported an increase in clients who have been trafficked coming to them for help.

The UK legal system needs to be both about bringing to justice those that continue to benefit from the forced prostitution of women but also providing for the protection of trafficked women and providing them with effective redress of the human rights abuse they have suffered. There are contradictions between asylum law and anti-trafficking laws. Current asylum policy makes it illegal for someone to enter the UK without proper documentation. This will criminalise trafficked women who are often controlled and made powerless by having all their documentation taken away from them.

In addition, many trafficked women who apply for asylum come from countries that have been identified by the Home Office as being safe. Countries that appear on this list include countries which are known as the main transit countries for traffickers, or from which many trafficked women originate, such as Albania and Serbia. Trafficked women who have applied for asylum tend to have their claim recognised only at appeal stage.17 But these women have no right of appeal in the UK because they are perceived to have come from safe countries.

There are numerous reports18 of women who have been trafficked being taken away from accommodation centres by their traffickers.

17 Interview with Anti-Slavery International in London.
18 Refugee Council staff, Poppy Project reports and others.
Girls and young women

Girls and young women are particularly vulnerable to exploitation and abuse. In addition, they often feel very isolated in the UK. Their accommodation and emotional support needs should be given particular attention.

4.4. Difficulties in dealing with sensitive issues

Domestic violence

There are many barriers facing women from refugee communities who suffer domestic violence. These can include cultural attitudes amongst their community towards the issue. In addition, there is a general lack of knowledge and understanding about their rights, at an individual level as well as amongst many advice services.

Women in this situation fear compromising their own asylum claim or immigration status, or that of their husband. Southall Black Sisters and others are campaigning on this issue. Refugee women do not appear to be benefiting from the Zero Tolerance campaign on domestic violence that is being promoted by mainstream service providers. More needs to be done to disseminate more widely information on the rights of refugee women suffering domestic violence and ways of accessing the specialist mainstream services (such as refuges and help lines).

Sexuality

For many communities this is still a taboo area, which makes it difficult for women and/or members of the community to talk about. However, this is an issue which organisations are increasingly being looked to for support and in turn are seeking training and information in order to be able to effectively support their clients.

4.5. Integration

Issues relating to integration did not feature strongly in this research. As has already been noted, the representatives of organisations which were interviewed were mainly concerned with the poverty and destitution their clients were facing. The individuals who were interviewed were mostly newly arrived asylum seekers. However, there were two areas of concern that need mentioning.

Training and Employment

The issue of the employment of refugees, including women has been covered by a number of reports and studies. The Refugee Council has itself produced a number of publications on this issue. The underemployment of refugee women continues to be a key area of concern, with many women struggling to get their existing qualifications recognised. This research highlighted the difficulties that refugee women experience whilst working in jobs with irregular hours.

The denial of the right to work for asylum seekers will have a different impact on men and women. This is an area that has not received much attention and could be an area for future research.
Capacity-building of refugee community organisations (RCOs)

There is considerable variation in the pattern and volume of services available for asylum seekers and refugees across the country. In the past, fewer refugees settled in the regions outside the south east and major urban areas such as Birmingham and Glasgow, resulting in the existence of fewer refugee specific services in those areas. Statutory and voluntary sector services have had variable success in responding to the different demands placed on their services by refugees as a new, larger or more diverse client group. There are now increasing numbers of RCOs in the regions. Some are well developed and provide a range of services to members of their communities. However, in the main RCOs in the regions are new groups, are often unfunded, operate from private homes and rely entirely on volunteer support with little infrastructure.

These characteristics of RCOs in the regions appear to be confirmed by the responses to the Refugee Council survey sent out in which the majority of respondents from London identified themselves as an RCO whilst the majority of respondents from the regions described themselves as voluntary sector. Refugees in these areas consequently find it hard to access the specialist advice and support they require and often feel very isolated, due to lack of contact with others from their country.

There is a need for greater involvement of women in refugee led organisations and more projects and activities led by refugee women. The capacity of refugee women to develop their own services and support systems need to be encouraged, facilitated and funded.
5. The way forward: Strategies for change

5.1. Organisational change

This section makes a number of suggestions of ways in which an organisation can improve its services. It then goes on to make recommendations for the policy changes that are needed in order to address the detrimental impact asylum policy is having on refugee women and the poverty this policy is creating.

It is important to realise that even in small ways, it is possible to challenge and change policies that are detrimental to certain groups in society. Organisations working together can be very powerful in achieving change. The success in challenging the implementation of Section 55 is one such example.

Case study: An example of non-governmental organisations’ changing policy

Section 55 of the Nationality, Immigration and Asylum Act of 2002 gave the Home Office powers to deny NASS support for those who failed to make their claim for asylum as soon as they arrived in the country. The impact of this was to leave many asylum seekers destitute. Homeless charities such as Shelter reported increasing numbers of asylum seekers amongst those sleeping rough or turning up to their hostels and refugee assisting agencies were overwhelmed by the scale of destitution they were presented with. A concerted effort was made by a range of NGOs to work together and coordinate their activities both to support clients where possible, and to challenge this policy. After repeated lobbying, legal challenges and campaigning, in June 2004, the Government finally backed down and gave instructions that there should be more flexibility in accepting in-country applications by asylum seekers. This has resulted in less destitution amongst newly arrived asylum seekers.

There are two reasons why an organisation may want to consider making changes to the way it offers its services. The first is the need to make sure refugee women are not prevented from using services by physical barriers such as location, hours of opening, communication, intimidating waiting environment and so on. The other reason relates to the quality of services an organisation is offering, and ensuring that its services are relevant to its client base, in this case refugee women. The following are some suggestions for the changes that might be required and offers ideas for making an organisation more women friendly. More detailed suggestions can be found in ‘Doing it for ourselves’ a capacity building toolkit produced by the Refugee Council.

- Monitoring and review. Dedicated time needs to be set aside to review and audit what your organisation needs to ensure its services are accessible to refugee women. This will be different for each organisation, depending on its size, structure and organisational capabilities.

- Training. All staff should receive training in developing a more gender sensitive approach to their clients and to increase awareness of the problems that female clients may present with.

- Specialist knowledge. Details of specialist services available for signposting, on issues such as domestic violence and FGM, should be readily available. In addition, organisations should have in place other support materials, such as good practice guidelines on issues affecting refugee women.

- Project Development. The design of all new projects should consider how their women clients would benefit. Women should be consulted at the outset and the project designed to take into account their different roles, for example, their care role within the family.

- Making women more visible. Organisations should consider ways to make women more visible in the sector. This can include involving women service users in representing the organisation to funders, seeking to employ refugee women, involving them in speaking to policy makers and talking to the media.
• **Initial briefings/interviews.** Ideally women asylum seekers should be interviewed by female staff trained in dealing with women who are vulnerable. Interviews should be in a private space where they cannot be overheard. Both husband and wife should be briefed together about women’s rights as a matter of course. Also, the woman should understand that she might have an asylum claim in her own right.

• **Information.** On-going efforts should be made to disseminate information to refugee women. This information should be available, written or orally, in a variety of languages, and available on-line. Translated information should also be put up in waiting rooms, toilets and all accommodation. Organisations should consider having a dedicated women’s section on their websites, providing information on women’s issues with appropriate links to other information leaflets and websites.

• **Communication.** A policy on the use of interpreters is important. This will ensure that the range of practical solutions to communicating with women who may not speak English have been considered. Women may not be used to dealing with public institutions to deal with personal or family matters. The choice of having a female interpreter should be offered whenever possible when working with female clients.

• **Procedures** need to be put in place for supporting any client who discloses traumatic experiences such as rape and sexual abuse, whether in this country or abroad.

• **Physical environment.** All reception and waiting areas should be reviewed for how women friendly they are. Possible improvements may be the introduction of women-only areas, baby changing facilities and children’s play area.

• **Collecting gender differentiated information on service users.** Organisations hold useful information on how policy is affecting refugee women. For example, the report by the RWRP19, based on an examination of their cases over a two-year period, indicated that women are finding it difficult to access legal advice. Refugee assisting services are in a position to observe trends from the kind of cases they are presented with and play a vital role in drawing attention to the impact policies have on refugee women.

Services for refugees and asylum seekers in the UK are traditionally planned on the basis of the (mainly male) figures of principle applicants provided by the Home Office. In addition, most service providers still collect data based on the main applicant or head of household. This can mean that the number of women who use their services is often not recorded. Both these factors can result in needs of women being invisible in the planning process. An additional consideration is the difference in the proportion of men and women within different nationalities. For example, in 2003, the number of women claiming asylum as the principle applicant amongst Iraqis was 6 per cent, whilst amongst Somalis this was 52 per cent. Failing to take these factors into account can lead to planning and service delivery being distorted.

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**Case study:**

The Refugee Council conducted an analysis on the capacity of its database to produce gender specific information, and to see if the information that the Refugee Council held could contribute to our understanding of the gender differences in the access and use of services.

An analysis of the figures for 2003 shows that of a total of 67,411 adults that accessed the Refugee Council services, 40 per cent of these were women. A breakdown of the data held in the different Refugee Council offices, reveal that in the Brixton office, this figure rises to 53 per cent. These figures cannot claim to reflect the proportion of male and female refugees and asylum seekers in this country as a whole as the figures will include those who have made multiple use of the Refugee Council services. However, these figures are an important indication of the actual usage of services by refugees and asylum seekers and provide vital information and guidance for the planning of services.
Producing gender-disaggregated data provides a useful benchmark against which an organisation can check that it is reaching the people that it intends to serve. It can also provide a benchmark in order to monitor whether the organisation is truly representative in its staffing, amongst its trustees and other organisational structures.

- **Partnership-working.** Coming together and pooling resources to address common areas of concern, such as domestic violence, can help to maximise the limited resources generally available for this work. Refugee-assisting organisations should consider working closely with mainstream organisations to address common areas of concern such as domestic violence, health or childcare.

### 5.2. Policy change: Monitoring of government policy for its gender impact

Part of the Government's commitment to the UN Beijing Platform for Action (1995) is the monitoring of all new policy for its gender impact. This means that all new legislation should be assessed for the likely impact it would have on women prior to implementation. To date, there is no evidence that this is being done in a systematic way. It has been left to the voluntary sector to provide such information.

Government asylum policy has a specific, and often negative, impact on refugee and asylum seeking women, ranging from the withdrawal of support to forcing women to return to oppressive conditions. Over the past few years there has been a steady erosion of standards of protection and the rights of refugees.

Many of the recommendations below are targeted at statutory agencies but, as noted above, voluntary and community organisations can also make an impact.

#### Poverty and destitution

- Agencies providing support to refugees need to ensure they fully understand areas of asylum policy, such as Section 4 ("hard case support") and Section 9 and how it is being implemented. They need to equip themselves with the knowledge and skills to both support women affected by the legislation and to challenge bad practice amongst statutory services.

- Women are particularly affected by Section 9 and need to be made aware that support will not be withdrawn immediately and if they do not want return voluntarily, there may be other options available to them, such as making fresh applications or providing additional evidence that it is dangerous for their family to return. They should also be aware that withdrawal of support from the family is dependent on the court being satisfied that such a withdrawal does not breach Article 3 of the European Convention on Human Rights.

- Leaders of statutory agencies such as Directors of Social Services and Chief Executives of health trusts need to take a lead in ensuring areas of asylum policy such as the ones mentioned above are implemented humanely and that front-line staff are properly trained in this area of work.

- The lack of subsistence support for those who have come to the end of the process of claiming asylum needs to be reviewed.
Health

• The existing legislation should be reviewed to ensure that vulnerable asylum seekers are not being denied access to necessary medical care.

• Free primary care should continue to be provided until someone is removed from the UK.

• Strategic health authorities and health care providers should ensure that all their staff are aware of the particular needs of asylum seekers and how best to meet those needs.

• The recommendations of the Maternity Alliance in their report *Mothers in Exile* should be supported.

Trafficking and sexual abuse

• The draft European Convention against Trafficking in Human Beings should be endorsed by the UK government.

• Implementation of current asylum policy should take into account the position of trafficked women. They should not be penalised for their lack of documentation, or initially avoiding telling the truth, nor returned to their country of origin without careful consideration.

• More research is needed on the extent to which women coming to this country seeking protection are sexually abused whilst in the UK.

Dispersal under the NASS system

• The dispersal process needs to operate in a more effective and humane manner and be gender sensitive. Women who have compelling reasons to stay in London should have their cases considered sympathetically.

• The Home Office should consider introducing a case working system, aiming to ensure that clients are dispersed to areas which most appropriately meet their needs.

• Greater resources are required to provide capacity building opportunities for RCOs and to assist refugee women in setting up their own groups, in dispersal areas.

Accommodation

• The recommendations identified by the Refugee Action report *Is it safe here?* continue to be relevant and need to be implemented in full.

Forced returns

• The Home Office should monitor this from a gender perspective giving feedback to organisations on, for instance, the number of women returned with or without a male partner.

• There should be gender sensitive indicators to inform the decision-making process of returns. These should be made public.
Improving the Home Office’s information base

- Country information: The Independent Advisory Panel on Country Information should be asked to monitor and recommend that there is a gender perspective on all country information collated by the Home Office.

- Gender-disaggregated data: The Home Office should continue to improve the collection of gender disaggregated statistics.

Resettlement

- The Home Office and the relevant partner agencies should ensure that gender monitoring is incorporated as a special component of evaluating the Gateway Protection Programme.

Protection

- The Home Office should be asked to carry out an evaluation of the implementation of the Asylum Policy Instructions guidance on gender, the results of which should be made public.

Returns

- In considering returns it has to be remembered that women’s needs can be very different from the needs of male clients. They are subject to a range of unique pressures in considering what is best for all of their family. It should be recognised that some women may find it difficult to make an independent decision about returning or remaining especially if the decision goes against the wishes of her husband, family, community or cultural norms. It is important therefore that work around returns includes informal advice and assistance to enable women to make the right decisions for themselves.

- All return policies should be developed in close consultation with refugee women’s organisations. The position of women should be taken into account when developing a return policy. Refugee women’s organisations are well placed to be able to provide important information on what a woman returning to her country could expect to experience.

General

- The Home Office should be asked to fulfil its obligations under the Beijing Agreement and assess all new policy for its gender impact.

- The Inter-Agency Partnership needs to reconvene the Multi-Agency Working Group on Refugee Women to pursue the concerns raised by this report.

5.3 Conclusion

This document has sought to set out some of the key issues for refugee women, drawing on the testimonies of those women themselves. It has tried to offer some tools for addressing those issues but recognised that a lot of areas have not been covered. Further research and analysis needs to be undertaken but there are clear messages about what can and should be done now.
Appendix 1: Further information

This section aims to provide a starting point for those who would like to know more about the issues identified in this document. It does not aim to provide a comprehensive list of what is available. More information can be obtained from the Refugee Council or ICAR Navigation Guide on Women Refugees and Asylum Seekers in the UK (www.icar.org.uk/res/nav/ng007/ng007-04.html).

Useful additional references

Association of Canadian Colleges, Gender Equality Tools - Gender Strategy Development: www.brazil.accc.ca/English/gender/guidelines/strategy.htm

DFID (Department For International Development)  


Oxfam's policy on Gender Equality: www.oxfam.org.uk/what_we_do/issues/gender/policy.htm


Further legislation


Contacts

It's impossible to list all the services available for refugee women, only those organisations that specifically provide services to refugee women from all nationalities on a regional or national level have been included. Refugee Action and Refugee Council can tell you if there is a refugee women's group in your area.

Amnesty International
The Human Rights Action Centre
17-25 New Inn Yard
London EC2A 3EA
Telephone 020 7033 1581
Email info@amnesty.org.uk
http://www.amnesty.org.uk/index.shtml

Refugee Action
Asther Hagos, Women's Development
and Policy Specialist
240a Clapham Road
London
SW9 OPZ
Telephone 020 7735 5361
Fax 020 7587 3676
http://www.refugee-action.org.uk/women.asp
http://www.refugee-action.org.uk/takeaction.asp

Refugee Council
Elaheh Rambarzini
240-250 Ferndale Road
London SW9 8BB
Telephone 020 7346 6700
Fax 020 7346 6778
www.refugeecouncil.org.uk

Refugee Education
and Training Advice Service (RETAS)
14 Dufferin Street
London EC1Y 8PD
General line 020 7426 5800
Advice line 020 7426 5801 (Tuesdays,
Thursdays, 2.30 to 5 pm)
Email retas@education-action.org
www.education-action.org

Refugee Women's Association
Print House
18 Ashwin Street
London E8 3DL
Telephone 020 7923 2412
Fax 020 7923 3929
Email: info@refugeewomen.org
www.refugeewomen.org/rwa.htm

Refugee Women's Resource Project
Asylum Aid
28 Commercial Street
London E1 6LS
Telephone 020 7377 5123
Fax 020 7247 7789
Email deboras@asylumaid.org.uk
www.asylumaid.org.uk

Scottish Refugee Council Women's Group
5 Cadogan Square (170 Blythswood Court)
Cadogan Street
Glasgow
G2 7PH
Telephone 0141 248 9799
Fax 0141 243 2499

Welsh Refugee Council
Phoenix House
389 Newport Road
Cardiff, Wales CF24 1TP
Telephone 029 2048 9800
Fax 029 2043 2980
www.welshrefugeecouncil.org