

Good practice in social care for refugees and asylum seekers

Key messages

- social care services should use a rights-based approach, considering the person as an individual and assessing their need thoroughly, rather than viewing them solely through the lens of status and eligibility
- some groups may be less visible – for example older refugees, asylum seeking children and young people in families, asylum seekers with disabilities and women who are victims of domestic violence
- it is important to develop specialist expertise and capacity within the workforce and build strong multi-agency partnerships for working with refugees and asylum seekers
- social care services need to develop, sustain and engage with refugee and community organisations, involving refugees and asylum seekers in the design and delivery of services
- social care services should provide access to culturally sensitive advocacy and to a robust sensitive culturally interpreting service
- equalities monitoring systems need to include refugees and asylum seekers.

This At a glance summary looks at good practice in social care for refugees and asylum seekers. It is primarily aimed at service commissioners and providers working in local authorities in children's and adults' services. It will also be of interest to asylum seeker and refugee organisations and voluntary organisations. The messages contained in the summary come from:

SCIE Report 31: Good practice in social care for refugees and asylum seekers

Much more detailed guidance and pointers for good practice, the legal and policy framework, practice examples, useful contacts and resources can be found in:

SCIE guide 37: Good practice in social care for refugees and asylum seekers.

Introduction

Refugees and asylum seekers face adversity before, during and after arrival in the UK. They have complex interwoven needs and are likely to require a wide range of social care services. Many may be unclear about how to access services and their entitlement.

These pointers for good practice have been developed from a review of the literature and a survey which included the views of refugees and asylum seekers, social care providers and refugee and community organisations.

A *refugee* is an individual to whom the UK government has offered protection in accordance with the Refugee Convention 1951 and granted leave to stay.

An *asylum seeker* is a person who has asked for protection but has not received a decision on their application to become a refugee, or is waiting for the outcome of an appeal.



Good practice in social care for refugees and asylum seekers

Good practice in social care rests on a foundation of principles and organisational commitment, particularly:

A rights-based approach

Refugees and asylum seekers can make a positive contribution to society, given the right circumstances. It is important to set a response to their social care needs in a context of human rights. Most important are the right to be treated with respect and the rights set out in international conventions and treaties to which the UK is committed. Adopting a rights-based approach to social care is the best way of ensuring that asylum seekers and refugees are treated with dignity, equality and respect.

Organisational commitment

Securing organisational commitment to promoting the wellbeing of refugees and asylum seekers, as an integral element of mainstream social care policies, is an important first step.

Development of strong multi-agency partnerships

Multi-agency partnerships with a clear focus on refugees and asylum seekers, at both strategic and operational levels, will facilitate the development of access to appropriate social care provision.

A strategic approach

The development of a local strategy using the joint strategic needs assessment framework will enable local authorities to plan and develop services for current and future populations of refugees and asylum seekers, as well as other migrant populations.

Involving refugees and asylum seekers

‘We rely on each other. I feel safe to ask someone from my own community. I’m afraid to ask anyone else in case I say the wrong thing and it affects my status’

(Female asylum seeker)

Involving refugee and community organisations and refugees and asylum seekers in the design and delivery of services is good practice and the outcome will be more appropriate service provision. Local refugee and community organisations are a vital resource which needs to be nurtured and sustained. Such groups have a crucial role to play in the design and delivery of local services and fostering social inclusion.

Workforce development

Workforce development is needed to ensure a focus on, and expertise in relation to, refugees and asylum seekers. This may include the provision of local authority specialist teams with a focus on refugees and asylum seekers. Training and supervision for social care providers and practitioners should be available.

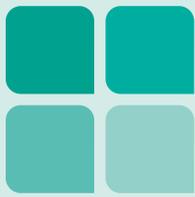
Monitoring and Review

Equalities monitoring is an essential component of performance monitoring and is required by equalities legislation. Commissioners and social care providers need to ensure that current monitoring systems include refugees and asylum seekers.

Building on these foundations, suggested good practice includes:

Providing accessible information

There are many opportunities through the asylum process to provide information to asylum seekers



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about their rights and the responsibilities of local authorities in relation to social care. Information needs to be made available in appropriate formats. Refugee and community organisations can play an invaluable role in terms of providing information about rights and signposting and supporting refugees and asylum seekers to access appropriate services.

Advocacy

‘We need lots of help, we need advice on what is available for us, we need courage to continue with life, and we need motivation.’

(Female asylum seeker)

Advocacy is needed at both an individual level and a community level to empower individuals and facilitate participation in decision-making processes. The Children’s Commissioner for England has recommended that all children should be appointed a guardian who is independent and can act as an advocate and enable children to participate effectively in reviews. The Mental Health Act 2007 introduced the provision of independent mental health advocacy (IMHA) to detained patients.

Gateways and signposting

‘As individuals we do not access social care services, because we do not know what is available for us.’

(Female, status unclear)

Refugees and asylum seekers often have low awareness and take up of social care services. Therefore imaginative gateways to social care and smart signposting are invaluable. Primary care and asylum seeker and refugee organisations can be useful ways to signpost social care services. Generic and specific community organisations and services can also be helpful in sign posting people to social care services.

Clear and appropriate eligibility criteria for services

Local authorities have a duty to assess all individuals (including refused asylum seekers) if they appear to be in need of care services under section 47 of the NHS and Community Care Act 1990.

If asylum seekers are not eligible for social care services they should be assessed under the Human Rights Act to establish whether not to provide appropriate services would be a breach of their human rights. For refused asylum seekers, detailed practice guidance on assessing and supporting children, families and adults is available from the No Recourse to Public Funds (NPRF) Network website at:

http://www.islington.gov.uk/Health/ServicesForAdults/nrpf_network/default.asp

High quality culturally sensitive service provision

‘It’s about participation: listening and starting from the point of where people are; using people’s views to inform your work; involving people in decisions and being courageous enough to hand over power.’

(Refugee community organisation respondent)

In order to provide services to the highest standards, commissioners and providers need to ensure that services are culturally competent. This will include enabling refugees and asylum seekers to access culturally specific forms of support, including faith-based approaches. A robust system of interpreting is essential to ensuring that communication with refugees and asylum seekers is effective. To ensure that services promote independence and wellbeing, direct payments and personal budgets should be considered. Access to counselling and culturally appropriate mental health interventions should



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be available. This should include access to specialist psychological help for victims of torture.

Promoting social inclusion, integration and independence

Recognising and building on the strengths of refugees and asylum seekers should be the focus for social care providers. Community and refugee organisations have a particular contribution to make in relation to empowering people. These organisations often facilitate peer support networks as well as providing activities, such as English language classes that will contribute towards promoting both inclusion and wellbeing.

Good practice for children and young people

‘Social care practice with asylum seekers is not different to good practice with any other client group. The key factors are to carry out thorough assessments to clarify needs, consider all options and bear in mind that they are children first, then asylum seekers.’

(Local authority children’s services respondent)

The previous section clearly applies to children and young people too. In addition, pointers specific to children and young people are:

- the provision of safe, age-appropriate accommodation under section 20 of the 1989 Children Act
- support for refugee families – including a focus on child welfare, not only on child protection
- families may have poor quality housing and insufficient means to support themselves – in such cases action to address child poverty may need to be taken
- support may need to be considered for children who are caring for a parent with social care needs
- assessment and access to appropriate services should be available for children and young people who have been trafficked
- independent age assessment involving a thorough assessment of the child’s social and cultural combined with detailed medical and psychological observation
- engagement in age-appropriate training and education and the provision of leisure activities
- careful thought needs to be given to the process of transition from children’s to adult services.

For those children and young people in families, good practice in meeting their needs will be intertwined with the quality of response to their parents, as necessary.

SCIE’s At a glance summaries have been developed to help you understand as quickly and easily as possible the important messages and practice advice in SCIE’s guides. These summaries will give you an overview of the messages or help direct you to parts of the guide that you may find most useful. You can also use them as training resources in teams or with individuals. We want to ensure that our resources meet your needs and we would welcome your feedback on this summary. Please send comments to info@scie.org.uk, or write to Publications at the address below.

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