

APPG on Migration - call for evidence on migration and poverty

Professional Experience questionnaire

1. What is your name?

- Dr Jayanthi Lingham, Research Associate at the Centre for Care
- Professor Majella Kilkey, Co-Investigator at the Centre for Care
- Mr Justin Machongo, CEO at Stand As One, Sheffield

2. What organisation or institution are you answering on behalf of?

This is a joint response from the Centre for Care at the University of Sheffield and Stand As One, Sheffield.

The Centre for Care's work includes one research study called 'Borders and Care', developed and undertaken by Prof Kilkey and Dr Lingham. The 'Borders and Care' research examines the care needs and experiences of people with migration histories, centering the experiences of older adults aged 50+. The research is being undertaken through qualitative data collection in Sheffield, and in close collaboration with community organisations who work with people with migration backgrounds. One of these organisations is Stand As One.

Stand As One is a non-profit organisation with registered charity status, based in Sheffield. The organisation works with disadvantaged migrants, refugees and asylum seekers in and around Sheffield. It supports them to deal with housing issues, access vital services, increase skills and employability, access legal support, and integrate and live independently. Our response is based on: 1) evidence from emerging findings of the Centre for Care's 'Borders and Care' study, specifically research carried out in collaboration with Stand As One; 2) practitioner insights and evidence from Stand As One.

Our evidence relates to the experiences of people who came to the UK from East Africa on the 'Vulnerable Persons Resettlement Scheme' (VPRS), previously known as the 'Gateway Protection Programme'. All are refugees with indefinite leave to remain, and all are aged 55 and over. They are all from East Africa and were displaced from their country of origin, due to war/political violence, to refugee camps in bordering countries, before arriving in the UK (Sheffield).

We have also submitted a response to the Lived Experience questionnaire, based on a workshop (held in mid-October 2023) with nine members of the community supported by Stand As One.

3. Which section of the migrant community is the main focus of your work?

- Asylum Seekers
- Refugees
- Migrants
- Other
- None

4. From your experience do those in migrant communities struggle with their financial income and what specific policies contribute to this?

Our knowledge and experience relate to a number of under evidenced areas: 1) The long term experiences and needs of those who came to the UK from East Africa via the Gateway Protection Programme; 2) the experiences of older refugees, including those of retirement age; 3) how care needs and experiences of refugees affect their everyday lives; 3) refugees' experiences in a contemporary setting impacted by over a decade of economic austerity, the COVID-19 pandemic and the cost-of-living crisis.

Based on both the research data collected so far and the professional experience of Stand As One, we have consistently found that those in the migrant community we work and research with are struggling with their financial income and are unable to meet their basic needs. A specific policy that contributes to this is those on the VPRS are only offered limited support to settle in the UK for a one year period; after that, they are very much left to manage on their own. This creates a 'cliff edge' at the end of that year of support. If people are not able to learn English, establish a life for themselves and find employment in this first year - all extremely challenging without intensive support, given the circumstances that they have come from - they are likely to become entrenched in economic precarity, with working age people unable to overcome significant barriers to entering the paid labour market.

Another specific policy that affects financial income is the restrictive criteria of the VPRS. 'Family' is narrowly defined within the scheme as "nuclear" family. However, this may not fit the social and economic norms in the country of origin, where extended kin and community have care roles and responsibilities. For example, in the country of origin, a male extended family or community member might be the sole source of economic support to a woman with young children. However, as he is not an immediate relative or spouse, he would not qualify to join them in the UK on the VPRS. The woman and children are then left without this economic support when they arrive in the UK and are especially financially exposed after the first year when VPRS support ends. The restrictive criteria also means that people may not have been able to come to the UK with all of their immediate family members; for example, children over the age of 18 do not qualify as family members. However, these family ties do not end with separation across borders. Not only does such separation have an impact on people's mental health (knowing that vulnerable family members left behind may be struggling), but the person in the UK needs and wants to continue to support the family member/s who are living in typically economically precarious and politically volatile circumstances. They might do so by sending remittances to their children/other vulnerable family member/s, in order to enable them to survive; however, this deeply impacts their own financial situation in the UK.

The other policy that contributes to people's poverty is the entirely inadequate financial support that comes from Universal Credit, and from the State Pension for those who have been unable to work in the UK. Please see the answer to Q5 for more information.

5. Is the economic support available from the government adequate for those in migrant communities to support themselves and their families? If possible, please provide evidence.

Most people we research and work with rely on Universal Credit or the State Pension as their sole source of income. Especially since the end of 2022 and the cost of living crisis, these sources of economic support have become entirely inadequate to meet the basic costs of daily living, including food, gas and electricity and housing. Furthermore, people who came to the UK as older refugees and who may have been unable to work due to disabilities, receive a particularly low state pension due to not having a history of paid employment in the UK. Over the past 18 months, Stand As One, a small and newly registered charity, has already supported 105 cases relating to financial need, social support, and housing.

The support available through Universal Credit and the State Pension falls short of the amount required to sustain a very basic standard of living, such as eating three healthy meals per day. Many people have growing physical health needs due to ageing, including long term conditions such as diabetes, and are living with unsupported mental health needs. Older people with physical health conditions such as diabetes report being unable to afford to buy basic food such as milk or bananas which they need to eat before or with their medication.

The inadequate level of government support drives people into debt, as they may simply be unable to afford their housing or utility bills. People often rely on their school age children or small organisations such as Stand As One to help them interpret, understand and respond to English language documents and letters, including those regarding bills and debts. It is extra challenging to navigate the local government system to respond to these, as council services are so depleted by budget cuts that multiple phone calls go unanswered, written communication receives no (or extremely delayed) response, and in-person services are rarely available. Community organisations and support services are also stretched to breaking point and often unable to step in because they too have been severely impacted by local budget cuts. In some instances, debt demands dropping through letterboxes relate to previous tenants, but people report paying them and/or worrying about them because they assume they are responsible. If issues are not resolved, this can lead to government financial support such as Universal Credit being cut at short notice, which in turn puts people at high risk of eviction if they cannot pay their rent.

6. Have immigration policies influenced access to public services for migrant communities? If yes, please tick all the public services that, from your experience, migrant communities have difficulty accessing.

- Education
- Healthcare (Physical, mental and Sexual)
- Housing
- Social welfare (Universal Credit, working and child tax credits, job seekers allowance etc)
- Social support (Child protection, elderly care, disabled care, domestic violence etc)
- Financial Services (Banking)
- Other

- None

7. In relation to the last question, please explain which policies affect those in migrant communities access to public services and how.

The difficulties people experience trying to access public services reflect over a decade of austerity in the UK. While this may be common to the UK population generally, on top of this the East African refugee community that we work with also faces the impact of the government's 'hostile environment' immigration policies. For this group, difficulties accessing public services are exacerbated by a lack of understanding of how these services work in the UK, the complex and often bureaucratic systems people must navigate, as well as the inherent challenges when people speak no or limited English in the UK (despite speaking 3-4 African languages). Due to war/conflict and political and economic instability in their countries of origin, refugees, especially older refugees, may not have been able to complete schooling and may have limited literacy in their primary languages.

Many members of this group have complex health needs, as a consequence of both having been displaced from conflict in East Africa, as well as from living in economically precarious conditions for an extended period in the UK. People's physical health and mobility is also affected by typically having done manual labour into middle and later life in East Africa, as well as living conditions in the UK - e.g. living in an unheated house, having to walk long distances due to unaffordable public transport. Older people are often dealing with all this as well as caring for grandchildren while their adult children work long hours in low-paid jobs. People face long waiting times for GP, hospital and dentist appointments; these waiting times exacerbate existing health conditions and create new ones.

In terms of mental health, people had been offered minimal or no support. When asked about their mental health, they emphasised the impact of their current socio-economic and political conditions in the UK. As well as the stress arising from their financial situation, people feel excluded from participating in society and building a sense of belonging in the way they would like to. For example, most are eligible to apply for British citizenship and would like to do so; however, they are unable to afford the immigration fees charged as part of the process.

Pressures on younger members of the family can also affect their health, potentially impeding their ability to focus on their education. For example, they are often required to act as interpreters in complex and challenging interactions with state service providers. More broadly, when the support available in the first year of resettlement to navigate life in the UK terminates, younger family members have to assume responsibility for navigating life for the whole family.

8. Have current immigration policies impacted the ability of migrant communities to afford essentials such as food, heating and electricity? If yes, please tick all the essentials that, from your experience, migrant communities find challenging to afford.

- Water
- Food

- Electricity
- Gas
- Heating
- Communication (Wifi, phone etc)
- Rent/mortgage
- Public transport
- Medication
- Personal hygiene/toiletries
- Childcare
- Child related costs (baby products, children's clothes etc)
- Other
- None

9. In relation to the last question, please explain which policies affect those in migrant communities ability to afford essentials and how.

As described under Question 4 and 5, most people rely on Universal Credit or the State Pension as the sole source of income, which simply does not cover the costs of these essential items. For those who want to find paid employment, they face multiple barriers to this, and the longer that they live in poverty, the more their health deteriorates, and the more entrenched in precarity they become.

The extremely low level of state support means that people are unable to eat healthily. Being able to prepare and eat healthy and nutritious food means being able to prepare and eat the African food they would have in their country of origin. There, they would have grown their own food; here, however, they can only source it from specialist food shops. The inability to afford this food on the state support they receive affects people's physical health, especially when they have conditions such as diabetes.

10. Have current immigration policies contributed to migrant communities being unable to find adequate housing? Additionally, have current policies contributed to homelessness among migrant communities? If yes, please provide detail on the specific policies and the effect these policies have had.

People were supported with housing in their first year in the UK. However, unable to find paid employment, this means that they have little choice or control over where they live. People are housed in areas where there are high levels of anti-social and intimidating behaviour, such as bottles being thrown at their windows. They reported feeling unsure whether they were being targeted because of racism or because they are refugees. Either way, this contributes to physical insecurity and poor mental health. Stand As One supports cases in which households in need have to wait between two and four years to be re-housed. Stand As One also supports cases in which people wait up to five months for urgent repairs to their council housing.

Administrative issues with Universal Credit are common, often leading to it being suspended for a period of months and leaving people unable to pay their rent. These administrative issues can be caused by errors made by UK immigration officials during the immigration process. During this process, incorrect and inconsistent information (e.g. relating to spelling

of the person's name or their date of birth) is put on identity documents by immigration officials, through no fault of the refugee themselves. The refugee reports receiving no response when they try to contact the Home Office to correct these errors and inconsistencies. The welfare support system subsequently picks up on identity discrepancies and, assuming benefit fraud, cuts off payments like Universal Credit at short notice and without adequate explanation. At such times, facing eviction or destitution, people are wholly reliant on the support of community organisations such as Stand As One to navigate both the austerity-affected local welfare system and the hostile immigration authorities.

11. Do current immigration policies affect those in migrant communities paid and unpaid employment opportunities? If yes, please provide detail on the specific policies and what effect these policies have.

People in this community are typically multilingual; however, they often have limited literacy as they may not have been able to complete formal education in their countries of origin. This makes it exceptionally challenging to learn English in ESOL classes as they are currently organised. Not being able to communicate in English, or only to a limited degree, is a significant barrier to finding paid employment in the UK. Upon reaching retirement age, access to free ESOL classes is terminated, thus reducing possibilities for volunteering.

12. What specific changes would you recommend for current immigration policies to mitigate the adverse effects of poverty amongst migrant communities? Additionally, what evidence can you provide to demonstrate that these policy changes could make a difference? (i.e. cost-benefit analysis, economic or social modelling etc?).

- Support offered to people on the VPRS should continue for a longer period of time and needs to be bolstered significantly. Support needs to be trauma informed.
- Support for ESOL services and to learn English needs to be significantly improved. This should be seen not solely in terms of job seeking (which many experience as punitive, especially as they are typically also caring for children and grandchildren), but also in terms of the much broader benefits of social connection, being able to build a life and understanding and participating in UK society. People, especially older refugees who cannot speak any English at all, need ESOL teachers who can communicate with them in their first language (in the case of the people with whom we research and work, this is usually Congolese Swahili). They report being in classes in which the teacher does speak another language, which benefits the English language learning of students in the class who can also speak that other language. In the community with whom we work, there are individuals who could be supported to become ESOL teachers, if this were an economically sustainable job opportunity.
- Alongside English teaching, offer support to develop the skills and knowledge needed to find employment - e.g. writing CVs, cover letters, where and how to search for jobs.
- Promote access to apprenticeships and other forms of vocational and professional education which could lead to employment opportunities.
- Universal Credit needs to be adjusted upwards in line with inflation.
- The two-child benefit cap needs to be abolished.

13. Is there any relevant research, articles or reports that you would like to draw the attention of the inquiry team to whilst they consider appropriate policy recommendations?

- The findings shared are from ongoing research. As such, they reflect people's current experiences; however, we have not yet published any findings from this specific project. We would be happy to share the future outputs of this work with the APPG on Migration once they are available.
- Platts-Fowler and Robinson (2011) 'An Evaluation of the Gateway Protection Programme. A Report Commissioned by the Home Office' - <https://shura.shu.ac.uk/27241/1/eval-gateway-protection-programme.pdf>
- Platts-Fowler and Robinson (2015) 'A Place for Integration: Refugee Experiences in Two English Cities' - <https://onlinelibrary.wiley.com/doi/10.1002/psp.1928>.
 - This is an academic publication based on the same research as the Home Office report above. It discusses the importance of geographic location to integration; Sheffield is one of cities discussed in both. The findings remain relevant, although it is worth noting that this is of course prior to the implementation of austerity measures, the pandemic, and the subsequent cost-of-living crisis.
 - The majority of the participants in this study (61%) were aged 18-34 years, and only 3% were aged 65+. The experiences of older refugees and migrants is an important gap in the literature; our 'Borders and Care' research seeks to address this.
- Haycox (2022) 'Policy paradoxes and the Vulnerable Persons Resettlement Scheme: How welfare policies impact resettlement support' - <https://journals.sagepub.com/doi/10.1177/02610183221088532>
 - Haycox focuses on Syrian refugees but situates the issues they face in the context of both the resettlement scheme and the impacts of austerity.
- Brown, Gill and Halsall (2022) 'The impact of housing on refugees: an evidence synthesis' - <https://www.tandfonline.com/doi/full/10.1080/02673037.2022.2045007>
 - This evidence synthesis raises issues that we have heard both in our research fieldwork, as well as in the workshop we convened for the Lived Experience questionnaire.
- Collyer, M., Morrice, L., Tip, L., Brown, R. and Odermatt, E. (2018) A Long Term Commitment: Integration of Resettled Refugees in the UK. Available online: <http://www.sussex.ac.uk/migration/research/integrationcitizenship/refugeeresettlement/reports>
- Charsley, K., and Spencer, S. (2019) 'Understanding integration processes: informing policy and practice', Policy Report 44. Available online: <https://www.bristol.ac.uk/policybristol/policy-briefings/understanding-integrationprocesses/>
- Coley, Joseph; Godin, Marie; Morrice, Linda; Phillimore, Jenny; Tah, Carlyne (2019). Integrating refugees: What works? What can work? What does not work? A summary of the evidence, second edition. University of Sussex. Report. <https://hdl.handle.net/10779/uos.23468426.v1>

14. Would you be willing to attend an oral evidence session in Parliament at the end of November to provide further evidence if required?

Yes, all three respondents would be willing to do so. We have also submitted a response to the Lived Experience questionnaire summarising the experiences of people supported by Stand As One, some of whom have also expressed that they would be interested in such an opportunity.