

## **Written evidence submitted by Asylum Matters (COR0122)**

[Asylum Matters](#) works regionally and nationally to improve the lives of refugees and people seeking asylum. Our five regional representatives are based in the North East, North West, Yorkshire and Humber, Wales and the West Midlands.

Our submission has been informed by information or evidence from partner organisations and colleagues across the UK including: Asylum Link Merseyside, ARC Project Blackburn, The Birth Partner Project (Cardiff) Central Asylum Yorkshire, DARE (Darwen), DASH Huddersfield, Displaced People in Action (DPIA), DLA Piper UK LLP, Freedom from Torture, Host Nottingham, Oasis Church Birmingham, One Community Link (Stockton-on-Tees), Refugee Action, Refugee Women Connect, RETAS, The Sanctuary Newport, Sharedydd, St. Chad's Sanctuary, Stories of Hope and Home, Walking With North Tyneside, Womenscentre Kirklees.

**The recommendations in this submission are those of Asylum Matters alone.**

Since the end of February through the period of "lockdown" beginning Monday 23<sup>rd</sup> March, the Covid-19 pandemic has brought a number of concerns in the asylum accommodation estate to the fore. Our main concerns are:

1. Difficulties social distancing in initial accommodation and hotel provision, including the continuation of the practice of unrelated adults being forced to share bedrooms;
2. Inadequate communication to people in asylum accommodation in relation to COVID-19 and support available if they need to self-isolate or practice shielding;
3. Lack of clarity from the Home Office on obligations of accommodation providers in the context of the pandemic;
4. The impact of inadequate asylum support rates, including lack of access to food and cleaning products;
5. Lack of clarity as to how any measures put in place to protect the safety and wellbeing of people seeking asylum will continue beyond the end of the COVID-19 pandemic period.

A related, urgent, issue is the inability of some people, particularly those eligible to access Section 4 support, to access accommodation at all at this time. Refugee Action have provided substantive evidence on this point (in annex) and we have also received evidence from several partner organisations on the current situation for their frontline services, which we annex to this submission.

**Annex 1 & 2:** Refugee Action: (1) delays in asylum support; (2) additional evidence on accommodation standards

**Annex 3:** Refugee Women Connect (Liverpool)

**Annex 4:** Displaced People in Action (Wales)

**Annex 5:** The Birth Partner Project (Cardiff)

**Annex 6:** Freedom from Torture

**Annex 7:** Testimony from MD (a person seeking asylum)

### **1. Social distancing in initial accommodation, contingency accommodation and dispersal accommodation**

*"Nobody knows each other. They tell you to sleep in the double bed with other. Every three- or four-days new people come in. I am very scared. You are not in a safe place... On the news they say do not go out."* Resident, Initial Accommodation, London<sup>1</sup>

Since the end of March, movement of people (dispersals and relocations) in the asylum accommodation estate has largely ceased, apart from in exceptional circumstances.<sup>2</sup> However, there are serious concerns about how people in asylum accommodation, especially those in hostel or hotel type accommodation (be it part of the 'initial accommodation' (IA) estate<sup>3</sup> or in 'contingency' (hotel type) accommodation) are able to practise effective social distancing.<sup>4</sup> These concerns are magnified as the use of this type of accommodation is now increasing with Providers currently procuring across the country to accommodate new arrivals and others at this time (e.g. people newly eligible to access Section 4 support).<sup>5</sup>

### 1.1 Enforced bedroom sharing

A major concern is that the **practice of unrelated adults being required to share rooms is still occurring**. We have no comprehensive picture of how widespread this is across the accommodation estate but are aware of reports in the last weeks (during April) of bedroom sharing of unrelated adults in Wales (Clearsprings); Birmingham (Serco - who subcontracts the management of the initial accommodation to Urban Housing), and London (Clearsprings). Mears (Urban House in Wakefield - also subcontracted to Urban Housing) have publicly committed not to allow room sharing in their accommodation estate<sup>6</sup>, although we and others have received information that this may indeed now be happening.

A resident there told us recently: *"A week ago the person I share a room with moved out and they tried to move a new person in. I was very scared as if they bring someone from the outside in, I don't know if they have Coronavirus, and they don't know if I have it. They told me "everyone is sharing, so you have to share."*

Sharedydd in Cardiff informed us of a case in Initial Accommodation of *"a young lady who had had contact with a confirmed COVID case. We informed Clearsprings who simply said that she should be self-isolating in accordance with government guidance. However, she was sharing a room. According to Clearsprings, she was meant to get meals delivered to her room, but she had not been told this and was collecting from reception like everyone else."*

Freedom from Torture informed us of a case where *"an age disputed young person was placed in a shared room in Initial Accommodation before the pandemic. Three separate requests for a single room were made but the issue was not resolved. Following legal action (a pre-action protocol letter was sent), accommodation was found for the client [in location A], but was cancelled as it was unsuitable due to being [not in location B], so over an hour's travel from rehabilitation services. [redacted]. This was almost 2 weeks ago, and the client still remains in a shared room in initial accommodation, despite safeguarding needs being notified."*<sup>7</sup>

<sup>1</sup> See Annex 2 (Refugee Action)

<sup>2</sup> Chris Philp, Parliamentary Under Secretary (Home Office) wrote to Local Authorities on 27 March stating that people would not be required to leave asylum accommodation at this time, to be reviewed before the end of June 2020.

<sup>3</sup> Some parts of the initial accommodation estate (e.g. in Liverpool, Derby and Glasgow) consist of self-contained flats or single self-catering rooms with shared communal dining / bathroom facilities between several rooms. Other provision is hostel type accommodation (e.g. Birmingham, Wakefield), with communal dining facilities serving large numbers of people.

<sup>4</sup> The Independent reported on this most recently on 3rd May 2020

<sup>5</sup> See Annex 1 (Refugee Action)

<sup>6</sup> See: <https://twitter.com/scotrefcouncil/status/1250756104696598530>

<sup>7</sup> See Annex 6 (Freedom from Torture)

We consider the practice of enforced bedroom sharing to be unacceptable at all times, and even more so in the current context. We have been working with partners - including local authorities and third sector organisations - to raise our concerns about enforced bedroom sharing in asylum accommodation for a number of years, including submitting evidence to previous Select Committee inquiries. In 2017, the Home Affairs Select Committee recommended that “forced bedroom sharing be phased out across the asylum estate as a whole and that the use of large scale HMOs be reduced.”<sup>8</sup> However, it remains that enforced bedroom sharing between unrelated adults is still contractually allowed in the current asylum accommodation contracts (AASC).

[Annex C to the Statement of Requirements](#) to the Asylum Support and Accommodation Contract (AASC) sets out detailed specifications on room sharing.<sup>9</sup> Whilst it prohibits the sharing of rooms between ‘unrelated adults of the opposite sex’, in the same sleeping quarters, ‘without the prior consent of the Authority’ (the Home Office), it makes no such prohibition on the sharing of rooms between unrelated same-sex adults. Annex C Paragraph C.1.6.4 states “The Provider shall not accommodate ‘individuals or groups of individuals within the same Accommodation if Local Authority services or primary or secondary care bodies advise otherwise, unless explicitly authorised by the Authority.’” It is difficult to see how the advice of health providers at this time would be that the practice remains acceptable.

See Annex 2 and 6 for further case studies of room sharing in Initial Accommodation, provided by Refugee Action and Freedom from Torture.

## 1.2 Inadequate social distancing measures in place

Due to the shutting down of many face-to-face services which people seeking asylum would normally go to for support, there is a general lack of voluntary sector information about the situation in the initial accommodation estate and where hotels are in use. Nonetheless there have been worrying reports<sup>10</sup> of **social distancing being an impossibility** in the current situation:

*“I am feeling scared; last night there was someone sneezing and there is a lot of tension .... You become so scared because you are touching all these things. We do not have any sanitizer.”* Resident, Initial Accommodation, London<sup>11</sup>

*“It’s not possible to self-isolate here. In the canteen, we all use the things, the same trays. There is no hand sanitizer. A few weeks ago, they tried to reduce the number of people sitting at the tables and have different mealtimes, but there are too many of us here it isn’t possible.”* Resident, Initial Accommodation, Yorkshire<sup>12</sup>

<sup>8</sup> Home Affairs Select Committee Twelfth Report of Session 2016-2017 Asylum Accommodation (HC 637), paragraph 97, recommendation 27, published 31st January 2017:

<https://publications.parliament.uk/pa/cm201617/cmselect/cmhaff/637/637.pdf>

<sup>9</sup> Providers can allocate accommodation so that the following people can share the same bedroom: husband and wife; people the Home Office has agreed may cohabit; related children of the same sex under 16; related children of different sexes under ten (or 16 where they are all in Initial Accommodation); a couple and one child under ten (or 16 where they are all in Initial Accommodation); a single parent and one child under ten (or 16 where they are all in Initial Accommodation); or a couple or single parent and more than one of their children under 16 (provided they are all in Initial Accommodation).

<sup>10</sup> See the following news reports: [https://www.theguardian.com/world/2020/apr/15/coronavirus-fears-uk-asylum-seekers-made-share-cramped-rooms?CMP=Share\\_iOSApp\\_Other](https://www.theguardian.com/world/2020/apr/15/coronavirus-fears-uk-asylum-seekers-made-share-cramped-rooms?CMP=Share_iOSApp_Other)

<https://www.scottishhousingnews.com/article/mears-moves-300-glasgow-asylum-seekers-into-hotels-where-social-distancing-is-impossible>

<https://www.symaag.org.uk/2020/04/15/how-mears-are-putting-asylum-tenants-in-danger/>

<sup>11</sup> See Annex 2 (Refugee Action)

<sup>12</sup> Case study, Asylum Matters

DLA Piper UK LLP also got in touch to say: *“we have also received reports from South Yorkshire Migration and Asylum Action Group (SYMAAG) of a particularly worrying situation at an initial accommodation centre (IAC) in Wakefield called Urban House. SYMAAG have been interviewing residents of Urban House both before and after the UK lockdown began about the crowded and unhygienic conditions they are living in. These conditions have not improved since the UK lockdown began on 23 March 2020 and therefore asylum seekers living in Urban House are unable to exercise social distancing or even follow basic advice on handwashing. Some individuals have serious underlying health conditions which mean they need to self-isolate but are unable to do so. There is therefore a clear risk not only to the health of individuals living at Urban House but also to the wider local community. These issues have recently been highlighted and described in further detail in an article by the Independent.”*

Reports from our partners show that those who are placed in potentially dangerous situations, may consider leaving that accommodation to become homeless or move in with friends, against government guidance, because they deem this to be the lower risk option compared to remaining in unsafe asylum accommodation.

### 1.3 Concerns around hotel type-accommodation

*“As long as I am in this place, I don’t think I will be able to self-isolate because things are so tough here,” he said. You are totally at risk. People are scared and frustrated. People are suffering.”* Hotel resident, West Midlands <sup>13</sup>

Unlike in initial accommodation where people are, in theory, offered a health screening appointment by healthcare professionals, the situation with respect to health screening in hotels is unclear and needs urgent clarification. Our understanding is that in hotels people should be asked on arrival if they have a pre-existing health condition and therefore need a doctor: if they do they will be booked an appointment. They are then told if they require a doctor at any time to speak to the staff and they will make arrangements. It is unclear to us, however, what records are kept of these interactions or how they are feeding into public health responses, and clarification on this point would be welcomed. Many of the concerns around IA apply equally to hotel-type accommodation:

Refugee Action told us of a person in a hotel room in the West Midlands who is sharing a room with a stranger in a bed one and half-feet away. When they want water, they must use the bathroom tap. The resident has been in the hotel for almost four months and gets a new roommate every one to two weeks. The food is poor, people are served unflavoured rice and pasta for dinner. They each receive two small bars of soap each week for personal hygiene. People can take food to their rooms but must go to the eating area to collect it at the same time.

It is understood that the use of hotel-type accommodation is necessary at this time. However the problems with this kind of accommodation, especially for lengthy stays, are well documented.<sup>14</sup> The Home Affairs Committee’s Twelfth Report of Session 2016-17 on Asylum Accommodation made a number of recommendations to the Home Office on both initial accommodation and temporary accommodation, focusing on improving housing standards, ensuring the welfare of residents, and encouraging better communication between the Home Office, Providers and local authorities.<sup>15</sup> We are concerned that some of these recommendations and have not been taken forward in the current context.

<sup>13</sup> See Annex 2 (Refugee Action)

<sup>14</sup> Lack of inductions; lack of trained staff and female staff to deal with women residents; presence of general public; access to healthcare; no / little toiletries and lack of laundry facilities; lack of activities; overlong stay; problems in postal delivery; community tension issues.

<sup>15</sup> Home Affairs Select Committee Twelfth Report of Session 2016-2017 Asylum Accommodation (HC 637), published

Our experience tells us that transparent communication, meaningful consultation and the early setting of protocols with Local Authorities and multi-agency meetings is essential to effectively plan services and mitigate potential issues with community tensions. As Providers step up their procurement efforts in this area, and following the lifting of the requirement for Local Authority consent for asylum dispersal at the end of March reports are starting to emerge of a **lack of consultation with Local Authorities**<sup>16</sup> when procuring block accommodation, which does not bode well (especially at a time when councils are themselves using this type of accommodation to house the broader homeless population).

Other recommendations for good practice include: support to service users to access ongoing healthcare services; that **all service users are provided with written induction information in a language they understand on arrival**, including clear information on how to contact Accommodation Providers, Migrant Help, and local voluntary sector organisations still operating in the area, as well as information and guidance around C-19; **the dedicated provision of staff 24/7 who are trained and understand the client group**; appropriate regular and clear updates to residents in a language they understand; **ensuring people are in this kind of provision for as short a time as possible**; ensuring food is culturally appropriate and covers health needs; and the provision of suitable toiletries and laundry facilities or a process for clothes to be taken away. As well as being accommodated in safe housing, **everyone should have access to financial assistance**, including people in initial accommodation (Section 98) and those accommodated in hotels.

It is important to note that reports of hotel provision were not wholly negative. Central Asylum Yorkshire told us: *“Three of the clients in Huddersfield were accommodated in local hotels, one after a wait of around three weeks and two after a wait of around ten days. They were all satisfied that they were in single rooms with food being provided on trays and left outside their doors.”* We have also heard reports of useful cooperation between local GP practices and Provider staff, for example in Stockton-on-Tees, where all new arrivals are registered with a specific GP practice.

## 1.4 Recommendations

- The Home Office and AASC providers must - in conjunction with public health experts - urgently **assess the adequacy of asylum accommodation provision in light of the COVID 19 pandemic, to ensure it complies with public health requirements**. Any public health assessment should be made available to local, regional and national stakeholders;
- As a matter of urgency, **accommodation providers must put in place measures to allow for greater social distancing**, including securing more accommodation; ending the practice of enforced bedroom sharing between unrelated adults; ensuring people have access to soap and disinfectants; providing access to free WIFI in all accommodation; and establishing clear protocols to allow for people in asylum accommodation to self-isolate where necessary;
- In managing existing and procuring new accommodation, **the Home Office and its contractors must proactively work with local authorities, devolved governments and the third sector to identify suitable accommodation and plan wrap around support**. The Home Office must also create a direct funding stream for all local authority dispersal areas. This joined-up and transparent approach must be instituted urgently;

---

31st January 2017: <https://publications.parliament.uk/pa/cm201617/cmselect/cmhaff/637/637.pdf>

<sup>16</sup> See following news article: <https://www.edp24.co.uk/news/politics/asylum-seekers-badersfield-complaints-1-6628497>

- With respect to initial accommodation and hotel type accommodation, **the Home Office and Providers should commit to providing regular updates** to local and national stakeholders on social isolation arrangements if people are/become symptomatic.

## 2. Communications to people in asylum accommodation in relation to COVID-19 and support available if they need to self-isolate or practice shielding

*“Many of the women we are in contact with first learnt of the risk of C19 and ways to lessen risk from our volunteers. Continued not to get communication about it from other sources for at least a couple of weeks after lockdown started. Eventually fliers were put through the letter box in some properties. No attempt was made for these to be language appropriate. Reports were that they made no difference - non-English-speaking residents could not understand the fliers. Because of lack of access to wider news sources some people in shared accommodation remained ignorant.” Birth Partner Project, Cardiff <sup>17</sup>*

### 2.1 Communication from Home Office and providers

A pressing concern is the level of communication which people in asylum accommodation, especially in dispersed accommodation, have been receiving on what action to take in the context of the pandemic and where to go for help. On or around 23 March 2020, we are aware of communications going out to Service Users in dispersed accommodation in the top ten languages from some providers which were accompanied by health guidance compiled by Doctors of the World and the British Red Cross, based on government guidance. These shared some basic details on service provision (see Section 3) and the universal information that people should contact 111 if they were symptomatic. It is not, however, clear that people have received these across the board, and we are not aware of further coordinated communications to people in asylum accommodation since this time.

It is our understanding that systems have been put in place to assist people in asylum accommodation who are self-isolating or shielding in the context of the pandemic. We understand in particular that people who are shielding or self-isolating can contact the AIRE provider, Migrant Help, if they are in need of food packs or other essential items, and that Migrant Help have on their IT systems a flag to be able to alert accommodation providers that this is the situation, so that accommodation providers can put in place appropriate support. However, there has been no general publication of this advice that we can find, nor do we believe it has been communicated effectively to service users.

For example, a communication to Service Users that we have been able to access (from Serco, dated 23 March) enclosing official health advice to call 111 if symptomatic makes no mention of this provision which may be available, but states “You must only contact AIRE regarding your property if it is an emergency, we will not respond to any issues you report that are not an emergency; when you contact AIRE you must make sure you tell them if you are showing symptoms of COVID 19 or are self-isolating.” Those living in asylum accommodation may not know from this letter that they need to contact Migrant Help (the AIRE provider) for assistance. As of 29 April 2020 the [Migrant Help website](#) made no mention of any invitation to people seeking asylum to contact them to report that they are in self-isolation that we could find; neither has a search of any of the accommodation providers’ websites or twitter feeds revealed any such information.

In this context, it is difficult to see how the Home Office and Providers can be confident that all accommodated people seeking asylum have received and understood adequate information about COVID-19, how to keep themselves and their families safe, and how to access support if they need it. It is also

<sup>17</sup> See Annex 5 (Birth Partner Project, Cardiff)

difficult to see how the Home Office could have a clear or comprehensive picture of the extent of the infection across the asylum accommodation estate.

## 2.2 Support for people seeking asylum who are self-isolating or shielding

It is not clear how the Home Office has been working with health and public health authorities locally to identify vulnerable people in the dispersed accommodation estate with conditions which mean that they need to shield at this time. Nor is it clear how, in the context of [current Government guidelines on social distancing for households](#)<sup>18</sup> which forbid people from leaving their house for 14 days if they are living with someone who is symptomatic, people in houses of multiple occupation who are not symptomatic will be provided with food, or with cleaning products without being required to go out and buy them (given that people seeking asylum do not have the ability to buy online through ASPEN or bulk buy on low rates of asylum support).<sup>19</sup>

Refugee Women Connect in Liverpool and the Birth Partner Project in Cardiff have reported on the difficulties of liaising with the accommodation providers (Serco and Clearsprings respectively) in respect of the provision of cleaning products and food parcels. Refugee Women Connect stated that Serco had told them they were currently unable to provide cleaning products ‘*due to COSSH regulations*’<sup>20</sup> whilst the Birth Partner project stated that there was “*No attempt to provide for the basic needs of higher risk people who are shielding. This means some people with underlying health conditions are taking the risk of going out shopping as they have no other choice.*”<sup>21</sup>

There have been some welcome examples of enhanced cooperation between local authorities and accommodation providers in responding to the pandemic. Mears, in particular, has sent out communications<sup>22</sup> to VCS stakeholders in partnership with some local authorities in the North East and Yorkshire and Humber stating that, after agreement from the Home Office, it will act to support people by conducting weekly phone check ins (with interpreters if required) to check in on well-being, address concerns, allow people to raise emergency repairs and provide guidance. If there is not access to a mobile phone, Mears will provide one. Anyone who is symptomatic will be contacted daily, food and essential items will be delivered, and discussions are ongoing with the Home Office on solutions for a lack of phone credit and Wi-Fi access in accommodation. We are not aware at this time of any communications from other Providers offering similar levels of support.

Nonetheless, we have general concerns about the capacity of accommodation providers to provide support to people in asylum accommodation, including whether they have appropriate supply lines for the provision of food (ensuring the safety of their own staff), and whether and how they will be reimbursed for this provision. Our concerns are not helped by the fact that we have no idea of the scale of the pandemic across the asylum accommodation estate. Many local authority areas are mounting impressive responses to assist those in their communities who are shielding or self-isolating, in order to provide them with support such as provision of food and medicine, and we know that there is a willingness to extend this help to people in the

---

<sup>18</sup> See: <https://www.nhs.uk/conditions/coronavirus-covid-19/what-to-do-if-you-or-someone-you-live-with-has-coronavirus-symptoms/staying-at-home-if-you-or-someone-you-live-with-has-coronavirus-symptoms/>

<sup>19</sup> The Home Office communication of 26 April states only: “There are a number of challenges in enforcing compliance with self-distancing and isolation in homes of multiple occupancy. Local Health colleagues and Police have powers under the Covid-19 legislation to enforce self-isolation. We have worked closely with Public Health England to ensure that all practical measures are in place to support their guidance. If asylum seekers do not follow the rules, they will be reported to the Home Office and the Police if deemed necessary.”

<sup>20</sup> See Annex 3 (Refugee Women Connect)

<sup>21</sup> See Annex 5 (Birth Partner Project, Cardiff)

<sup>22</sup> Coronavirus update, Middlesbrough Council and Mears, 16 4 20

asylum system in local communities. We are aware that there are ongoing discussions with Local Authorities about referral mechanisms for ensuring that people seeking asylum can access this sort of provision whilst the pandemic is ongoing and would welcome clarification from the Home Office in this regard. We are concerned, however, that these do not appear to have been yet put operationally in place in any systemic way.

We are further concerned about the Home Office's statement (in its media blog of 26 April) that "Asylum seekers including failed asylum seekers are entitled to asylum support in line with travel restrictions due to coronavirus. There is no need for this cohort to call on any funding outside asylum support".<sup>23</sup> We trust that there will be no implications for individuals in terms of their asylum support for any humanitarian assistance they are provided with during this time (e.g. provision of food parcels or cleaning materials by accommodation providers or local authorities) and would welcome very clear confirmation on this point.

We believe it essential that people seeking asylum are linked in effectively to local support mechanisms to ensure that they are not isolated at this time.

### 2.3 Recommendations

- The **Home Office should provide information as to how it and its Providers have identified and are working to identify vulnerable people** seeking asylum both in initial and dispersed accommodation who may need to shield;
- With respect to dispersed accommodation, the **Home Office and Providers should commit to providing regular updated information on how they are identifying vulnerable service users during this time**, the means of additional support, the means of increased contact management, and the supply of food parcels, cleaning materials and mobile telephones;
- The **Home Office should urgently clarify what arrangements it is putting in place, along with accommodation providers, for the provision of humanitarian assistance** (food and cleaning materials) to households (self-contained accommodation for families and HMOs) **where there is an occupant who is symptomatic**, and where the whole household, according to Government guidance, should therefore be in isolation;
- The **Home Office and Providers should commit to provide regular written updates to people in asylum accommodation** - in a language they understand - with clear healthcare instructions, and details on assistance available;
- In the absence of an ability to engage in regular welfare checks, **accommodation providers should commit to providing updated induction materials to every property on local welfare services, and sources of support in the local area.**

### 3. Contractual responsibilities during the COVID-19 pandemic

The Home Office, which bears responsibility for the management of the AASC contract, and sets the obligations of the accommodation providers, has failed to issue timely or detailed guidance about the revised contractual obligations of accommodation providers in the context of the pandemic. Communication from Providers, both to people in asylum accommodation and to the voluntary and community sector has often been ad-hoc and inconsistent.

#### 3.1 Communication from the Home Office and Providers

---

<sup>23</sup> Available at: <https://homeofficemedia.blog.gov.uk/2020/04/26/factsheet-asylum-accommodation-and-applications/>

As of Wednesday 29 April 2020, the only publicly available information from the Home Office on its way of working with respect to asylum accommodation in the context of Coronavirus was a “Factsheet” on [the Home Office in the media blog](#), published on 26 April dealing with “Key Facts” on asylum accommodation and applications, stating “a wide range of measures have been implemented to ensure that guidance on social distancing and self-isolation is properly applied.”<sup>24</sup> On 29 April, a ‘Factsheet for the Voluntary and Community Sector’ on, inter alia, asylum accommodation was received from the Home Office disseminated to stakeholders through the current Single Point of Contact for liaison with refugee supporting organisations (British Red Cross).<sup>25</sup> A similar document has been shared with Strategic Migration Partnerships, published [online](#) by the West Midlands Strategic Migration Partnership.

This welcome, if delayed, communication gave some information on the approach taken by the Home Office, including the fact that a Director from Public Health England is currently embedded within the Home Office, details on instructions on social distancing measures particularly in initial accommodation, and details on support for service users available from the AIRE Provider, Migrant Help. There remains no written guidance from the Home Office circulated nationally to key stakeholders through this or other channels on precisely what the revised contractual expectations of accommodation providers are at this time, particularly in respect of dispersal accommodation, although the requests have been made and undertakings given.<sup>26</sup>

Prior to 29<sup>th</sup> April, there had been some ad-hoc external communications from accommodation providers themselves (accessed through regional forums or distribution networks), which have given some detail of the service provision now expected, particularly in respect of dispersed accommodation.<sup>27</sup> From communications from Serco (23 March) and Clearsprings (1 April) and examination of correspondence to Service Users we believe the situation across providers broadly to be as follows:

- Inductions into properties will be restricted to a health and safety briefing, and where possible, conducted by phone;
- Emergency repairs will be attended to where there is a risk of harm to Service Users;
- All other defects will be ‘made safe’ until they can be fully attended to at a later date, in order to protect Service Users and Staff from exposure to infection (Clearsprings) Where possible, Category 2 emergency fixes will be an interim solution that mitigates the need for staff or service users to be unduly exposed to risk (Serco);
- For boiler repairs, additional heaters and kettles will be provided on a temporary basis;
- Routine repairs will not be completed;
- Inspections will not be carried out;
- Emergency assistance requests (including meter top-ups, Emergency Cash Payments, issuing of vouchers where there is an ASPEN card problem), will be attended to.

We also understand from these communications and from the centralised communication of 29 April that accommodation providers are willing to act outside the bounds of their contractual obligations in some respects (for example “supplying food parcels where needed”)<sup>28</sup> but concerns remain as to their capacity to

<sup>24</sup> See: <https://homeofficemedia.blog.gov.uk/2020/04/26/factsheet-asylum-accommodation-and-applications/>

<sup>25</sup> A similar communication entitled ‘Factsheet for Strategic Migration Partnerships’ was received on the same day by RSMPS with an instruction from the Home Office not to publish online without permission.

<sup>26</sup> Contractual expectations under normal circumstances are laid out in the [AASC Statement of Requirements](http://data.parliament.uk/DepositedPapers/Files/DEP2018-1112/AASC - Schedule 2 - Statement of Requirements.pdf) <http://data.parliament.uk/DepositedPapers/Files/DEP2018-1112/AASC - Schedule 2 - Statement of Requirements.pdf>

<sup>27</sup> The communications we have been able to access are: Clearsprings update, date 1 April 2020; Mears external update, dated 6 April 2020; Serco external update, dated 23 March 2020; Serco letter to Service Users, example dated 23 March 2020; Serco external update, dated 18 March 2020;

<sup>28</sup> See page 5, Asylum Accommodation & Support: Factsheet for Strategic Migration Partnerships online here:

do so, and the potential ‘siloining’ of people seeking asylum away from better resourced modes of community support (see section 2, above).

Nonetheless, it remains unclear exactly what Providers are contractually obliged to deliver during the COVID-19 pandemic, and the kind of service people seeking asylum can expect to receive from accommodation providers.

### 3.2 Difficulties resolving property issues during COVID-19

We have, in addition, received some worrying reports of people who appear to be in urgent situations, such as one case of a house with no running water where the accommodation provider has been providing bottled water to the resident<sup>29</sup> and the case of a heavily pregnant woman in who is having to walk up many flights of stairs to get to her room, and has fallen as a result.<sup>30</sup> Refugee Women Connect in Liverpool told us that during this time *“The usual escalations channels are fruitless and we have little to no correspondence from Migrant Help when escalating issues in writing...In one case a client was dispersed during lockdown out of our area to accommodation with no heating, hot water or cooker. This was escalated to Migrant Help with no response.”*<sup>31</sup>

Freedom of Torture also told us that some of the issues they were dealing with prior to the pandemic have remained unresolved. For example, *one of their clients has been experiencing problems with bedbugs in his property; the client reported that there are bed bugs throughout the house, both in their bedroom and the living room. The accommodation provider (Clearsprings) refused to deal with the problem on account of the Covid situation; they only agreed once Migrant Help became involved and told them that it had to be dealt with; it was a health and safety issue. The same client also was left with a broken bed and window. Clearsprings stated that because of the Covid situation, they would not deal with any repairs unless there is a health and safety risk.*<sup>32</sup>

It is worth noting that we have had other reports of positive interactions with Migrant Help (for example when trying to get people on Section 4 accommodated).<sup>33</sup> However, it is evident that some accommodated asylum seekers and support organisations are having difficulties resolving urgent issues with property standards during COVID-19.

### 3.3 Recommendations

- The Home Office should commit to **open, unambiguous publication as a matter of urgency of the contractual expectations of accommodation providers during the pandemic**, and commit to collating and circulating providers’ responses through established coordination mechanisms (regionally and nationally);
- **The Home Office and all its contractors** - including the AIRE and AASC providers - must also **commit to providing regular written updates to Local Authorities, the voluntary sector and other stakeholders** on the actions they are taking to minimise the impact of COVID 19 on people in their care.

## 4. Inadequate asylum support rates

---

<https://www.wmsmp.org.uk/covid-19-resources-and-guidance/>

<sup>29</sup> Case study, One Community Link

<sup>30</sup> Case study, RETAS

<sup>31</sup> See Annex 3 (Refugee Women Connect)

<sup>32</sup> See Annex 6 (Freedom from Torture)

<sup>33</sup> Case study, Host Nottingham

*“Lack of WIFI in asylum properties is a nightmare, clients need access to what’s going on in the world and to stay in touch with friends / services.” Support worker, Barnsley*

General feedback from partner organisations at this time is that people seeking asylum are frightened and are finding it particularly difficult to access food and mobile data at this time to keep informed on the situation during the pandemic.

We received a testimony from a man seeking asylum in the North East who told us what it was like to live off just over £5 a day during the COVID-19 pandemic:

*“Living on £37 /week is now almost impossible. Giving that thought that we are from different culture and we consume different type of food. The lack of government regulations or proper measures they normal price of the food items has gone around 20% high now. So, we depend on the food aid.”<sup>34</sup>*

**Walking With in North Tyneside** have been surveying their clients on their needs over the last three months, and they have reported lack of food provision, the need for clothing for new arrivals, lack of phone credit leaving people very vulnerable and unable to access online support; a fear of going out for exercise, issues with ASPEN cards not arriving (access to funds) and concerns about how to get medication as among the issues reported to them. Reports from the **ARC project in Blackburn** and the **DARE project in Darwen** have confirmed that lack of mobile data is a real issue, with people sometimes prioritising this over food at this time, as it is a source of access to information and for people to continue their learning of the English language. **DPIA** told us of one of the people they support in Grangetown who was finding it hard to access adequate food for themselves and their family. The only shops locally that could be accessed were little independent stores. These shops had increased their prices to a level that was not affordable on asylum support. Food poverty and social isolation is also felt particularly acutely by people on Section 4 support (£35.39), who cannot access cash and so cannot ask others to shop for them.

The most recent Home Office methodology, published in 2018,<sup>35</sup> used to fix asylum support rates at £37.75 a week (Section 95) states *“a weekly expenditure of £2.84 [...] is comfortably enough to cover the needs of a single adult asylum seeker (male or female) that relate to toiletries, household cleaning items and non-prescription medication”*. The Home Office assessment (still current at this time as support rates have not been raised) was that £1 a week was sufficient to cover toiletries for a single able-bodied adult<sup>36</sup> and that £0.92 a week was sufficient to cover household cleaning items.<sup>37</sup> 4 bars of soap were deemed to be sufficient for one year (this works out at just over 0.07 of a bar of soap a week), 4 bottles of washing up liquid (working out at 0.07 of a bottle per week) and 4 bottles of cleaning fluid (working out at 0.07 of a bottle a week). This was never sufficient and is certainly not sufficient at this time.

#### 4.1 Recommendations

- Asylum Matters – alongside others - **is calling for an immediate uplift in asylum support of £20 to match Universal Credit** as well as **structural changes to asylum support rates including reinstating the link with mainstream benefits setting it at 70% of Universal Credit**. This will ensure people seeking asylum can meet their needs both during, and outside of, a public health pandemic

<sup>34</sup> See Annex 7 (Testimony from MD)

<sup>35</sup> Methodology from 2018 can be viewed here:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/673545/Report\\_on\\_review\\_of\\_cash\\_allowance\\_paid\\_to\\_asylum\\_seekers\\_-\\_2017\\_-\\_final..pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/673545/Report_on_review_of_cash_allowance_paid_to_asylum_seekers_-_2017_-_final..pdf)

<sup>36</sup> Assessed to comprise of quantities deemed necessary of toothbrushes, toothpaste, soap, shower gel, shampoo, feminine hygiene items, male shaving items, deodorant.

<sup>37</sup> Assessed to comprise of quantities deemed necessary of bleach, cleaning fluid (Cif or similar), washing up liquid, toilet roll and washing powder

## **5. Measures put in place to protect the safety and wellbeing of people seeking asylum must continue beyond the end of the COVID-19 pandemic period**

On the 27th March, Chris Philp - Parliamentary Under Secretary (Home Office) wrote to Local Authorities stating that people would not be required to leave asylum accommodation at this time. Those that receive a decision on their asylum claim - be that a grant of leave or a refusal - will be able to stay in asylum accommodation and receive asylum support. This temporary provision expires at the end of June 2020.

It is clear that until a vaccine is developed and distributed that COVID-19 will pose a significant risk to public health. The Home Office has a clear role in protecting people's health and putting in place measures that enable people who are subject to immigration control to be able to continue following Government guidelines.

This protection from evictions is a central tenet of keeping people seeking asylum safe during the COVID-19 pandemic and beyond. It is crucial that progressive measures introduced to keep people safe are maintained following lockdown.

### **5.1 Recommendations**

- **The Home Office, in conjunction with other government departments, must commit to a full review of its response to COVID-19**, evaluate the impact of temporary measures put in place, and incorporate this learning into the development of process and policy interventions.
- **Any phased approach to removing temporary measures will need to be jointly decided together with local authorities, devolved nations and third sector partners.** Any changes will need to be carefully considered in order not to place individuals at risk or overwhelm other services.

May 2020

## Refugee Action

*Refugee Action have provided additional evidence on two issues. Annex 1 covers issues which are related to the current problems with accommodation provision and asylum support and are leaving vulnerable people with no support at all. Annex 2 provides further insight on standards in accommodation with quotes from people about their experiences.*

### ANNEX 1: SECTION 4 DISPERSAL

#### *Problems with Section 4 dispersal*

Dispersal is the process by which the Home Office moves destitute asylum seekers to a specified local authority area and accommodation. Throughout the current health crisis, there has been confusion and uncertainty about what is happening with these dispersals, and this is leading to significant problems, particularly for Section 4 clients. This annex will focus on their experiences.

This lack of dispersal is particularly problematic in the case of Section 4 due to the link between accommodation and receipt of subsistence payments. Where people are not placed in HO accommodation, they receive no financial support at all. Where dispersal is not happening people, including those who are vulnerable to infection due to pregnancy or underlying health conditions, are left with no money or accommodation.

Correspondence from the Home Office and its providers to people in the asylum system awaiting dispersal, and organisations working to support them, has been confused and misleading. Many people are facing long delays or not being dispersed at all, and some people who are on Section 4 support are being left without accommodation or financial support.

#### The Home Office position

Correspondence from the Home Office, and some housing providers (Serco) has specified that only people who are street homeless (deemed 'Priority A and B' by the Home Office's prioritisation standards for Section 4) are being housed in the Covid-19 period. The Home Office 'Factsheet' issued on 29<sup>th</sup> April, 2020 states: *'Some asylum seekers live with family and friends, but if circumstances change, approach the Home Office for accommodation and financial support. In light of PHE guidance, we are not requiring providers to move these people into new accommodation, unless the person is street homeless, there are other vulnerability factors or there is a court order requiring us to provide alternative accommodation.'* This echoed guidance that had been issued to British Red Cross on April 3<sup>rd</sup>, 2020.

However, when Refugee Action has raised concerns regarding incorrect prioritisation of S4 cases involving vulnerable people who are in precarious accommodation, often sleeping rough for some nights each week, the Home Office's Section 4 team ([Section4accommodationbookings@homeoffice.gov.uk](mailto:Section4accommodationbookings@homeoffice.gov.uk)) have responded insisting that dispersals are going ahead as normal. This communication has stated that because all applicants for S4 are considered homeless, and so are destitute, they will be dispersed as normal (i.e. including 'Priority C' cases) and therefore there is no need for reprioritisation.

This is leaving extremely vulnerable people who have been judged to be 'Priority C' without financial support or stable accommodation.

#### Our findings

Refugee Action clients eligible for S4 are reporting that guarantees to house people who are facing destitution are not being met. In some examples, people who are sofa surfing and even sleeping in parks or

illegally are not being housed, nor are they receiving subsistence payments as these are tied to the provision of accommodation.

Miscommunication with clients about this process is causing extreme distress to those who are most vulnerable (for example people with PTSD or existing health conditions). Many people awaiting dispersal who are not in Home Office accommodation but would be eligible for S4 have reported only being able to eat once a day, being wholly reliant on food vouchers from charities, and being forced to sleep on floors in communal living areas.

In some of the most shocking examples:

- A mother of a new-born child who was released from hospital with no address is staying with friends and living entirely off food vouchers provided by charities.
- A woman who was heavily pregnant woman reports eating only cereal due to lack of money.
- A person who is staying as an unauthorised guest in NASS accommodation is sleeping on the kitchen floor rather than be street homeless while they await dispersal.
- Many people have told us that although they are able to stay with friends and family for an occasional night, they are often spending several nights a week sleeping in parks.

### Recommendations for urgent actions

The Home Office must provide clear and consistent guidance on S4 dispersals. This guidance must:

- Make clear who is being dispersed (only street homeless people (Priority A and B), or people who are deemed lower priority as well).
- Offer a definition of vulnerability factors that deem someone eligible for accommodation, where they do not fall into Priority A and B (street homeless).
- Make clear the process to gain support for people whose Priority has been classified incorrectly, whose situation has changed since grant, or who are in urgent need, despite not being street homeless (for example pregnant mothers with no financial support).

## **ANNEX 2: ADDITIONAL EVIDENCE ON ACCOMMODATION STANDARDS**

Some of our clients and people we have supported have also shared their experiences of asylum accommodation during COVID-19.

(15 April) One person is in initial accommodation in London. He is in a room that has three beds, two singles and a double, and he says strangers have been told they have to share the double bed. He has underlying health conditions and says it is impossible to self isolate in the property. He says people in the hostel have been taken to hospital with Covid-19 symptoms. He said the food they receive is very poor.

*"Nobody knows each other. They tell you to sleep in the double bed with other.*

*Every three or four days new people come in.*

*I am very scared. You are not in a safe place. Sometimes it is better to go out and much better to stay outside. On the news they say do not go out."*

(15 April) One woman\* was sleeping on a bunk bed in a room with three strangers in initial accommodation in London. She has an underlying health condition, which means she is vulnerable due to a weakened immune system. She said while the people in her room do not change, there were a lot of people coming in and out of the property. People in the property eat their meals together\*\*.

*"I think you have to be cautious; I am not able to isolate; most of my time I am in my room.*

*I am feeling scared; last night there was someone sneezing and there is a lot of tension in the house.*

*You become so scared because you are touching all these things. We do not have any sanitizer.”*

\*since been dispersed into single room accommodation

\*\* Accommodation has now introduced some distancing measures, such as taking food back to rooms.

(April 30) One person seeking asylum helped by Refugee Action said he is living in a hostel in London in which he has no access to soap and toothpaste and told he must share a room with a stranger. He said he was told he had to share with six other strangers when he first arrived at the hostel in March. He has been waiting for dispersal to proper asylum accommodation after being forced to leave his previous house [redact]. He receives hostel accommodation and food, with no money for other necessities.

*“Sometimes we are begging other people for soap and toothpaste,” he said. “When I came here I was sharing a room with six people. I am in a room with one other person now. It’s a small room and the beds are close together.”*

(May 1) One person seeking asylum who has mental health issues is in accommodation in the West Midlands. He must share a room with another person, who is a stranger to him. It’s a small hotel room, and their beds sit one-and-a-half feet apart. He says when he wants water, he must use the tap in the bathroom. He said many new people come and go each day in the hotel, with fears that people could be contagious. He has been in the hotel for almost four months, and he gets a new roommate every one to two weeks. He said the food is poor, and people are served unflavoured rice and pasta for dinner. They each receive two small bars of soap each week for personal hygiene. He said while people can take meals back to their room, the food is served at the same time so everyone must go to the eating area at the same time, and line up at the same time.

*“As long as I am in this place I don’t think I will be able to self isolate because things are so tough here,” he said. “You are totally at risk. People are scared and frustrated. People are suffering.”*

(April 28) One person who has medical problems [redacted] is in initial accommodation in the West Midlands. He stated that the food is bad quality and not very nutritious, which he has reported with other residents, but nothing has changed.

He is fasting during Ramadan and he stated that he contacted the hotel asking if the evening meal can be improved and if they can get milk, and some fruit and vegetables. He was told that they can’t provide these items.

For more information, please contact Maria Stephens, [marias@refugee-action.org.uk](mailto:marias@refugee-action.org.uk).

## **Refugee Women Connect**

### **1. Interaction with Serco and Migrant Help for people experiencing symptoms: (positive and negative experiences)**

We are currently supporting a house of four female service users, one service user has been confirmed as COVID-19 positive meaning the whole house is now in isolation. We contacted Serco to report the case as a safeguarding issue and requested the delivery of food and cleaning products for the house. We received a quick response from the Serco safeguarding team and they arranged for a food delivery the next day through Liverpool City Council. However, on the subject of cleaning products we were told that Serco is currently unable to provide cleaning items due to COSHH regulations, that they are in discussions with Liverpool City Council for them to provide cleaning items, and if this isn't successful Serco will 'look into' providing items instead. We find this response concerning in light of how far into the crisis we are. At week five of lockdown, and considering there was ample warning prior to lockdown, we find it negligent that no policy has been implemented regarding the provision of cleaning items.

Serco fully understand that clients receiving asylum support cannot shop online and therefore do not have the ability to safely obtain cleaning products independently during isolation, this restriction means that they are reliant on others to provide them with essential items. It is reasonable to assume that households who are not connected with third sector organisations are unlikely to be able to obtain cleaning items without leaving their houses. To do this when individuals should be isolating puts the public at further risk and places an unnecessary stress on the individual. During a public health crisis everyone should have access to essential cleaning items to safeguard their household and the public and Serco should have an active role in this.

As a general trend we have noticed that publicly both Serco and Migrant Help are communicating the ways in which they will support clients and stakeholders during this time. Unfortunately on the ground these changes are not in effect and we are facing many obstacles to support our clients. This is increasing the pressure and responsibility on the third sector who have no authority.

### **2. Problems in initial accommodation / hotels**

Dispersals remain an issue during this time. We have raised issues with Migrant Help, the Home Office and Serco regarding clients who have a need to be dispersed during lockdown. Clients have safeguarding or wellbeing needs that mean a dispersal is needed. Although we know some individuals are being dispersed during this time so there is scope for this we have had no success with our clients. Clients are therefore being held in unsuitable accommodation designed for short-term stays for the long-term. This is exacerbating mental health issues and is preventing clients with registering with essential services such as GPs and mental health services. Communication regarding these clients has been very poor with organisations transferring responsibility between each other to the detriment of the client.

### **3. Problems experienced in accommodation where social distancing is difficult / impossible**

Service users we are supporting in a house with a confirmed COVID-19 case have experienced problems isolating. Until the issue was raised by us Serco did not offer information on isolating directly to the clients. Clients were unsure of how to live in the house with a symptomatic housemate and this caused a lot of stress for those involved. It appears that the oversight of another stakeholder is required before action is taken by Serco.

### **4. Difficulties in getting urgent accommodation issues actioned**

Prior to the crisis there were significant difficulties in getting urgent accommodation issues actioned. This has worsened since the crisis began.

The usual escalations channels are fruitless and we have little to no correspondence from Migrant Help when escalating issues in writing. During this time staff have submitted countless Category 1 issues to Migrant Help to no avail. In one case a client was dispersed during lockdown out of our area to accommodation with no heating, hot water or cooker. This was escalated to Migrant Help with no response. These conditions led to a rapid deterioration in the client's mental health so staff raised this with Serco. Workmen have attended the property without wearing protective clothing which has scared the service user. Approximately four weeks later there has been no resolution and the issue remains.

Staff members have experienced issues reporting safeguarding concerns to Migrant Help. We have been informed through circular communications via networks that Migrant Help will work with stakeholders during this time around the issue of signed consent which is difficult to currently obtain for new service users. In one case a staff member attempted to report an urgent safeguarding issue to Migrant Help without signed consent. She was attempting to deliver information and did not require any information regarding the client to be shared by Migrant Help. Migrant Help staff member refused to record the safeguarding concern and ending the call by hanging up on our staff member. Our staff member was then forced to approach Serco directly to report the concern as it was concerned with the physical safety of our client thus circumventing the official process and the AIRE contract provisions.

#### **5. Difficulties in accessing food, cleaning products and phone data, and the consequences this may have had for people**

We have been coordinating food packages for our clients through local food banks and community organisations. We have not had any support from Serco, the Home Office or Migrant Help in this matter. Clients have been able to access food throughout the lockdown but only by communicating outside of the asylum process.

Many women have noted the difficulties in accessing culturally sensitive foods during lockdown. Mainstream food banks, whilst performing essential and valuable work, are not often equipped to provide halal foods or foods for BME communities. Women have explained that whilst they are grateful for the packages they receive they often do not know how to cook with the provided items. Accessing such foods in shops often requires significant travel as stockists are limited and local shops have increased their prices making them less accessible. Mosques and local support organisations are filling this gap but access remains limited and requires knowledge of existing support organisations.

Women are having to choose between food and cleaning supplies. One service user has stated she has reduced the amount of food she is buying for her family because she needs to buy extra cleaning products to clean the communal areas of her apartment building. We are providing cleaning supplies as best we can to service users. Again, we have not had any support from Serco, the Home Office or Migrant Help in this matter.

Phone data and low income remains an issue for clients as it prior to the lockdown. This issue has now been exacerbated in many ways. Clients who were previously able to walk to drop ins and access support no longer have this option. Many support groups have moved online to virtual groups or video calls. Data is expensive and this means some individuals are prevented from accessing this support. In particular families are struggling to buy data for their children to use to access online learning resources. Many schools have no provision for providing education in paper form which means kids are missing out. This is a significant stress factor for the mums who we are supporting. We are supporting service users as best we can to top phones up and are redirecting project costs from bus passes and room hire to phone credit/data.

We welcome the governments statement that laptops and internet access will be made available to children in need. We are however concerned about the time this is taking to implement and the extent to which this will be made available to our client group. We would welcome any further information or details on this.

#### **6. Where people are accessing help and support from at this time.**

People are overwhelmingly accessing help and support from third sector and community organisations. Communities have stepped up and are catering to the needs of local people.

We have established and continue to organise ‘local coordination meetings’ consisting of around 30 professionals working in the sector to ensure effective information sharing and a high quality of support for our clients. Referrals into our services have increased as a result and we are able to effectively signpost to other services.

We have also found local councillors to be very helpful and active during this time. They continue to play a significant role in local provision and have

We have struggled to get any of our service users any effective support from Home Office-contracted during this time.

## **Annex 4**

### **Displaced People in Action (DPIA)**



**Call for evidence: asylum accommodation and COVID-19**

This week I held two meetings (29/04/2020 & 01/05/2020) with our DPIA volunteers who are from asylum seeking and refugee backgrounds (they speak at our advocacy forums and awareness raising training). Here are their comments on some of the issues evidence has been requested on.

One volunteer is an Asylum Seeker in [location C] and found it hard to access adequate food for himself and family. He said that the only shops locally that he was able to access were little independent stores. These shops had increased their prices to a level that he could not afford on asylum support. He had looked into receiving food parcels, but the nearest available place he could find was the [library, located away from location C]. This was a long walk from his home, and he wasn't comfortable travelling that distance under the current situation. Similarly, [Location D's] food provision is the opposite side of [the city where locations C and D are] so impractical to reach. All the offers of delivery were for those who are self-isolating and not leaving their home, so he felt that there was no option that could help feed himself and his family.

Three volunteers reported having had difficulties accessing laptops or digital equipment for their children to access online classes. One had applied for a laptop from the government, but has not received any further information yet so is sceptical about receiving this.

One volunteer from [location E] said that one asylum seeking woman with a child she knew was sharing a house with others. As such they were worried about social distancing with the other housemates who will go out and have contact with other people. They are continually worried that they will contract Covid-19 from these housemates.

This volunteer also said that many single asylum seeking women she knew were worried about leaving the house. This was as they were hesitant to bring their children with them and put them at risk of contracting Covid-19, but did not want to be neglectful and leave them at home alone. She said many found it hard even to go out for essentials and exercise for this reason. Some women were saying that they could not go out to access the free food they needed because of this.

Section 4 individuals were also having problems accessing food because of not being able to withdraw cash from their card. This meant that they could not give money to volunteers or friends to collect food for them if they were self-isolating. They had to leave the house to buy themselves essentials as they could not give the card and pin number to someone else. This was also an issue as the card could only be used at certain shops and could not be used for online food deliveries.

## Annex 5

### The Birth Partner Project

THE  
BIRTH PARTNER  
PROJECT

**Context:** The Birth Partner Project supports pregnant and postnatal women seeking asylum in Cardiff who would otherwise be alone.

### Reflections from volunteers on interactions with pregnant women and new mums living in asylum accommodation during Covid-19

Most women we support are in dispersal accommodation. Common problems for IA and dispersal accommodation are:

1. **No WiFi and (often) no smart phone** (or TV licence and TV), no radio. At a time when usual access to information and WiFi through support centres, library, meeting friends, etc. are unavailable. No attempt to provide creative ways of ensuring residents have access to news or entertainment.
  - Lack of smart phone and data creates particular problems for pregnant women and new mums who are going through a particularly stressful and anxious time on their own. For our project to provide effective remote support we need to be able to video chat and send links to videos and other information on childbirth, breastfeeding, and infant care etc.
2. Lack of communication from ClearSprings. Many of the women we are in contact with first learnt of the risk of C19 and ways to lessen risk from our volunteers. Continued not to get communication about it from other sources for at least a couple of weeks after lockdown started. Eventually fliers were put through the letter box in some properties. No attempt was made for these to be language appropriate. Reports were that they made no difference - non English-speaking residents could not understand the fliers. Because lack of access to wider news sources some people in shared accommodation remained ignorant.

### Response to questions in the email

- Problems in initial accommodation / hotels
  - Arrived when [redact] pregnant and accommodated in a self-contained accommodation to self-isolate due to recent journey, except not provided with meal deliveries or full understanding so she still went shopping. Was told the accommodation as temporary since it wasn't appropriate for pregnant woman/new baby. Still in this accommodation and due date now passed/expecting birth any day now.
  - Boiler problems for weeks, no or erratic hot water and heating. Someone eventually came to investigate but couldn't fix it. Bathing by washing using boiled water in the baby bath. Currently semi-fixed but still not working consistently.
  - Didn't want to cook due to how unclean the place was. Had to clean the place thoroughly by herself.
- Problems experienced in accommodation where social distancing is difficult / impossible
  - No advice or enforcement about visitors outside of the household not being allowed to visit. This puts considerable stress on women who have young children and witness multiple comings and goings at all times of day and night, often noisy and disruptive as well as a high risk of infection.
  - No advice or assistance on cleanliness of shared areas. Observing high stress levels in some women as they desperately try to compensate for other people's poor cleanliness.
  - Cleaning supplies not provided in dispersal accommodation and with personal budgets increasingly stretched during this time, our project is supporting cleaning supplies.
- Difficulties in getting urgent accommodation issues actioned

- See above re: hot water
- Property maintenance and provision of essential domestic equipment continues to be patchy. Not just Covid-19 related but the consequences are heightened at this time when there is more pressure in shared accommodation. E.g. broken toilets means more people sharing the remaining toilet. Also lack of fridge space is very difficult when the advice is to only go out shopping once a week and there is nowhere to store fresh produce. In one property there was only one medium size fridge for 6 adult residents, and 3 children.
- Previous residents keeping keys to the property and returning to cook (this has now stopped thankfully), pick up items they left there in storage, coming to collect mail and not observing social distancing on entry.
- Difficulties in accessing food, cleaning products and phone data, and the consequences this may have had for people
  - See above re: lack of cleaning supplies and fridge space. Small weekly budget means women tend to shop small and often, increasing risk of contact.
- Where people are accessing help and support at this time.
  - No attempt to provide for the basic needs of higher risk people who are shielding. This means some people with underlying health conditions are taking the risk of going out shopping as they have no other choice.
  - Referrals to food delivery charities seems to be inconsistent, and relies on other agencies like us rather than Home Office agents taking any responsibility. Where referrals have been made, deliveries are appreciated e.g. Oasis. Although (understandably) these are limited in scope of food type/flavour so women still go to shop sometimes because they want to eat something of their own choice.

Not unique to C19 - zero effort is made by ClearSprings to educate and support residents in their accommodation about waste and recycling. Very unsanitary practices are regularly observed. This is hazardous at any time but the risk at this time is very high. For example at one property recently dirty nappies in food waste bags are placed daily in the front garden or pavement. These pile up, the bags get torn open etc. Same for food waste. The resident says no attempt is made by the housing agency to provide disposal facilities for nappies or educate residents about how waste should be presented for collection once a week etc. We know that the guidance on waste collection is sometimes stuck on a board in the property (in English only) and advice is probably given at move in, but it requires more consistent advice and guidance, especially where problems are observed.

## Annex 6

### Freedom from Torture



## Introduction

This document outlines a number of asylum accommodation issues that clients of Freedom from Torture (FfT) are facing, that either pre-date Covid -19 but have continued to be an issue, or which have occurred as a result of the Covid-19 pandemic. We share below some case studies of live accommodation issue which provide further detail of issues that specific individuals are facing at this time.

### Accommodation issues that pre-date the Covid-19 pandemic

Prior to the onset of the Covid-19 crisis, a number of FfT clients were significantly impacted by issues related to their asylum support accommodation. On a weekly basis, we have seen multiple problems relating to accommodation, which have caused considerable distress to our clients, who are torture survivors and therefore often very vulnerable. These issues include:

- **Provisions in accommodation** – clients being dispersed to accommodation where basic amenities which should come as standard e.g. pots and pans, bed frames etc, are not provided
- **Location of accommodation** – clients being dispersed out of area so that they are unable to continue to access their treatment at Freedom from Torture. For example, one client accessing therapy and treatment at our London centre was dispersed to Plymouth
- **Dispersal to shared room accommodation** despite the current Home Office policy being clear that as torture survivors, FfT clients should not be placed in shared rooms. This has caused our clients considerable distress and, in some cases, re-traumatisation
- **Significant delays in granting support** – some of our clients have had to wait many weeks and in some cases even months after submitting an application before support is granted
- **Significant delays in allocating accommodation after support is granted** – the longest delay we have had in this instance was almost five months. They were only granted accommodation after they took legal action, when it transpired that the Home Office did not have properties within London travel zones 1-6 and the best that they could do was provide accommodation in Hemel Hempstead. This meant that the client had to miss out on the last few weeks of an English literature course with Birkbeck University as he was unable to travel to attend the course.
- **Suitability of accommodation** – clients routinely placed in accommodation which is unsuitable on the basis of both physical and mental health. For example, one of our clients with mobility issues was given a room on the first floor despite us notifying the Home Office of his needs on multiple occasions, and receiving reassurances that the accommodation provided would be suitable for his needs. Another, severely traumatised client, was given a box room where the bed touched the wall on 3 sides; this triggered memories of the torture experienced as he was kept in a small space when held captive.
- **Safeguarding issues** – We have had a number of incidents where clients have been threatened and even physical assaulted by other residents. We have followed through the appropriate channels including the Home Office and accommodation provider safeguarding hubs but the response has often been slow and inadequate. Relocation has not happened, nor has the perpetrator been dealt with in a timely way. For example, we had one client who was headbutted by another tenant and then threatened with a knife. Although the Home Office were more responsive, the response from Clearsprings was woefully inadequate and it was very difficult to access the safeguarding processes within Clearsprings.

The extent of the issues experienced by Freedom from Torture clients in relation to their asylum support accommodation is significant. In the majority of these cases, clients were required to seek legal advice in order for the issue to be dealt with properly.

### Since the onset of the Covid-19 pandemic, we continue to see these problems on a regular basis:

- Some of the issues that we were dealing with previously including shared rooms, safeguarding concerns and unsuitable accommodation have rolled over into the crisis and many individual cases have still not been resolved. **The additional difficulty that we now face is that, because of the Covid crisis, the accommodation provider and the Home Office claim that they are unable to take certain actions in response, that ordinarily they would have been able to.**

For example: one of our clients has been experiencing problems with bedbugs in his property; the client reported that there are bed bugs throughout the house, both in their bedroom and the living room. The accommodation provider (Clearspings) refused to deal with the problem on account of the Covid situation; they only agreed once Migrant Help became involved and told them that it had to be dealt with it was a health and safety issue. The same client also been left with a broken bed and window. Clearspings stated that because of the Covid situation, they would not deal with any repairs unless there is a health and safety risk.

- The Home Office has informed us in policy fora that in the current situation, two adults who are not related should not be placed in the same room in accordance with the advice from PHE re hostel accommodation. **However, we have a number of instances where our clients have been recently placed in shared room accommodation, sometimes with as many as four other people.**
- When requesting relocation for our clients, including those in shared rooms, **the Home Office has said that they will not undertake any relocations due to Covid.** Where solicitors have been involved, this has been the response to the pre-action letters, meaning that the case has to proceed to judicial review.

### Further examples of ongoing asylum accommodation issues

#### 1. Delays in accommodating and poor quality accommodation

**Case 1:** An Appeals Rights Exhausted single client that left their hosting accommodation due to the vulnerability of household members. Our client was then sofa-surfing between friends' asylum accommodation. They applied for homeless support through the council who refused as they felt the individual had made themselves intentionally homeless. We challenged this through a pre-action protocol letter from a welfare solicitor and the council did not respond. We then applied for section 4 support for the client and this was granted. **It took almost 3 weeks for the client to be accommodated, however, and we had to involve the solicitor again to get the case progressed.** The individual is now housed but accommodation **standards are poor and the accommodation is dirty** and we will report these to Migrant Help this week.

#### 2. Lack of suitable accommodation to meet individual's needs

**Case 2:** The Home Office granted a relocation request based on the medical needs of this family after they moved the family too far away from the children's school in November 2019 following transition between JOMAST and MEARS. **Relocation has still not occurred and Covid has been cited as the reason.**

**Case 3:** A Client on section 4 support who had been in initial accommodation in Croydon for weeks was moved to a hotel outside of zones 1-6, so not within an hour's travelling distance of rehabilitation services as the asylum accommodation policy states should be the case.

#### 3. Safeguarding concerns

**Case 4:** An individual was attacked by their flatmate in asylum accommodation, the police gave a warning to the attacker. The Individual and their young child continued to be harassed by this individual and reported this to their housing manager. **The housing manager has requested that one of the flatmates is relocated but said this will not happen during the pandemic.** Freedom from Torture has raised concern about this to the housing provider in the middle of April and still has not heard back.

**Case 5:** An age disputed young person was placed in a shared room in Initial Accommodation before the pandemic. Three separate requests for a single room were made but the issue was not resolved. Following legal action (a pre-action protocol letter was sent), accommodation was found for the client in Plymouth, but was cancelled as it was unsuitable due to being out of zones 1-6, so over an hour's travel from rehabilitation services. The client said they would kill themselves and on the same afternoon another resident threatened to kill the client. **This was almost 2 weeks ago and the client still remains in a shared room in initial accommodation, despite safeguarding needs being notified.**

## Annex 7

## Personal testimony

### The Pros And cons I am facing as an asylum seeker in the UK

BY [redacted] - Refugee Week leader UK,2020

1. Living on £37 /week is now almost impossible. Giving that thought that we are from different culture and we consume different type of food. The lack of government regulations or proper measures they normal price of the food items has gone around 20% high now. So, we depend on the food aid.

Solution: The basic weekly payment for asylum seekers should be made £75 a week.

2. Lack of basic hygienic product is another big issue in Covid-19 now. I have emailed 3 weeks ago to the Mears group asking for some basic hygienic equipment such as mop, bin bags and some hand soap. No reply. Living in £5 a day no one in the house wants to but basic hygienic products and that is putting us more vulnerable position during covid-19. Mears group does not provide any hover in housings for asylum seeekrs. I live in a carpet house. How I am suppose to clean it ?

Solution: Monthly dispersal of Hygienic products must be introduced. It must be include- A hover for every housing ( not monthly), Bleach, Bin bags, Mop head and mop, hand wash/soap.

3. The house I live in there is no Bin outside of the house last 6 months. We have complained it to Mears group couple of times last 2 months period. Nothing has been done. So I have to literally drop the bin in midnight while everyone sleep hiding. Which put us in more vulnerable situation giving that fact in mind if someone sees me I am using their bin which they pay to council there can be a big fight. We have contracted the council and the answer was ask your housing provider to get back to us.

4. The Provision of providing WIFI is urgent to the housing at the moment to acces basic information and to get update and keep us occupied to stay at home. The very basic information of Covid 19 was been provided to me in English just one and half week ago by MEARS. Where it is clear that there not really good information and because of this other language resident really did not care about it. They provided other translated version of it but no where it says you should not be bringing your friends in the house. In my house its happening in everyday basis and I am really concern about my health and wellbeing.

5. There was no visit made to my housing to check the situation since December. The fridge they have provided is the very smaller in size for 4 persons. You can barely put one chicken in the fridge and sharing that with 4 people is impossible. The quality of the fridge and electrical equipment is very very bad. The washing machine was been provided was the previous model of the old one we had 2 years ago of the same cheap brand. This electrical equipment are risky as well.

I hope and wish these problems will be addressed in the meeting and for any future enquiry please get back to me. I will be available with evidences if needed. Please reference me if you quote the problems from here. I give consent to put my name forward to these problems if addressed.