

Written evidence from Amnesty International UK and Migrant Voice (COV0104)

Amnesty International UK is a national section of a global movement of over seven million people who campaign for every person to enjoy all rights enshrined in the Universal Declaration of Human Rights and other international human rights standards. We represent more than 670,000 supporters in the United Kingdom. We are independent of any government, political ideology, economic interest or religion.

Migrant Voice is a national, migrant-led organisation working with migrants regardless of their status and country of origin, including refugees and asylum seekers. We develop their skills and confidence, empowering them to speak for themselves about their own lives and issues that affect their communities. Whether speaking out in the media or on public or political platforms, the aim is to create positive change for migrants – countering xenophobia, discrimination and unjust policies, strengthening communities, and bringing social justice – change which benefits the whole of UK society.

1. Since we provided our joint submission in April to the Committee's inquiry, the Government published, on 11 May 2020, its COVID-19 recovery strategy: *Our Plan to Rebuild*, May 2020, CP 239.¹
2. This short supplementary submission is provided in light of the new strategy. We are mindful of the volume of material the Committee has already received and we have opted not to provide a more detailed update of policy and operations at the Home Office or the impact upon people subject to immigration control. The purpose of this supplementary submission is to briefly explain the continuing and increased relevance of our first submission having regard to the Government's strategy and the assumptions it sets out. We additionally draw upon the analysis of the Government's pandemic response by the Independent Scientific Advisory Group for Emergencies, published on 12 May 2020: *COVID-19: what are the options for the UK? Recommendations for government based on an open and transparent examination of the scientific evidence*.²

Government's COVID-19 recovery strategy

3. The strategy confirms the Government's expectation that coronavirus and the need to monitor and contain it will remain a current concern for the foreseeable future and possibly far beyond.³ The virus is unlikely to be eradicated in the UK or globally.⁴ A 'reliable treatment' for it may not be available for some time.⁵ In the meantime – and it cannot be known how long that may be – capacity to monitor and respond quickly

¹ The Government's recovery strategy is available here: <https://www.gov.uk/government/publications/our-plan-to-rebuild-the-uk-governments-covid-19-recovery-strategy>

² The Independent Scientific Advisory Group for Emergencies (ISAGE) analysis is available here: <https://drive.google.com/file/d/1MD4-8z-yy-IO5ZsfmXAxTUo79iFk1zfy/view>

³ The Government's recovery strategy, *op cit*, e.g. item 6 of the 'challenges ahead' (at page 13) and the section on 'Accurate disease monitoring and reactive measures' (at page 37)

⁴ *Ibid*, page 23

⁵ *Ibid*, page 23

to infectious outbreak will be critical,⁶ as will measures to reduce infection.⁷ The Government has changed some of its public messaging and has begun some limited relaxation of its position and advice concerning returning to work. Nonetheless, it continues to advise people to stay home where possible, practice social distancing, avoid public transport where possible and self-isolate where there is any indication of infection.⁸

4. Consideration of immigration policy and practice is largely absent from the strategy. The only such consideration that is included concerns limited operational concerns at the border – specifically, providing information on social distancing to arrivals, requiring them to self-isolate for fourteen days and to give contact information so they may be traced.⁹ There is no further consideration of the impact of the pandemic and the response to it upon people in the UK subject to immigration control; or the impact of immigration policy and practice upon people’s capacity to adhere to the advice and requirements designed to ensure an effective pandemic response.

Independent Scientific Advisory Group for Emergencies analysis

5. The analysis includes several recommendations for Government. We draw attention to the following matters that are of particular significance:
 - a Capacity to monitor and respond quickly to infectious outbreak and people’s capacity and willingness to adhere to guidance and measures necessary to monitor and contain the infection will be critical.¹⁰ (As a general assessment, this accords with the Government’s analysis.)
 - b There is limited but nonetheless specific identification of the importance of matters of immigration policy and practice. Immigration detention¹¹ and no recourse to public funds conditions on limited leave¹² are expressly cause for particular concern.
 - c There are further concerns with clear relation to immigration policy and practice even though their relation is not expressly identified and is not all to which the concerns relate. Thus, reference is made to each of racial and socio-economic inequalities,¹³ overcrowded accommodation,¹⁴ unsafe working environments¹⁵ and engagement and trust of communities.¹⁶

⁶ *Ibid*, e.g. the section on ‘reactive measures’ (at page 23) and on ‘Accurate disease monitoring and reactive measures’ (at page 37)

⁷ The emphasis on the R rate or number reflects this as does, e.g., the summary of what are termed phases 2 and 3 at page 20, *ibid*

⁸ On the same day as publishing its recovery strategy, the Government published guidance, *Staying alert and safe (social distancing)*, which includes: “*It is still very important that people stay home unless necessary to go out for specific reasons set out in law.*” Also on that day, the Government published guidance, *Staying safe outside your home*, which includes: “*To reduce demand on the public transport network, you should walk or cycle wherever possible.*”

⁹ *Ibid*, section on ‘International travel’ (at page 29)

¹⁰ The ISAGE analysis, *op cit*, e.g. recommendation 2 on page 5; and recommendation 10 on page 6

¹¹ *Ibid*, e.g. recommendation 6 on page 6

¹² *Ibid*, section on ‘No Recourse to Public Funds’ on page 26

¹³ *Ibid*, e.g. recommendation 13 on page 6; and see page 24

¹⁴ *Ibid*, e.g. recommendation 6 on page 6

¹⁵ *Ibid*, e.g. recommendation 7 on page 6

Conclusions

6. We draw the following conclusions in relation to our April submission to the Committee on the human rights implications of COVID-19 and the Government's response:
 - a Generally, the concerns we there expressed are confirmed. The increased significance of capacity to monitor and the importance of people adhering to measures to achieve that, in particular, strengthen our concerns. That such capacity and adherence is likely to prove necessary for an extended and indefinite period of time further exacerbates them.
 - b Whereas the membership of the Independent Scientific Advisory Group for Emergencies does not indicate a particular expertise in relation to immigration policy and practice, it is significant that this group both specifically identifies discrete aspects of that and highlights several general matters of manifest relation to that. There are several ways – including the social exclusion and deprivation to which the immigration system subjects people, the widespread deterrence it imposes against engagement with a range of public authorities (including the NHS, police and social services) and the exercise of detention powers – by which this area of policy and practice undermines people's capacity to keep themselves and their family safe and this in turn profoundly undermines the Government's strategy and response, and individual and public health.
 - c There remains a general failure on the part of the Government to appraise, still less do so comprehensively, the important relation between immigration policy and practice and any effective pandemic response. It is urgent that this changes. The opportunity to subject this failure to parliamentary scrutiny provided by the Immigration and Social Security Co-ordination (EU Withdrawal) Bill must be taken. In this regard, we note that the Bill's true immigration-related scope, having regard to its contents, extends far beyond the mere ending of EU retained rights. The Bill includes power to make regulations affecting people who have never exercised those rights, nor ever could.¹⁷
 - d As we emphasised in our April submission, the several ways by which the immigration system does individual and social harm are not new. They are highlighted and exacerbated by the pandemic. The impact, including in human rights terms, of the pandemic appears set to continue for at least the foreseeable future. However, even beyond that time, whenever that may be, it is necessary to reflect on the weaknesses that have been exposed by this virus. That is necessary to correct pre-existing and current injustices and human

¹⁶ *Ibid*, e.g. recommendation 10 on page 6

¹⁷ Further explanation as to the true and wide scope of this Bill is addressed in Amnesty's written evidence to the Public Bill Committee that gave scrutiny to a Bill of the same title and with contents all but exactly the same as this Bill presented in the previous (2017-19) Parliament, particularly at paragraphs 5-19. That evidence is available here: <https://publications.parliament.uk/pa/cm201719/cmpublic/Immigration/memo/ISSB25.pdf>

rights harms. It is also necessary to protect against these weaknesses being similarly exposed in the future.

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