



Role and future of asylum seeker primary health provision

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**Issues
facing asylum
seekers**

Practical issues

Legal Support
Housing
Health
Financial Support
Language
Education
Transport
Spiritual Care
Social Activity &
Exercise

Emotional issues

Bereavement
Cultural alienation
Isolation
Feelings of loss
Confusion
Fear of removal
Anxiety
Mistrust

Physical issues

Injuries of war
Consequences of Torture
Diet and nutritional issues
Infectious diseases
Repercussions of Sexual
abuse and rape
Female Genital Mutilation

Mental Health issues

Anxiety
Depression
Suicidal thoughts and actions
Survivors guilt
Post traumatic stress –
flashbacks and nightmares

These can occur some time after
arrival in refugees and
other migrants



**Asylum Seeker
Entitlement to Care**

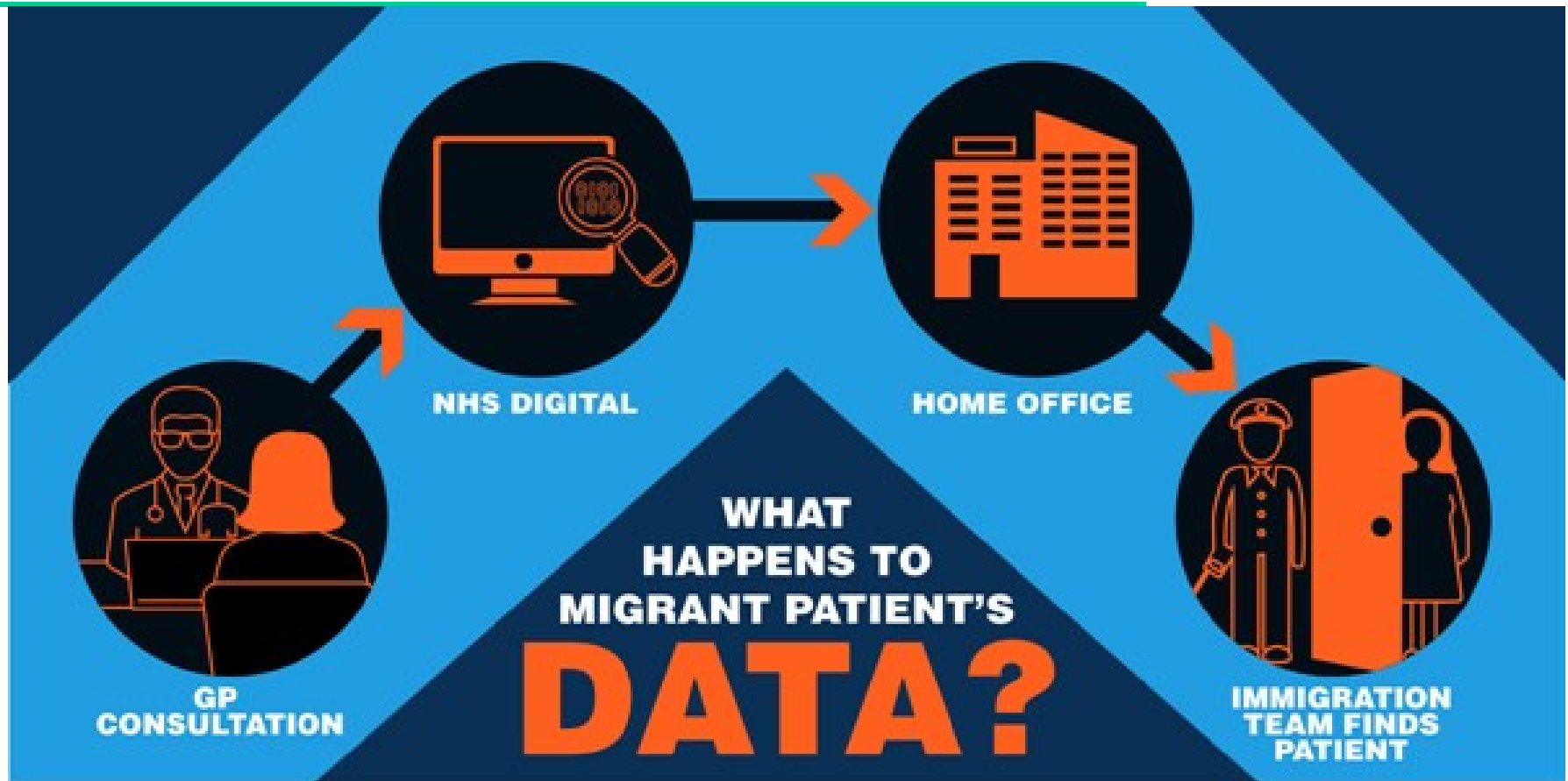
Primary Care

All people seeking asylum have the right to apply to be fully registered with an NHS general practice.

GPs cannot refuse to register an individual due to the patient's residency status.

Primary Healthcare is a **crucial gateway** for the health and wellbeing of people seeking asylum.

Suspicion about registering



Home Office can now access migrants NHS data to track down undocumented migrants, overstayers and failed asylum seekers

Why are we concerned about access?

People seeking safety in the UK can have very complex health problems due to upheaval, family separation and trauma. Yet...

73% of patients seen by Doctors of the World in London were not registered with a GP **even though they were eligible.**

21% of their patients had been **denied access to healthcare in the last 12 months.**

The psychological health of refugees and people seeking asylum currently worsens on contact with the UK asylum system.”

Royal College of Psychiatrists

Barriers to Healthcare

- Difficulties registering with GPs
- Unwelcoming atmospheres in GP surgery
- Obstructive receptionists/administrative staff
- Fears of being reported to the authorities
- Fear of being charged for care
- Unfamiliarity with the structure of healthcare provision
- General difficulties in the asylum process

Impact on Health and Wellbeing

- Increased presentation at Accident and Emergency
- Lack of engagement in maternity services (as GPs are primary referral route) and late disclosure of FGM
- Less diagnosis of both communicable and preventable conditions
- Further barriers to accessing mental health support

Stockton 2002

- 1,000 asylum seekers per year
- Stockton Population 220,000
- GP Lists closed
- Allocations to practices
- Patients complaining about overrunning appointments
- Extended appointments offered to asylum seekers in some practices limiting appointment numbers for everyone
- Practices expressing lack of expertise

Potential solutions

- Extension to PMS contracts for one/all PMS practices
- Expansion of Community teams to support patients across all practices
- Development of specialist practice

Arrival

- Started in 2003 to serve 500 asylum seeking patients
- 1 doctor
- 1 nurse
- Receptionist
- Part-time manager
- Patients to be assessed, care started and then moved into mainstream General Practice
- (also Community Nurse, Health Visitor, Asylum support team)

Practice Ethos

- A supportive safe place to talk about thoughts and feelings
- Confidentiality assured
- Removal of barriers – a can do philosophy
- A Place patients want to come to
- Engage where possible – patients want to talk
- Helpful – wellbeing is more than simply health

Particular issues

- Patients lack of information and guidance on how the NHS works.
- Length of multi-lingual consultations
- Need for access to and effective use of interpreters for all services
- High turnover of clients
- Links between poverty and ill-health
- The impact of social exclusion on patient resilience

Physical And Emotional Needs

- Physical problems
- Emotional problems
 - Bereavement
 - Isolation
 - Feelings of loss
 - Confusion
 - Fear of removal
 - Mistrust

Specialised Health Issues

- Infectious Diseases e.g. HIV, TB
- Immunisations
- Torture/violence
- Rape
- Bereavement
- Female Genital Mutilation

Mental Health

Very significant problem, especially for asylum seekers, some of whom have experienced torture. –

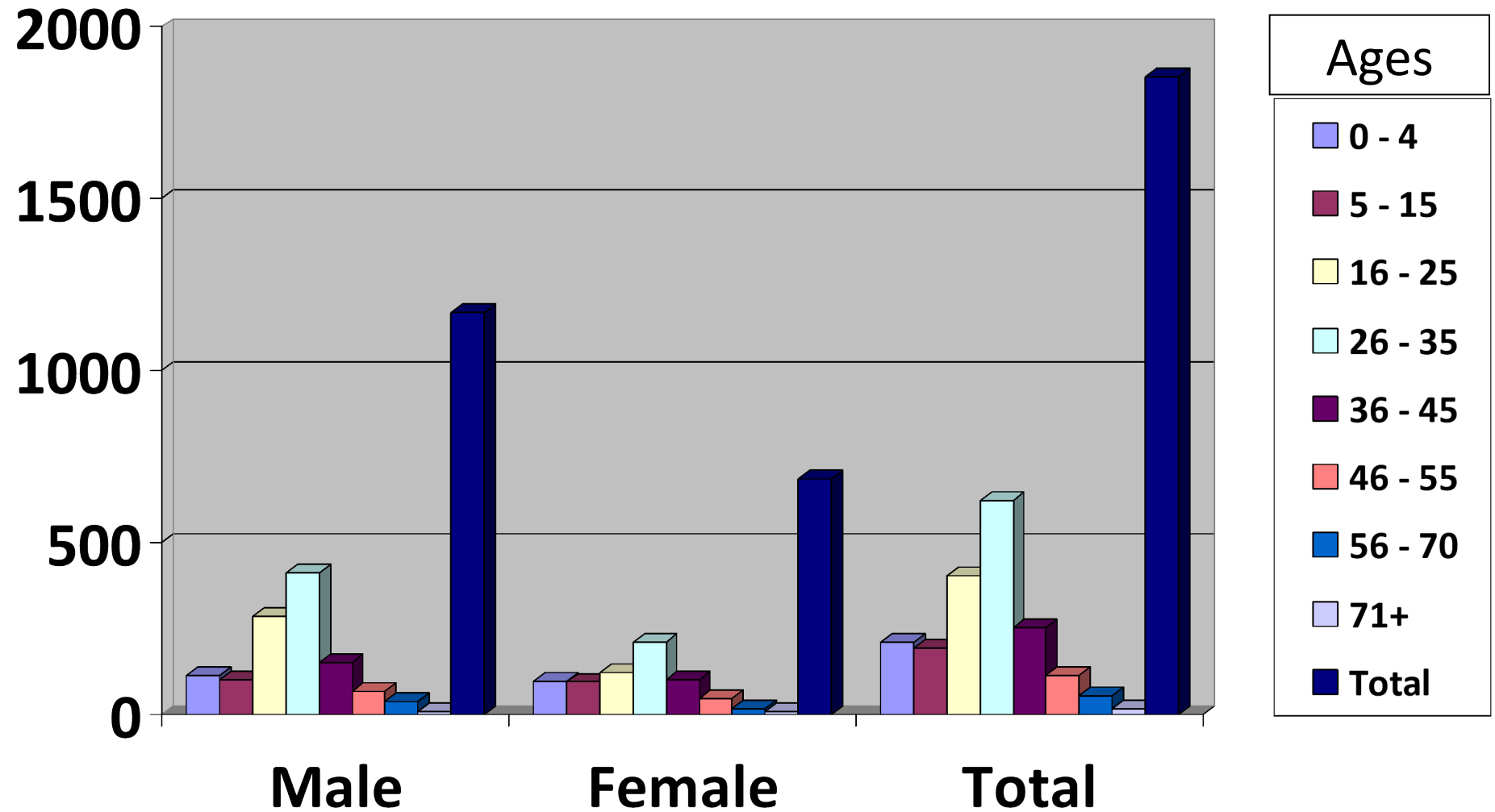
- Anxiety
- Depression
- Suicidal thoughts and actions
- Survivors guilt
- Post traumatic stress – flashbacks and nightmares

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Compounding issues

- Negative decisions on asylum applications & lengthy process
- Ongoing threat of detention & deportation
- Frequent re-housing, poverty
- Separation from missing family members
- Lack of support network
- Poor accommodation
- Low esteem/ loss of status
- Lack of activity/ employment

Arrival Registered Patients 3/5/2017



Additional Services

- Counsellors (Alliance and Insight)
- Mental Health Gateway worker
- Care Co-ordinator
- Respiratory Nurses
- NERS
- Red Cross (soon)
- Medical Foundation (soon)

- ***“The miserable have no other medicine, but only hope” William Shakespeare, Measure for Measure III.1.2-3***
- Claudio’s words from *Measure for Measure* are echoed by Dr. Pat Bracken, consultant psychiatrist with many years of working with refugees, when he says that:
- ***“Trust, hope and a purpose in life are the best antidepressants” (Bracken 2004)***

The overarching aim of working with refugees and migrants should be to empower people so that they are able to rebuild shattered lives and shattered communities, reversing the disempowerment caused by forced exile, and building on their innate resilience and resourcefulness.

Consequences of omission

- Waste of talent / Working below potential
 - Unemployability / Black economy / Destitution
- Vulnerability
 - Exploitation / Radicalisation?
- Social costs
 - Social exclusion / Creation of an underclass / Red door safety
- Health costs
 - Physical, Mental and emotional / present and future

Suggested inclusion mechanisms

- Induction / Orientation – Living in the UK, what is expected of them and what to expect
- Skills training for life in the UK – money/shopping/diet/cooking/laundry
- Language learning opportunities
- Befriending/buddying/signposting
- Social opportunities
- Volunteering opportunities
- Education opportunities
- Exercise opportunities