

The Health Experiences of Asylum Seekers and Refugees in Wales

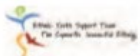


Technical Report of the HEAR Study
March 2019

Swansea University Medical School
Ysgol Ffddiysgaeth Prifysgol Abertawe



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The Health Experiences of Asylum Seekers and Refugees in Wales (HEAR)

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for the HEAR team

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Background

Sanctuary in Wales

- Long history of welcome in Wales for those fleeing persecution/war.
- Asylum seekers have been dispersed to Wales from other parts of the UK since 2001.
- International conflict and human rights abuse has contributed to the rise in people seeking sanctuary throughout Europe.
- Concern that some of those seeking sanctuary have unmet health needs and experience difficulty in accessing services.



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About the Study

Aims

- To investigate health, well-being & healthcare experiences of adult sanctuary seekers in Wales, including views of recipients & providers.
- To establish what helped or hindered healthcare access & experiences of sanctuary seekers.



**“If you don’t know what the problem is, you can’t solve it”
(quote from study)**



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Collaborative Working

Peer researchers and third sector partners



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Methods

Mixed methods study

- Searched for published evidence about factors influencing use of healthcare by sanctuary seekers in high income countries.
- Recruited & trained team of 8 volunteer sanctuary seekers to survey 210 sanctuary seekers.
- Conducted 8 focus groups across Wales with 57 sanctuary seekers and their supporters.
- Interviewed 32 health professionals & support workers delivering care to these patients.



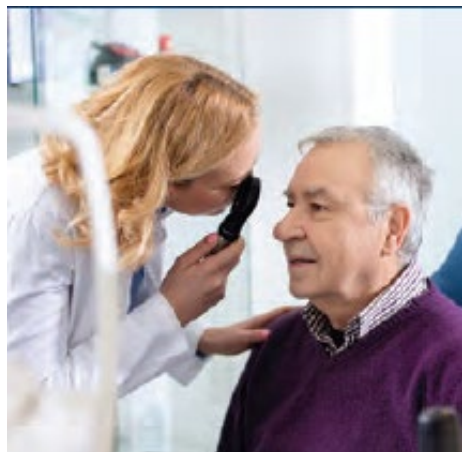
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“The service is very good and actually they are really thorough in the care that they provide...”

Person seeking sanctuary



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Findings

Evidence Review

We identified 5 themes which help or hinder sanctuary seekers in accessing healthcare. Many experience difficulty in accessing services.

- Language and communication;
- Cultural understanding and values;
- Presence or absence of trusted relationships;
- Structural barriers, such as out-of-pocket expenses; and
- Knowledge of the health system and how to navigate it.

Stigma of disclosing mental & physical health problems, and fear of adverse effects on their immigration status, deters some sanctuary seekers from accessing care.

[through an Interpreter] “If I had an emergency I couldn’t call 999, how would I speak to them, they wouldn’t understand me in Arabic.”

Findings

Cross-sectional Survey

- 23% of respondents did not know how to access an emergency ambulance.
- Reassuringly 94% reported that they were currently registered with a GP.
- But only 36% found appointments easy to make, and only 26% knew how to access out of hours GP.
- Of those that had used services 66% had used any service in hours and 28% out of hours.
- NHS 111 was familiar to 36%.
- Fewer than half of respondents (44%) knew of the Emergency Department.



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Findings

Focus Group

- Respondents understood role of primary care in providing and coordinating care; and accepted that they themselves also had responsibility for maintaining their health.
- Reported barriers included: language difficulties including lack of interpreters; fear of being reported; unrecognised needs; perceived stigma and discrimination; out-of-pocket expenses, especially for travelling to appointments.
- Importance of mental health noted but also the poor provision of mental healthcare.



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Findings

Interviews



- Mainstream health professionals lacked resources to care for these groups, notably staff time, knowledge of healthcare in countries of origin, lack of knowledge of the asylum process and information in appropriate languages.
- Health professionals recognised that these groups often needed repeated contacts to receive appropriate healthcare.
- It was suggested that pressures on NHS, lack of services tailored to sanctuary seekers, & their isolation contribute to poor mental and physical health outcomes.

“They bring their trauma with them, that that usually manifests itself as PTSD symptoms, mild, moderate and severe. *Health Professional*



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Recommendations arising from this research

We could improve integration, health and well-being of people seeking sanctuary in Wales by:

- 1 Training health professionals on the social and legal issues affecting people seeking sanctuary, as well as cultural health issues and health status and infrastructure in countries from where people seek sanctuary.
- 2 Providing adequate and appropriate access to interpretation and translation services at all levels of interaction with health services, and training for health professionals to access this resource.
- 3 Providing and promoting specialist services that meet the specific needs of people seeking sanctuary, especially in dispersal areas, including asylum nursing and designated health visiting services.
- 4 Providing accessible, foundation-level mental health promotion courses or resources, to encourage self-help and mental well-being and to prevent deterioration of mental health. This should be complemented by prompt access to adult primary mental health services or Child and Adolescent Mental Health Services where appropriate.



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