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Between a Rock and a Hard Place:

Structural Vulnerabilities, Resilience and Migrant Communities-led responses to COVID-19 in West Yorkshire

A report by the Racial Justice Network

qmul.ac.uk

Between a Rock and a Hard Place: Structural Vulnerabilities, Resilience and Migrant Communities-led responses to COVID-19 in West Yorkshire

About us

The **Racial Justice Network (RJN)** is an anti-racist charity based in West Yorkshire. RJN brings together groups, organisations and individuals from across the West Yorkshire region (and beyond) to proactively promote racial justice and address colonial legacies. Our organisation aims to address colonial legacies via raising awareness about, and mobilising around, racial inequality and injustice by listening and working with disempowered communities, taking positive action for justice and solidarity. Addressing colonial legacies.

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اشكر **tinotenda zvikuru siyabonga Asante**
Gracias Niwega Thank you



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RJN COVID-19 campaign

The UK government imposed several guidelines, legislations and laws following the global crisis brought on by COVID-19 on March 16th, 2020. These measures included the prohibition of non-essential contact and travel and ‘stay home’ guidelines.

Public institutions and all but essential services and establishments were closed; wearing masks became compulsory in public places; those who could were advised to work from home; and schools, colleges and universities were shut and pupils and educators were advised to learn/teach from home.

People with different immigration statuses, those going through the asylum process, destitute, undocumented, on visas with No Recourse to Public Funds (NRPF) and refugees have been particularly hit by restricted access to government support throughout the pandemic. This was also compounded by digital inequalities. Restrictive health and immigration policies have created a complex eligibility criteria for access to healthcare services, with increasing numbers liable to be charged for treatment under the National Health Service (NHS) which has historically been free at the point of delivery¹. These restrictions have had a devastating effect in breaking the trust between migrant communities and health practitioners. Migrants are scared to seek medical attention or COVID-19 vaccines out of fear of having their data shared with the Home Office.

Moreover, harsh immigration policies have compounded migrants’ access to public services in general including income support. The current asylum system prohibits those seeking asylum to work and instead grants £5.66 a day as

living expenses, forcing many into destitution (see below). Asylum seekers are housed by the National Asylum Support Service (NASS) in accommodations which mostly do not have internet or television. NRPF prohibits immigrants from accessing government help including those who have lost their jobs or experienced domestic abuse, leaving many unable to afford food, shelter, health for themselves or their children. NRPF is more likely to affect racially minoritised communities². Many immigrants who are often in insecure contracts, employment including in the grey economy lost their jobs during the pandemic and consequent lockdowns.

In March 2020, when people were asked to stay in their homes, the Racial Justice Network and Yorkshire Resists wondered what our members from marginalised communities with very little income were doing. How were they coping? We received and saw messages from them asking the public not to take everything from the shelves because they could only buy weekly given the limited £39.63³ people seeking asylum are given by the government. They were finding empty shelves with no food. We began to make calls to our community leaders and advocates to find out how they, their families and communities they support were coping.

What we heard led us to launch our COVID response campaign in April 2020 (which is still ongoing) to highlight the disparity that has been heightened by the pandemic towards migrant communities, who are often racially minoritised. As a first phase of the campaign, we invited the public and others to donate toys, adult and children’s books and activities, gardening, painting and board games that did not require internet or TV. We were also able to provide communities with mobiles, top ups, laptops and tablets donated to help bridge the digital divide. We have also distributed sanitary products, toiletries, face masks and antibacterial gel to migrant communities across West Yorkshire. We have supported over 600 individuals so far via our COVID-19 campaign.

We were aware some of the ‘solutions’ emerging from national and local governments had not considered those who have been pushed to the margins. Communities

grappling with and still enduring systemic racism, the hostile environment, border controls, poverty, fear and suspicion of authorities were left to their own devices.

As part of our COVID-19 campaign we have convened multiple online meetings with community advocates to hear, support and encourage one another. We have also set up a WhatsApp group of mutual aid. We believe we must have a proactive versus reactionary vision in which we demand the end of hostile environment policies and institutional racism which have devastated migrant communities in the UK.

We decided to undertake these interviews because we were impressed with how communities responded to the pandemic despite the myriad of barriers and multiple challenges they face. We wanted to celebrate and acknowledge the inspiring works by sharing learnings about their resilience, resourcefulness, innovation and creativity that surface when communities who have very little respond to a crisis. Above all we want to recognise the unpaid emotional labour community advocates and grassroots organisations do to support each other with little to no resources.

COMMUNITY-CENTRED SUPPORT
Aimed at reducing the spread of Covid-19 and supporting those who have contracted it.
Developed by Hyab Yohannes and Testalem Yemane

TEST
If you've COVID symptoms, please book a test and stay at home while waiting for your results.

ISOLATE
If your test results are positive, continue to isolate in accordance with the government guidelines.

TIME

MESSAGE
Text to people with whom you've been in close contact and advise them to follow all the necessary guidelines, including TIME.

EAT
Contact your local community members for assistance with basic needs such as food and shopping.

¹Since 2015 migrants outside EEA are required to pay the Immigration Health Surcharge (IHS) prior to a visa appointment to be entitled to access to the NHS. The IHS is currently at £624 per year per person on top of visa fees.

²<https://committees.parliament.uk/publications/3965/documents/39887/default/>

³During June 2020, this was increased from £37.75 to £39.63 and again in October to £39.66.
<https://www.refugeecouncil.org.uk/latest/news/changes-to-home-office-asylum-resettlement-policy-and-practice-in-response-to-covid-19/>

Methodology and ethics

For this study, we invited our long-standing members who had specifically engaged with our COVID-19 campaign to participate.

We also invited other networks and collectives supporting migrant communities, whom we had not assisted directly, but were aware of their work with marginalised groups. Those who participated identified as Black, Brown, African, with migration history, diaspora community, with international links, working with people who are seeking sanctuary in the UK and who are at different stages of the immigration/asylum process.

We interviewed 10 community advocates from migrant communities in Bradford, Halifax, Leeds and Wakefield. Each of the interviewees were supported by the community advocates and/or are active in supporting individuals and families in their communities which can range from 40 families at a time or more. We have also held a number of community advocate meetings since the launch of our COVID-19 campaign to connect, share strategies, support and celebrate each other. Mobile top ups were provided for advocates to join meetings.

Confidentiality was crucial given some of the issues explored and the power dynamics in place, recognising some of the participants are at different stages of the immigration process/experience. All names have been changed to assure participants' confidentiality. The interviews were carried out via Zoom and were recorded so both parties could have access to the material. Top ups for interviewees were provided as well as financial distribution for them and their communities for their participation. We have shared this report with them prior to launch to hear and take on board their comments/feedback. We see this as a living document which has been written in a collaborative nature.

We acknowledge the world is still experiencing and fighting to survive the pandemic and whilst we know it has come at a great cost to life, social and economic statuses, we recognise it will be a while before we realise the full effect as the impacts are still unfolding. This report is meant to highlight some of the issues that emerged following the coronavirus breakout. We will be looking at the effect it has had on some of the communities we are part of.

Content warning:

Please be aware, some may find the content of the report distressing as there are real life cases of racism, anti-blackness, xenophobia, domestic abuse, Covid-19 illness and death documented by participants in the report. Mentions of suicide and mental health are also made in the report.

Key themes

Laws, legislation and policies entanglements

The pandemic exacerbated and brought to the surface already existing social, economic and health inequalities.

Actions taken by authorities were not addressing the inequality and inequity brought on by hostile environment policies, the new Immigration Plan, the Police, Crime and Sentencing Bill, the Domestic Abuse Bill in conjunction with Brexit. Fear, suspicion and threats around authorities as well as lack of entitlements to support and access services have meant disparity and unequal treatments of non-citizens in the UK.

Lack of information in diverse languages and in a simplified English version for non-native speakers in an approachable format both digitally and physically with regards to 1) lockdown rules, 2) free testing and medical attention related to COVID-19 and 3) access to vaccines for all migrants including those with precarious status has prevented migrants from seeking vital help from authorities including lifesaving medical treatment. This has been exacerbated by the digital divide in which many migrants, in particular those seeking asylum and refugees, do not have access to internet, smart phones, data and/or the IT skills to access this information, including being unable to book appointments with their local GPs. Above all, **it is the surveillance of people subject to immigration control via schools, banks, landlords, NHS and police forces which has had a devastating effect on the absence of trust and fearfulness from migrant communities towards authorities.** In addition to lack of trust in the system, religious-cultural beliefs and misperceptions of the virus and vaccine are also important variables in understanding some of the challenges raised above.

The impact of COVID-19 has already been devastating on Black, Brown and migrant communities. **The COVID-19 report** released by Public Health England (PHE) in June 2020 demonstrates that 'BME' people (to use the report's terminology) are more likely to die from the virus. Black people specifically are 4 times more likely to do so. This percentage increases for people born outside of England. The report found that people from Central and West Africa are 4.5 times more likely to die of COVID-19 while in the UK. A **joint report** by migrant organisations and campaigns found that the hostile environment is having a devastating impact on migrants' access to healthcare during the COVID-19 crisis.

The report concluded 57% of respondents were actively **avoiding seeking medical advice because of fear of being charged, their data shared with the Home Office, and other immigration enforcement issues.**

Those with precarious migrant status, often in frontline jobs have **NRPF** which means they are unable to access universal credit. Migrants are being forced to work despite having symptoms out of fear of becoming **destitute** or being **threatened** at work, this is compounded by the fact many frontline jobs simply cannot be done from home. These fears will only increase under the use of **Schedule 21** of the Coronavirus Act, where police and immigration officers have the power to stop and hold anyone suspected of having the virus from 3 to 48 hours. Surveillance technology such as the **biometric fingerprint scanners** connected to the police and immigration database make it more difficult for migrants who have been victims or witnesses of a crime including hate crimes and domestic abuse to seek help from the police. Our **report** on the public's perception of the use of these devices showed **88% of migrant participants would not feel safe to seek help out of fear of having their fingerprints shared with the Home Office.** This is increasingly worrying given the rise in both **domestic abuse** (migrants survivors of domestic abuse cannot access shelters because of NRPF) and **hate crimes**.

Key themes continued

The effects of colonial legacies during a pandemic

We have stated the pandemic did not create inequality rather it exacerbated it. The state and its institutions exposes migrants, particularly asylum seekers and undocumented to the virus via their national policies and ideologies: **“Viewed by the state as ‘disease-carrying threat to the nation state’ and, therefore, a threat to ‘national security’ and ‘public health’, asylum seekers are being pushed away from public and political spaces.** They are seen as the anomaly of the imagined health society and are being warehoused in geographical and political peripheries of the British public.⁴” This had and continues to have a devastating effect on migrant communities as NRPf has meant them being disproportionately exposed to the virus and unable to self-isolate and/or to stock food or medicine given they have little to no resources. Furthermore, it has meant those that have lost friends or family members both here in the UK and abroad because of the virus were left to crowdsourcing to be able to carry out funeral rituals.

Asylum seekers who arrived between 2020-2021 have been subjected to unsafe and unsanitary conditions which has increased their level of exposure to COVID-19.

We have seen first hand and throughout our interviews stress and anxiety caused by asylum seekers not knowing what was happening as some were swiftly moved to other locations without any warning, lack of information in diverse languages related to the virus and lockdown rules. Mental Health was also exacerbated by having to share a small room with many people unable to social distance, lack of access to soap or antibacterial gel, face masks as well as basic sanitary products. RJN delivered several of these items to asylum seekers across West Yorkshire as part of our COVID-19 campaign.

These conditions have caused outbreaks in several of the accommodations where asylum seekers are being housed including [Urban Housing](#) in Wakefield and [Napier Barracks](#) in Kent. In June 2021, a judge ruled housing migrants in Napier Barracks was unlawful, unsafe and a major contributor to the outbreaks⁵. Although the Home Office momentarily stopped the eviction and deportation of migrant rough sleepers and those who have lost their appeal as a matter of public health concern, these have been renewed as of [April 2021](#).

The effects of colonial legacies will continue to exist and thrive under hostile environment policies.

Isolation and mental health including retraumatisation

In March 2020 the first national lockdown was announced. Among the rules was the inability to see anyone outside your immediate household. Those who have no family or wider networks and living alone were pushed into further isolation. Community hubs, libraries, charity buildings, among others, were closed, cutting off what little support and networks migrants had. Those housed in NASS accommodation were particularly hit with mental health issues. Most NASS accommodations did not provide wifi or allowed television and its residents had no access to libraries or books or other types of activities which would allow them to cope with lockdown. Unable to afford phone top ups (expensive) or have phone contracts they were unable to communicate with other people and keep up with their asylum claim or appeal. **Some who had migrated from war zones, have been in hiding to avoid persecution or lived under militia rules were triggered and retraumatised due to lockdown.** Unable to seek mental health support during lockdown has meant an increase in suicide attempts, particularly in migrants who are in [detention centres](#).

Another triggering factor among the migrant communities we supported was the **impact digital inequality had on migrant parents’ ability to support children with their school work** due to school closures and in cases where self-isolation was necessary. Burn out and a sense of responsibility towards community members also had a negative impact on community advocates’ mental health, who at times were the only individuals supporting other members of their communities with little to no resources or with no mental health training of their own to support those who are suffering from PTSD, domestic abuse, hate crimes or other mental health illnesses.

Lack of engagement and due care from authorities and government institutions

Local authorities were slow to adopt, listen or meet needs of the most marginalised in their locations during the ongoing pandemic. Migrant, racially minoritised communities with multiple and complex needs were overlooked and struggled to have their voices heard due to lack of access to decision makers. **Decision making spaces are not representative of affected communities.** Suggestions to provide hotspots, combat digital inequality as well as point out the mistrust of authorities among migrant communities was shared by RJN since April 2020 but was not acted upon due to bureaucracy, costs but also distance from those experiencing harms.

A significant area neglected by local and national authorities was/is the impact the pandemic has had on migrant children and youth. **Gap in education attainment is not only prevalent but has widened as children whose parents could not afford gadgets or internet were left out and**

unable to continue studies whilst others continued as best they could but often without understanding the task in hand given language barriers and/or not being familiar with curriculum content. Living conditions such as lack of access to food and sharing accommodation with several people also meant even those who were able to attend were not eating properly and were in overcrowded homes. Those with special needs did not receive adequate support and when this issue was raised, migrant parents were continuously ignored. Domestic abuse situations and other poverty related issues meant children and youth were not able to study and learn as they would in school. The digital devices that were lent to some migrant families have now been returned to school, leaving them again with no access to digital devices to continue their education. **Free school meal vouchers were not offered to immigrant/destitute children at the beginning of lockdown as part of NRPf⁶. This was challenged, and vouchers were eventually offered but with less value or parents struggled to access the vouchers or money because they are not allowed to have money deposited to their Home Office issued cards.**



⁴ Yemane and Yohannes (2021) <https://racialjusticenetwork.co.uk/2021/04/10/from-structural-vulnerability-to-resilience-a-reflexive-essay-on-refugee-led-responses-to-covid-19/>

⁵ <https://www.bbc.co.uk/news/uk-england-kent-57335499>

⁶ <https://www.nrpfnetwork.org.uk/information-and-resources/rights-and-entitlements/services-for-children-and-families/free-school-meals>

Key themes

Resisting and surviving as a community

Despite all the obstacles and harmful experiences mentioned previously, **community advocates and migrant informal networks generated a multitude of strategies to support each other during the pandemic.** Bigger and resourced organisations shut their doors and did not bother to contact people whilst community advocates and smaller charities did not have this luxury, lives depended on it. This highlights the importance and meaning of lived experience within the charity sector as for many of us this is not a career or profession but rather a matter of supporting our communities, it is about our survival and happiness. This is personal and our contacts are in our lives in more ways than seeing them as service users.

There was a tremendous amount of survival skills and innovation going unnoticed during lockdown that continue until today. **Many community advocates delved in translation, telephone calling and dissemination through informal networks within the diaspora communities** who spoke the same language to update their communities of public healthcare guidelines about COVID-19, COVID-19 treatment and vaccination access as well as lockdown rules without being payed or receiving formal recognition. An example of this is the work being done by the Eritrean community in Leeds and their facebook page. They also created their own Track and Trace system which in addition to the NHS app (you can't download an app to a device you don't have) helped mitigate fear of data sharing with the Home Office.

The importance of face to face meetings cannot be underestimated as they allow the personal not just the professional to be present and heard. A clear example of this is the [Free2B-Me community garden](#) in Bradford which was set up once lockdown rules allowed it. The garden is intended to be a community space for LGTBQ+, including

asylum seekers and refugees to come together. This was difficult to reproduce in an online setting, especially given that many did not have access to digital devices, internet or could afford top ups that would allow them to join these spaces. Despite this, several of the community advocates we interviewed were able to host online spaces which involved cooking and knitting classes, English lessons, meeting other parents and providing children entertainment.

Above all, we want to highlight **the spiritual warmth and gentleness as friends and comrades took on family roles and responsibilities.** Mutual aid groups among migrant communities provided a sense of togetherness and sense of community as well as practical skills and knowledge exchanges, financial and food contributions/support. They often pulled resources together like financial contributions for burial rituals and doing food shopping for people who could not afford it or leave the house because of shielding or self-isolating. These are just a few examples of creative, reflective practices rooted in community. Community advocate meetings helped strengthen the trust and relationship building amongst migrant communities in West Yorkshire. These were intended as a platform to have their voices heard in decision making spaces. Some of these groups have received training from RJN on racism, tackling anti-blackness in their communities and will shortly receive training on writing reports and facilitating workshops.

Small acts such as sending and receiving letters of support and encouragement were fundamental for the morale in migrant communities. Generating online and when permitted face to face spaces so individuals and community advocates could come together to listen, learn and support each other showed a meaningful engagement which allows a deep sense of community building, trust and celebration. **We have learned throughout the pandemic the act of loving, caring, resisting and selflessness emanating from migrant communities to assist and support others even though they too were struggling.**

Recommendations

1. Immigrants including those with precarious status in England should have voting rights like in Scotland and Wales who were given **the right to vote** for the first time in the May 2021 elections⁷.
 - a. Migrant communities should not be overlooked when it comes to policy discussions, design and implementation. In the area of policy discussions and support interventions -the voices of migrant communities are usually an afterthought from politicians. This is partly because noncitizens without voting rights, especially migrants with insecure status, are seen as unimportant as a voting block with little to no rights.
2. Local and national authorities including councils, police forces, health practitioners and educators need to **restore relationship and trust with grassroots organisations and migrant communities** which has been broken by the implementation of hostile environment policies by:
 - a. Laying foundations at the local level that will resource, empower and enable communities.
 - b. Offering leadership apprenticeships with local authorities to ensure lived experience is involved/tailed all through policy and decision making.
 - c. Identifying development needs of those working on a shoestring and support equitably.
 - d. Making government information accessible in different languages for those whose English is not their native language in both digital and physical format. This should include paying community advocates already doing translation work in their communities.
3. **Acknowledge systemic racism and xenophobia** embedded in UK institutions by:
 - a. Training or issuing guidelines to authorities and other institutions to understand barriers faced by the diaspora and noncitizen communities so they can do more and better support them.
 - b. Implementing a firewall between the crime database and immigration database so victims or witnesses of crimes feel safe to seek help from the police.
 - c. Providing extra support for children and youth of lower income and migrant communities who have fallen behind in school because of lack of access to digital devices and/or language barrier during several of the national lockdowns since March 2020.
 - d. Holding private outsourced companies housing asylum and refugee individuals and families accountable to provide clean, safe and healthy housing, food which considers the cultural, religious and health needs of individuals as well as free internet.

4. **Fund and support** community led initiatives beyond COVID-19.
 - a. Funding needs to change its time scales and processes. Larger, more well-known and established organisations tend to get funding and become gatekeepers. In comparison, smaller and community led projects and initiatives go underfunded and at times are unable to apply because they are not a charity or 'established' group nor do they have access to digital hardware or IT skills to apply online. Funding should be provided upfront and not retroactive as this limits and ultimately stops communities from being able to carry out projects because of lack of resources.
 - b. Creation and supportive infrastructures in migrant communities to deal with issues beyond COVID-19 because the health, social, economic inequalities have exacerbated the effects of COVID-19 not created them.
 - c. Support ideas of collaboration/partnerships which removes the competitive nature of funding.
5. **Acknowledge methods and survival skills marginalised groups** used throughout the pandemic in West Yorkshire such as:
 - a. [free2be me](#) Community garden, talking circles, [light up BAHC](#), Afrikaniwa, Project Hello top up scheme, Eritrean community members providing food to those self-isolating, the Swahili community in Leeds, the Good News Club should be acknowledged and celebrated. Other initiatives linked with other organisations offering specialist services like [Abigail Housing](#), [BIASAN](#), [Cellar Trust](#), [RETAS Leeds](#), [Migrant Action](#), [Sisters United](#), [PAFRAS](#), and [Leeds Unity Centre](#) should also be acknowledged and supported.

⁷ <https://www.gov.scot/news/right-to-vote-extended/> https://www.carmarthenshire.gov.wales/home/council-democracy/elections-voting/eligibility-to-vote/#.YL8g9_IKhPY

Recommendations continued

6. **Ticking boxes and tokenism is exploitative and should stop.** Racially minoritised individuals should not need to have white values to stay or be invited to panels, webinars, meetings and funding opportunities.

- a. Humanity should come first before labels. Inclusiveness and diversity being celebrated as well as a sense of welcome and participation being a natural entitlement, rooted in people's lives experiences. Understanding equity as equality is too simplistic.

7. **End hostile environment policies** which disproportionately affect racially minoritised individuals and communities.

- a. Allow people seeking asylum to study and work while their asylum claim is being processed.
- b. Scrap No Recourse to Public Funds and the IHS surcharge.
- c. End detention centres.
- d. Stop the use of mobile fingerprint scanners connected to the immigration database.
- e. Install a firewall, end data-sharing and implement non-cooperation between all social, educational and health care services and the Home Office.
- f. Remove the duty to report immigration status.
- g. Follow the recommendations of JCWI campaign [We are here](#) to provide a route for undocumented individuals to obtain status.



The system is designed to break you: impact of hostile environment policies during pandemic

The UK Government historically has made the British Isles a hostile place for newcomers. However, since 2010, the UK Government made this an explicit aim of the immigration system.

The then Home Secretary, Theresa May's stated objective was to make the UK a hostile environment for migrants making life so difficult that they would voluntarily leave the country. Since 2010, this aim has come to encompass all areas of policy-making and beyond. Banks, teachers, landlords, doctors, nurses and universities now have a duty to report someone to the Home Office. Immigration concerns have come to supersede all other professional duties. The hostile environment has made us into border guards. Immigrants' data is shared with GPs, banks, landlords, schools, among others to check immigration status.

This is just one way in which hostile environment policies have infiltrated everyday lives. Hostile environment policies in conjunction with the ongoing COVID-19 pandemic has exacerbated social, economic and political inequalities embedded in UK society which particularly affect Black and Brown and marginalised migrant communities. In the sections that follow, we analyse key obstacles as well as strategies migrant communities in West Yorkshire came up with to cope with the pandemic.



ASPEN cards

There are many aspects of hostile environment policies which made life for migrant communities much more difficult during the pandemic. **One of the biggest contributing factors was the inability to be able to work while an asylum claim is being processed and only being entitled to £39.63 weekly which is deposited in the Asylum Support Enablement Card (ASPEN).**

The ASPEN card was first introduced in 2017 and is outsourced to private companies.⁹ Around 55,000 individuals receive financial support via the Home Office using these cards. This is the only government help they are entitled

to as they are subjected to NRPf. People under section 95 support can withdraw money from ATM machines.¹⁰ These are individuals who have claimed asylum but do not have accommodation and/or cannot afford to meet their essential living needs. In an even more vulnerable position are people under section 4 support who cannot withdraw money from ATM machines. They can only buy items using a pin or chip in a store. These are individuals who have exhausted their appeal rights against a negative asylum claim. They must prove they are destitute and are in the process of leaving the UK, are unable to leave due to physical impediment (like a pandemic), have no safe route to return, they have been granted a judicial review or require support if their human rights are in breach.¹¹ Asylum seekers who were moved back into hotels from private accommodation were only granted £8 a week as they were in "full boarded accommodation." In June 2021, the Home Office came under fire because a change of contract with another company left thousands of asylum seekers including children without food because of problems with the new cards.

It is important to note **not all asylum seekers are receiving equal financial support and some are subjected to more surveillance on behalf of the government** as the Home Office monitors what the money is spent on.¹² Below are some testimonies to the impact of not being allowed to work, ASPEN cards and lack of financial resources during the pandemic.



⁹https://www.refugeecouncil.org.uk/wp-content/uploads/2019/03/ASPEN_card_brief__August_2018_.pdf

¹⁰<https://www.nrpfnetwork.org.uk/information-and-resources/rights-and-entitlements/support-options-for-people-with-nrpf/home-office-support/section-95-asylum-support>

¹¹ <https://www.nrpfnetwork.org.uk/information-and-resources/rights-and-entitlements/support-options-for-people-with-nrpf/home-office-support/section-4-asylum-support#guide-sections>

¹²<https://righttoremain.org.uk/home-office-tracking-use-of-aspen-card-by-people-seeking-asylum/>

Amare	They [people supported by NASS or Section 4] don't have access to cash. It's the card system, so they kind of limited way they can go in to buy their food stuff. So in this case they've got to go to the shops to buy. People with less income now they've been unable to stock.
Hayma	So we're getting £35 a week and we are really suffering like there's not enough during COVID and lockdown. Everything is getting expensive, especially since I only eat halal food. I said buy some clothes, toiletries and other stuff. This £35 they are giving us is enough for the food, we can manage this, it is enough. But for other things not. We need to buy masks, with COVID and this situation, £35 is not enough.
Rose	So when the COVID first hit, everybody was panic buying. Not everybody has the resources to go and fill up the cupboards. So we had in the first week people ringing. We have a couple of ladies with children and they couldn't get baby food. There were no nappies there. So when they were going to the shops there was nothing and they also had a problem with their cards so local shops didn't take their cards [Aspen cards] that the government put their money on. So that was a massive issue. For somebody in the asylum process it was, it was more [difficult] because they had to wait for the money coming in. They couldn't go to the corner shop with their cards where it had toilet rolls because it didn't take the card system. So it was a major major problem.
Thandiwe	They [asylum seekers] didn't have, you know sufficient PPE stuff like they don't even have enough money due to you know their immigration status and not being able to work. So imagine you know, having to stay at home and you know you don't even have enough money to buy the face masks, all the stuff that you have to wash your hands with, the wipes and stuff like that. So it meant that they were more isolated. Like I know Universal Credit increases by £20 per week and with the asylum seeking individuals they try to get the Home Office as well to increase their weekly support by £20.00 for food so that they can bulk up on food and then PPE, but they didn't, they actually increased it by I think it was something ridiculous, like 20p. Or something else? Or 80p but pence. It was not even a pound, which is ridiculous. So it just shows you if everybody else, their support is increasing. Why is it that the most vulnerable people? Asylum seekers who don't even have access to digital stuff. Why is it that they're left you know with no care ?
Mary	Poverty is one of the things that we have really tackle whereby we have families that struggling even to feed their own kids based on on the barriers that they have. Some of them is because they don't have any money coming up from Home Office there not entitled to any request public funds.
Hasnaa	There was a time people could not even afford to buy period product. It was really, really shocking how many people they are suffering from that and to buy books you know for children to read. And that's why when I started using your service [RJC COVID-19 campaign] to ask for books and I got a lot of books, it was really really helpful. And also they food people who are struggling for to get a food enough food in the house. So it was struggling after struggling.
Kefilwe	I feel the Home Office doesn't care. I feel like most of the doctors don't care. I used to live 6-7 months ago in another house like Mears. They just like used the word Home Office as a way to scare people into not asking any questions. Or, you know, demand like asking for better or just like asking to be basically treated as people.

As seen in the testimonies above what, where and how asylum seekers or undocumented individuals can spend the money had an enormous impact on their physical and mental health during the pandemic. Nearly 1.4 million people in the UK cannot access public funds due to their immigration status yet the demand to access government help has **doubled** since March 2020. Unable to buy Personal Protective Equipment (PPE) like face shields, face masks and antibacterial gel, stock pile medicine or food meant people were more vulnerable to the virus. Asylum seekers are unable to receive deposits in their ASPEN cards that do not come from the Home Office and are not allowed to open bank accounts. **This limits the possibilities of how asylum seekers and undocumented people can receive financial support from other charities, organisations or individuals.**

Impact on migrant parents and children

The inability to be able to receive financial support other than the Home Office had a huge knock on effect as many parents were unable to access school vouchers or COVID-19 relief funds from local councils leaving them

and their children destitute. Inability to be able to work and receiving limited funds also meant asylum and refugee parents were unable to afford to buy digital devices or internet for their children to virtually attend school. This was compounded by the fact many parents were unable to support their children's school work because of language barrier, unfamiliar with the curriculum content or lack of IT skills.

Mary	We are having families that have not had their free school meal since last year. We have contacted the Council. We have reached dead end. We'll say they've given out grant for COVID relief, but they have left people seeking asylum, people that destitute on the basis of like you've given out the money. They're not taking these boxes, and some of them if they're taking the boxes they don't have bank accounts to get this money. What are you gonna do because it's money that's entitled to them.
Hasnaa	I've got the little one as well. To be honest with you, I myself cannot help him 'cause sometimes I don't understand. You know, when I open the laptop and see what he's supposed to do. I don't know. I've got no clue so I have to rely on himself. You know, to tell me that mom I need to do this today. I need to do that today and I'm on the live session at this time. So it's a bit struggling I'm struggling.
Mehari	Because of the lock down, they have to do the classes over zoom. And as a parent, you want to sit with your children and see what they're doing, see how they're doing. Encourage them, but you need to know how this works. You need to know the language you need to know to communicate with their teachers. For the phone, but he can't do that because you have a very limited language skills, and I've seen that sometimes people call us for help for advice and how they can install and how they can play zoom. And I'm talking about families who can afford to buy resources. We're forgetting families who do not even have the resources to buy two or three laptops or iPad 4 for their children.

As you can see in the above quotes, many migrant parents struggled to support their children because of lack of financial resources and support from education and local authorities. Individuals within migrant communities who had IT skills or informal networks to crowdsource digital devices or money for tops ups were key to support migrant parents and their children. However, this meant that the burden fell to individual members of the community rather than authorities.

Getting COVID-19

Another important element which had a significant impact on asylum seekers was getting sick and not having networks of support. This was particularly the case for newly arrived asylum seekers who were housed in temporary accommodations including hotels for months during the pandemic without adequate PPE or inability to social distance because of the amount of people they were sharing a room with. Some of the individuals we have supported talked about being scared to bring these issues up as they were frightened this might have a negative effect on their

asylum claim. Language barrier was also a contributing factor as many who did not speak English were unable to explain their symptoms, understand the guidelines or know their rights to access COVID-19 treatment and vaccines. A constant in the participants we interviewed was a sense that no one cared they were sick and suffering until the wider population became at risk of contracting the virus. Elements of medical and institutional racism, especially anti-blackness, were prevalent in our interviews. African asylum seekers were told "to be strong" and denied medical treatment in comparison with asylum seekers from other regions.

Hayma	When I had COVID in November, I do not get any support from anyone. And yeah, I can't go out. So I asked my friends too. Yeah, the first time I called Red Cross and yeah they came and they dropped me some food. Actually, I can't get any help from anyone. NHS tracing, they called me just ask me about tracking, who am I contacting and all these things. Yeah, so during that time by when I had COVID I was really suffering and I didn't get help.
Kefilwe	I was living with the same people experiencing the same thing. Would ask for the same help and then get different results. And I realized that a lot of like Africans like me we having like similar experiences where we're just like being sidelined a lot. Especially times I was like really sick, I was told to be strong and I would literally had like the same symptoms as like my friend from UAE who like got treatment immediately and help immediately. While I was told that I'm strong and when I told like one of the applicants was doing my hair they were like Oh my goodness actually like experienced the same thing. But if you ask other people who have like different shade of skin from us they will tell you that oh those initials guys are really nice. Whereas like with us, we were having like a different experience altogether. I think like the way that I'm saying that I think that darker you are the less deserving of compassion you are. Basically, looks like you're not worth listening to. So it's really hard because I feel like I had to come out here too really, really experienced that myself.
Amare	The government responded to COVID when it started. We will house everybody. Whether you are undocumented, documented well. So it wasn't that wasn't from being them being compassionate. No, that was because if we have got people who are sick in the streets, they will pass all that diseases to our protected people. So the better way is? Yeah, let's see. Make sure they don't get sick in a way that they wouldn't infect everybody else.
Mehari	People who just arrived in the UK and then who have been put on military barracks or people have been put in hotels not knowing what happens and what awaits for them for their asylum claims. Not being supported, people have been disconnected. And then again with refugees. Sometimes people are just given their service and then asked to leave their NASS accommodations for example, and then given the charitable sector, the refugee sector is under the lockdown they have nowhere to go and then they end up being destitute and then they end up being exposed to the pandemic and then maybe exposing the public at large because of their circumstances.

We also received accounts from community advocates receiving distressed phone calls during weekends of newly arrived asylum seekers who were in a state of panic as they were being offered the vaccine but they did not understand what was being offered to them or the consequences of them refusing. This shows little to no engagement of local and national authorities with community advocates and grassroots organisations who are already doing translation and ground work to support migrant and diaspora communities who often mistrust authorities.

Biometrics and data sharing

The hostile environment has leaned heavily on the use of technology as a surveillance mechanism and the police as an active operating arm of it.

A pilot program to use a [biometric fingerprint scanning device](#) and app connected to the Home Office immigration database by police was launched in West Yorkshire in February 2018 (now used nationwide): anyone suspected of committing a crime and lying about their identity can be stopped in the street and have their fingerprint scanned by police, on the spot, and have their details searched in both the Police and Immigration database. Given that anyone with an immigrant status (someone on a visa, with Indefinite Leave to Remain, asylum seekers, refugees or precarious migrant status) will have their fingerprints stored in the Home Office immigration database, a potential traffic stop or breaking lockdown rules could end with someone being detained by Immigration Enforcement maybe unlawfully due to an unreliable Home Office database.

From our [#STOPtheSCANDal report](#) on national use of these devices, we know that Black and Brown communities are disproportionately targeted by these scans. [Liberty](#) has warned that these technologies can deter survivors of domestic abuse in coming forward as their immigration data can be shared with the Home Office. The result of Southall Black Sisters and Liberty's [police super complaint](#) on police data sharing for immigration purposes confirms this. One of

the safeguarding mechanisms which was lobbied by several domestic abuse organisations was the passing of [amendment 67](#) on the Domestic Abuse Bill which created a firewall between police and immigration enforcement to protect survivors of domestic abuse. This amendment failed to pass the House of Commons. This is particularly concerning given the astronomical increase in the number of domestic abuse cases since COVID-19 lockdown. Research by [LAWRS](#) has shown that 62% of victims have had their partners threaten with deportation if they reported the violence. Our [report](#) on the public's perception of police use of biometrics showed that 88% of migrant participants would not feel safe going to the police for help because of data sharing with the Home Office. Our [#StopTheSCANDal](#) campaign has urged for an immediate desist of police being able to access immigration database as it puts vulnerable and marginalised people at risk of being further criminalised such as the case of migrant survivors of [domestic abuse](#) and [victims of hate crimes](#).

The use of technology to implement immigration control is even more concerning now that police can access Track and Trace information on people instructed to self-isolate.

Those who fail to self-isolate face fines between £1,000 to £10,000. This is just another way the carceral state has infiltrated the healthcare and immigration systems in the UK. This does not recognise that some people simply cannot self-isolate and it further criminalises them and those subjected to NRPF. It also does not recognise both the language barrier and digital inequality which contributes to lack of information or understanding of current lockdown rules or the inability to download the NHS Track and Trace app. This meant migrant communities had to rely on word of mouth and those who had the ability to translate information to the wider diaspora communities.

Mehari	They share information and translate things for each other. Call each other giving formation and I was talking to someone who was under lockdown an asylum seeker who lived in an asylum accommodation where there was no TV where there was no Internet connection and I asked him how do you know then about the COVID rules and regulations? He said I don't know if I were to go out, for example, I would maybe have met. And I would have broken the law because I don't know. But he says, you know what my friends call me and they tell me of any new policy guidelines, for example, so that I am aware of what happens when I go out and how.
Thandiwe	Not having understood what the restrictions were, so it was more of you know as well by mouth like word by word. But yeah yeah, language barrier. And when one person's information could have been misleading.
Mary	Bubbles it's not physically bubbles, but Whatsapp bubbles where we link up our sisters with someone that can speak their own language just to make sure they understand the whole logic of what's gonna happen with lockdown and everything. And most of them have come back and appreciate it so much that it has really helped them.

The police use of Motorola's [PRONTO](#) software (Police Reporting and Notebook Organiser, PRONTO) which includes the biometric fingerprint app which connects police and immigration databases has been updated with [COVID-19 penalty functions](#). This is the result of the emergency police powers granted by [the Coronavirus Bill](#) on March 26th, 2020. This development compounds the unequal impact of the pandemic with the discrimination and lack of accountability embedded in policing technologies. Big Brother Watch [research](#) examined fines given in England under the Coronavirus Bill and found that Asian people received at least 13% of penalty fines even though they represent 7.8% of the national population and Black people were issued 5% of fines despite being 3.5% of England's population.

In [October 2020](#) we learned of the misplacement of 16,000 COVID test results which resulted in around 50,000 people not told to self-isolate as well as people receiving [notifications](#) that contradict official government guidelines. **These technological "mishaps" combined with police access to our health information will deter people from downloading the app, entrenching further mistrust in the NHS and government.** But this is not new. Since the implementation of hostile environment policies several organisations including the Racial Justice Network have demanded a firewall be put in place between the NHS and the Home Office immigration database as the sharing of this information deters people from seeking medical attention.

STOP the SCANDal



National Health Service (NHS) as part of hostile environment policies

Charging for using the NHS in England was extended by the Immigration Act 2014, which expanded the group of people who must pay, introducing the Immigration Health Surcharge for those applying to enter or remain in the UK for more than six months (the cost of which was later increased), and introduced charges for secondary care treatment of up to 150% of cost.

Amendments to regulations in 2015 and 2017 extended charging to some community-based secondary care, such as mental health services, and required NHS Trusts to check that all patients are eligible before providing care, to note patients' chargeable status on their records, to charge upfront those who are not eligible, and to refuse care to those who cannot pay, unless treatment is deemed urgent or 'immediately necessary' (in which case patients are to be charged retrospectively).

Between January 2017 and May 2018, a Memorandum of Understanding between NHS Digital and the Home Office was in place, which meant NHS Digital passed on personal data of patients to the Home Office for the purposes of immigration enforcement. This was implemented with no public consultation having taken place (Hiam et al. 2018). The government attempted to justify this move on the basis of public interest, claiming it was necessary for 'maintaining effective immigration controls', as 'it is in the public interest that limited UK resources and public services (including the NHS, jobs, schools, housing) are protected from unnecessary financial and resource pressures' (Home Office 2017, cited in Hiam et al. 2018). Following an inquiry by the Health and Social Care Select Committee, the agreement was suspended in November 2018, and the withdrawal of the MOU was published on the gov.uk website on 29 January 2019 (Papageorgiou et al. 2020). However, data continues to be shared, for example in the case of patient debt of £500 or more (Weller et al. 2019), and may be used by the Home Office to refuse applications for visas or leave to remain, or entry at the border (Button et al. 2020, Hiam et al. 2018).

NHS charging has remained in place since the start of the pandemic. Although COVID-19 testing, treatment and vaccines are free, lack of awareness of this as well as existing fears of personal data being shared with the Home Office create barriers which could impact on individual and public health. The trust eroded by the Hostile Environment strategy cannot be restored overnight: fears of detention and deportation remain and continue to deter access to health services (DOTW 2020, JCWI 2021).

Amare	Yeah, so do many people wanted to go for for the vaccination? To be honest, no [laughter]. Yeah, unfortunately the government doesn't have a very good track record. In terms of treating people in the past. Most of all, the Black folks they will, they they would have known if it is like them again [laughter]. We partnered with the streets practice so that they can start doing vaccination in the drop in.
Hasnaa	In my community, I would say the COVID vaccination is not something that people are willing to do. Many of them. They're not willing. I would say maybe just the 10% of a member of our community would be will be doing it willingly. We had a meeting with doctor who speaks Swahili. And he managed to explain in details about this virus and many people got into that meeting. They just wanted to listen to that doctor. I can tell that they were happy people, were happy to hear the information from their own. You know their own kind. You know people who are speaking their own language.
Thandiwe	Everything was online even with your GP, you couldn't go to your GP if your child like had a flu and everybody who was home and stuff they had to have a phone in order to be able to call a GP. So with that we just saw how you know devastating it was that we had people trying asking could you please call my GP? My child has been vomiting thing was that was like that's what started us initially to start providing phones because it was everything became online.

A rapid needs assessment (DOTW 2020) identified that refugees, asylum seekers and undocumented migrants are struggling to access COVID-19 guidance as a result of digital exclusion and language barriers; moreover, guidance is often difficult or impossible to implement, such as distancing for those living in shared houses with communal facilities or overcrowded accommodation, or minimising shopping trips to buy food for those surviving on prepayment cards. **Migrants with insecure immigration status face additional barriers to advice and treatment for (COVID- or non-COVID-related) illness due to the suspension of some face to face/outreach services and difficulties accessing**

services by phone or online (DOTW 2020). Undocumented migrants who are sofa-surfing, or in otherwise precarious accommodation, face eviction if they display symptoms of COVID-19 (ibid.). People with insecure immigration status have high rates of health conditions identified by PHE as increasing clinical vulnerability to the virus, and may be unaware they have a health condition and should be shielding (DOTW 2020). **Low rates of vaccination amongst 'BME' populations (to use PHE term) are an additional challenge in addressing vaccine take-up by people with insecure immigration status.**



Mental health

There have been reports that the ongoing pandemic has had a detrimental impact on people's mental health.¹³ Worries of catching the virus and its effect are compounded by financial worries. COVID-19 did not create inequalities but merely heightened them.

One of our initial reasons to launch our COVID-19 campaign was to support our communities' mental health who had little to no access to distractions such as the internet or TV. **Hostile environment policies prevent asylum seekers from working or being able to afford studying, digital devices and are housed in accommodations most of which do not provide internet or television which meant many were simply in their shared accommodation with nothing to do.** Mental health and lack of access to mental health services was and continues to be a major concern among migrant communities we interviewed.



Hasnaa	Many people just like other communities, have lost their job, have start getting mental health, you know, like depression and things like that. Anxiety. Even the children. The life had become even harder and harder people cannot. I myself, I don't know how to say this. I am, I would say that I am not really well mentally right now, I'm just not really well. So much have happened in my life during this pandemic. And also, that's what impact my mental health as well and I still feel like there's nowhere to go, you know, to seek for help. And I don't want to use medication because I know this is not something to use medication. It's something, someone should be there, you know. Talking to you, listening to you. That is what we need.
Mehari	For refugees and asylum seekers especially, those who do not have family isolation and loneliness were very rampant. I was lucky I had my family here. I didn't have any problem with that but imagine someone who is locked in their hotel. Imagine someone who is locked in an asylum accommodation with no Internet with no TV. And for them to be called by friends and say hello in their language. It meant a lot and we had examples of people calling each other, encouraging each other, motivating each other, pushing each other to stay positive in the eyes of the difficulties of being under lockdown, and having no resources.
Mary	COVID-19 has affected our community in a very big way, the first one being we used to meet every Monday morning for a meal together and different activities and just sitting down and talking. But we don't have that now, so it's kind of people have become so isolated and lonely and depressed. And what we're seeing now among us, our community is people suffering from really bad mental health.
Hayma	For me myself like I have yeah, lots of things like mental health because of COVID-19 I want to study. I want to do this. So yeah, because when I get when I got you. I can work, so I want to work. I want to do dates. I want to study. I want to do volunteering thing so I can't do anything just sitting around sitting at home, eating, sleeping. My mental health is getting worse than before.
Kefilwe	It affected my mental health a lot because I had to get used to trying to call them, which is quite difficult for me 'cause like when you call they can just give you to someone else like then just give you to just anyone. Talking to someone who probably doesn't understand the history of my mental health. And yeah, so and I feel like I have to explain everything from the beginning which is not really nice. Right?
Rose	Care, yeah, I care too much [laughter] OK, you know, because the lines are open on Facebook and stuff 24/7, I think that was a lifeline for people and I. I am quite a soft person and if somebody reaches out to me it doesn't matter what time it is I will be there. Christmas Day I had three people ringing me, you know, wanting to take their lives and I'm in between my Christmas dinner and I'm talking these people down.

Migrant communities, particularly those with no family in the UK, relied heavily on community hubs, charity organised events or drop in sessions to see, engage and build community networks. When the first lockdown in March 2020 was announced, these safety nets were taken away with little to no notice. This had a devastating effect on migrant communities who simply did not have access to smartphones, internet, or had the IT skills to be able to transition to virtual gatherings. Even those who describe being embarrassed to turn on their video because of the state of their accommodation or sometimes it was not

safe for them to join. **Community advocates, grass root organisations and small charities had to turn to welfare phone calls, often encroaching on their own private time to deal with diverse hardship situations such as having no food, clothes, face masks, becoming ill or more severe mental health issues with no training themselves.** This meant many experiencing burnout but being unable to disconnect because of a sense of responsibility towards their communities.

¹³ <https://www.health.org.uk/news-and-comment/blogs/emerging-evidence-on-covid-19s-impact-on-mental-health-and-health>

Digital divide

Without question one of the biggest inequalities that has been heightened by the pandemic is the digital divide among the population.

As seen in the previous section, many community hubs, libraries, community groups and charities were shut down during the numerous lockdowns we have had in the UK since

2020. This has meant the need to rapidly transition services and support online. This proved more difficult for migrant, grassroots community groups and those from low income backgrounds who could not afford smartphones, tablets, internet and therefore unable to move online. Computer illiteracy for people who were not familiar with the internet, Zoom, skype and so forth but were required to communicate via those channels with friends, religious places, schools, teachers, social workers and their lawyers was almost impossible. **Asylum seekers were particularly hit with digital inequalities because private companies contracted to house them like Mears do not (despite our pleas) offer internet in the accommodations.**



Mary	Mears housing provider, they cannot offer Wi-Fi to these families even though they want Wi-Fi in their houses. They're not allowed. So what do we do? The only thing we can do is to look for charities that can offer smartphones, and we give these families and then still use donations to top up their phones.
Mehari	I can tell you examples of families or individuals missing online classes or activities, because they could not afford to have devices, Internet connectivity, people cannot afford to buy broadband. Digital literacy is also a very very important factor, and there are people who are not literate in their own language, let alone in English. And it's not easy for someone, get used to this online world, digital language.
Hayma	I'm really struggling for this laptop or anything you can access, like it's cause my phone is not a smart phone, so anything that I can't access to the zoom, Internet' or maybe go online classes you know because there are so many opportunities, but I couldn't because I don't. I don't have that access, so it's like smartphone.
Amare	You need to provide the top ups to say OK, we're going to have a meeting on this particular day, so here is the top up for that particular meeting. We never had enough resources to be able to give people top up for every month. So it was some, sometimes the one off. We can't do groups anymore because we don't have the capacity to continue doing that then we will now do welfare calls.
Kefilwe	At the beginning of the year they sent me a phone but unfortunately where I live I can only use EE OK? So now the past two months have been like sending me £10 phone credit to buy data. That makes it like really difficult to attend stuff that can be helpful. Asylum seeking communities do have smartphones, but now most of us like would struggle with data. Before I moved here I used to use Jiff shop which is like £25 for like data and it's like unlimited. But now I can only use EE 'cause like that's the only network that I have, it is quite expensive and they don't have unlimited data.
Rose	We got some money from yourselves [RJN] I think at the beginning. To get data, we also did another crowdfunding later on and we got some more data for people so enabled people to come up on the Zoom platforms. Some of them it wasn't possible, they only had audio because they didn't have smartphones. We were scrambling around in our drawers looking for old phones that we had.

Considering how much data an online event consumes, joining multiple online events resulted extremely difficult for lower income, asylum, refugee and undocumented individuals given the limited amount of financial support they receive. Immigration cases were also severely affected by digital inequality as migrants struggled to keep up with their cases. Although there were a number of free online classes people could join, again many people simply could

not afford the mobile data to access them. Many migrant communities were left to crowdsourcing money for top ups, digital devices such as tablets, laptops and mobile phones. **As the pandemic continues donations are low which means community advocates and small charities are unable to offer regular support for top ups as it is simply unsustainable.**

'We are talking. We are just not being heard': decision making spaces

During the pandemic it has become more evident the decision making spaces are not representative of the most marginalised groups and the need for structural change.

One of the elements we continuously encounter as a charity is that some of these spaces or rooms are simply not safe for marginalised communities, especially migrant communities. Therefore, it is not that these communities are not speaking, it is just they are not being heard by local and national authorities. As seen throughout this report, structural changes including the end to hostile environment policies are urgently needed. These changes should be led by community advocates with lived experience and organisations who know first hand the issues as well as some of the solutions needed to combat inequalities that have been heightened because of the pandemic. Above all, we have seen the importance of simply providing a space for marginalised communities to be heard.

Amare	The voices of the communities is never heard. How much of it now filters to the decision makers? Sometimes we may not even have the option to sit [in the room] with those decision makers. They might get a person who is tasked, maybe a questionnaire. The questionnaire comes out then that's what they work on. But if I see them really with that political will of saying, let's go right down to the Community, let's talk to the community? No. I know through Racial Justice Network we have money to bring communities together, have meetings. Surely the government got enough resources to do that. They should be. They should be able to.
Hasnaa	I would say that the voice that has been heard is mainly from the government and big services like let's say like NHS, government and people like them have been heard a lot but voice like ours, it's never been heard. You are the first person who came to me and asked me about this. Especially like you, you know, you just want to sit down with me and say Hasnaa, OK, tell me about what is going on in your community. I appreciate this and I feel like I've been heard.
Mehari	Maybe I'm a bit critical, but when it comes to important policy issues such as this, I think refugee families, migrant families are the policy afterthoughts. They're not. They're not in the front and centre of this policy.
Kefilwe	This situation affected different people differently. I think caring would start by listening and not just as a formality but listening so you can like hear people and whatever concerns that they're raising and.

We have seen first hand the devastation hostile environment policies have on undocumented migrants, people seeking asylum and refugees. **It locates them in a catch 22 cycle where they are not allowed to work or study (often because of lack of resources) hence have not accumulated financial capital or skills; and once their claim is successful (which can take years) they are asked to leave their accommodation in 28 days. This means they have less than a month to find a job and other accommodation which can be extremely difficult if you do not have money saved up. This pushes many into destitution.** A bottom

up approach and intervention means demanding radical change such as ending hostile environment policies. One of the biggest changes we are pushing for is the ability for people seeking asylum or on section 4 to be able to work. It will not only provide them with the financial support they need but ultimately have a positive impact on their emotional and mental wellbeing. **Migrants are more than labels or numbers, they/we are human beings with dreams, hopes and aspirations and the/we should be allowed to not only live in peace but to thrive and be happy.**

Amare	This inequality's they are institutional, right? The moment you deprive a certain part of your community, deprive them of rights like income and whatever, then you are creating the inequality. So the first thing is if that can be removed. Let everybody with a migrant to be able to work for themselves. Let them be members of the community not take the class of 4th class members of the community if that can be achieved, yes. Is it impossible? No! [laughter]
Kefilwe	Most people who are refugees and asylum seekers they have to volunteer with things that they are not passionate about so they can keep themselves busy. Which is a good thing. But I also don't think it's. In the long run is a good thing. I think if people in our communities have access to volunteering opportunities that are in line with their maybe career goals or things that they're really good at, or things that they really gifted in it would make a difference.
Mehari	Maybe it's not an important voting bloc because it's just a new emerging migrant community. But I think a critical resource that is needed is we need to have and train community leaders. People who hail from their respective communities. People who know the nitty gritty with insider status from their respective communities. And people who can influence policies at the local level, regional level, maybe at a national level, engaged with the system, have conversations, critical conversations, candid conversations with the system with institutions.
Mary	The changes that I would like to see is for the government, either to grant everybody status or make these banks accessible 'cause there's a card that yes you can receive money you can pay, but you can only receive money from the Home Office. So any other source of like now with the COVID, which is like the local government applied for that funding specifically to cater for these families but because they don't have a bank head, they're being left out. I would like to see the local government learn and educate themselves more on the people in their community. For instance, they should learn by now that people seeking asylum don't have a bank card. People seeking asylum cannot just get money from anywhere.

As seen in the quotes above, **our community advocates are also asking for local authorities including councils to simply learn and listen to marginalised communities.** This would help avoid unnecessary stress, bureaucracy and obstacles which prevent migrant communities from accessing help such as school vouchers. The relationship between national and local authorities including police, local councils, teachers, social services and health practitioners needs to be rebuilt as this trust among marginalised communities has been broken in large part as a result of both institutional

racism and hostile environment. A possible way forward is to offer paid leadership training to community advocates and invest in community and grassroots projects. **This would entail changing how funding applications and allocations work.** One of the biggest obstacles community and grassroots initiatives have is not being able to access funding because the language and application is complicated, not being a constituted entity or charity, not being able to apply online or having to pay for materials upfront. This ultimately limits or stops altogether these bottom up initiatives.



Community building and strategies to survive and resist

Despite all the challenges, obstacles and heartaches migrant communities encountered during the pandemic, they/we have managed to generate strategies to survive, thrive and support each other. With little to no resources, migrant communities came together offering what little resources they/we had to each other.

Formal networks such as religious based groups had a part in supporting migrants, especially asylum seekers who had little to no resources or support networks to rely on when they were sick. Informal networks established among migrant communities were also a particular tool used to help people especially around access to food.

We saw in the first section of this report that many migrant communities simply could not afford to eat. There were also cases of people having to self isolate or shield. Members from migrant communities offered to do shopping for each other, drop food off for those who had fallen ill or simply could not afford to buy items. **We cannot stress enough the importance of food, not only as a fundamental element to live but what food can and does represent for many.** The ability to focus on school work, have energy to work or be healthy both physically and mentally are all affected by food. Beyond that, food brings people and community together. Even doing food drop ins or collecting food for neighbours helped build and keep a sense of community even under lockdown.

Hayma	So I contacted the local mosque and they came . Like very far they came. They dropped something for me [when she was sick].
Rose	Many times people forget about the people that are running around. And I remember around Christmas Eve with the last food parcels and one of our members had made dinner for us because we hadn't had any dinner . You know, so it would people actually stepping up and caring.
Mary	They have set up like a project like this is called a community fridge where people can go and get food , which is most of them is the food is being donated by the local supermarket. We have had different organization doing warm meals during pandemic, whereby you go and get a warm meal and come back home with vegetables or oranges. That's something that again it has brought people together.
Mehari	If someone is in quarantine because of COVID and if they are tested positive. People would always have phone calls every five minutes of people asking you what you wanted. You want food. Do you want shopping? Do you want me to do that? Do you want me to do that? So I had COVID myself and I always had phone calls and I always had food and shopping stuff on the door on the side of my door. So it tells you and it shows how an important the support networks within their communities, the communities they have.

Migrant communities have been able to build a sense of community, love and healing. As seen in the below quotes, many of the participants signalled to the multiple meanings of community. On the one hand, we as migrants have been forced into a vulnerable/marginalised situation and all fear the Home Office. This pushes people to come together. On the other, many have forged their own community, according to their place of origin or particular characteristics like being part of the LGBTQ+ community **to create a sense of belonging, of having family even if you are far away from yours.**

Amare	These are diversity members of migrant. But they've got one common thing. We are migrants, they are people who are scared of being detained by the Home Office. OK, so that's what makes them kind of brings them together as a community.
Hasnaa	I wanted to create that sense of belonging, you know into our community so people can come and relax there and rely on those people. You come there, you see others, you just you have any problem. You talk to you. Share your problem with other people and you help it. That's what I wanted. I wanted to build that bonding like a family bonding through the community.
Hayma	Emotionally support, our country's situation is really bad, yeah? Caring is really important. Get someone. Because my parents are not here. Can you support me? If someone is caring I will feel better.
Rose	You have people mixing that would never in a million years and they became friends and this site working together on stuff you know, doing tasks in the garden. Which were great for them. It will help them grow. It gave confidence. You know, like the asylum seekers mixing with older ladies who you know, and things like that. It would have never happened. You have Muslims mixing with Sikhs. You had African people make mixing with Jamaican people.
Thandiwe	Just having somebody that checks in with you know the the well being of others where they emotionally, whether it's financially where they just somebody to speak to or just guidance on.

The importance of a “buddy” system in which people contacted each other to check in and see if they needed any help with isolation and mental health cannot be overestimated. Above all, it meant people did not feel they were alone and without hope.



Joy in times of pandemic

We wanted to document, cherish and celebrate the many ways in which migrant communities came together to support each other during the pandemic.

Recognise the unpaid, invisibilised and unrecognised emotional and financial labour community advocates and migrant communities have done since the global outbreak in 2020. To conclude this report we want to uplift moments of joy in the same way we ended our interviews. **Too often we do not have the time or luxury to take a moment to pause, reflect and celebrate what we as a community have achieved and overcome.**

Question: What has been a moment of joy for you during the pandemic?

Amare	I had a call from two people who were in America. They called me to say we know you've helped our sister. The first one to say just thank you [laughter]. Yeah, it's kind of touching but that's the impact to me. That's what shows that the work that we're doing well, how far it reaches. So this is somebody who comes, they don't have anywhere to stay, so you arrange for them for somewhere safe place to stay. You give them vouchers, you look for what the toiletries, whatever that you think they might need. If you sit down with them and say, OK, this is your case. Where we can help you in terms of gathering new information we like giving them a clearer picture of what the Home Office looks for when there's a fresh claim.
Hasnaa	Let's just create something so we can still meet each other and we can still speak and help each other on Zoom. If anybody who have any problems then we talk about the problem where we see we were trying to resolve it. Some days that we did not have much to do we were just talking about food. And it was amazing! And then we would talk like OK I've prepared this food and I use these ingredients. So the next week, the week after then people would say, oh, I did prepare that fully. Taste nice or we'll just talk about food. It's just because I felt like it brings joy. To people's you know, so we wanted to do it with that without that continue doing this and there was some people would show us how they cook. You know they prepare their meal. So it was amazing.
Mehari	Our organization provides a very, very important and crucial space for people to come and hang out. And you see people saying hello to each other, staying positive, supporting each other and using the Wi-Fi for example to connect and say hello to their loved ones in different countries. So you also see happy faces when people come and say hello to our organisation.
Mary	Oh, I've had my moments of joy when I had my baby during lockdown, which is a moment of joy. Another thing that I loved most was clapping for NHS right? Because in our community we were going out in the street and just seeing the neighbours, and waving at each other was amazing. And then my community, we had a group called a Jingle Bells whereby on Christmas Eve we went out. The whole street and rang this bell when it became Christmas.
Kefilwe	Yeah, I think it's for me like for example, the progress that I've been like making lately with my mental health. That is giving me joy. I'm listening to music. Sometimes I take like walks like really, really far for example, whether be like sort of countryside and I love walking in places like that. I find it refreshing so sometimes I do that, that gives me joy.
Thandiwe	I live with my mother, so the fact I really appreciate that. I had my mom and siblings in one house. Other people were quarantined. I mean for how many months now in separate households? You know we haven't seen your parents and people being able to hug each other and just be around each other.

Conclusion

The COVID-19 pandemic surfaced and shone a light to health, socio-economic and other inequalities on a regional, national and global scale. It is clear that with or without local or national support from authorities, migrant communities stuck between a rock and a hard place, have come together to build a sense of solidarity and mutual support before, during and after the pandemic.

It is also clear how resilient, imaginative and creative the communities were despite having to navigate and manoeuvre legislations, laws and policies heavily compounded, reinforced and reproduced by institutional racism such as the hostile environment. This report visibilised the collision of a pandemic and legacies of colonialism confined within unjust and inequitable systems that continue to dictate rights and entitlements under the guise of borders and birthplaces. This report also highlighted the positivity and joyousness that have also emerged out of tense and scary situations.

Communities that are problematised or given 'hard to reach' status are not often consulted on what the solutions are or when consulted, they are not listened to or acted upon. This report offers equitable solutions that readjust imbalances and injustices. We have set a number of recommendations for local and national authorities to pursue. We are not saying anything new that has not been said before. On the contrary, we want to pay our respect and honour those that came before us and who will be here long after we are gone. We must continue to push for radical change that offers alternative forms of living as a community. Today they come for us but tomorrow for you. We need to envision alternative forms of love and community care in which the voices of the marginalised are centred, cherished and uplifted.



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