

**Written evidence submitted by Asylum Matters, Detention Action, Doctors of the World UK, Freedom From Torture, The No Accommodation Network, Refugee Action, Refugee Council, Scottish Refugee Council, UK Lesbian & Gay Immigration Group (COR0016)**

**1. Executive Summary**

- People in the asylum system are among those in our society most at risk of suffering due to the many consequences of the Covid-19 pandemic. This is the result of the trauma and vulnerability which led them to claim asylum in the UK; compounded by the isolation and deprivation directly caused by a frequently dysfunctional and inadequate asylum system.
- Urgent action and clear communication is required from the Government, and the Home Office as the lead department, to adapt the asylum system to serve public health requirements and the needs of people within it.
- People seeking asylum are entirely dependent on the support of statutory authorities. They are forced to live on minimal financial support and in frequently unsuitable accommodation. Others are barred from accessing statutory services. This frequently results in destitution, and we have serious concerns about people's ability to ensure their own and their families' wellbeing within the current arrangements during the Covid-19 pandemic.
- The system for determining claims of protection, already subject to lengthy and growing delays, will need to adapt rapidly to ensure people remain able to seek asylum and that decisions are taken in a way which addresses both public health and individuals' needs and safety.
- People who are newly granted refugee status also frequently experience destitution due to systemic failures in the transition from asylum support to mainstream benefits. The present context significantly increases the risks of increased levels of destitution.
- This public health emergency also means the Home Office will need to rapidly change its communications and requirements of those in the asylum system to ensure people can access the information and support they require, with a particular focus on the most vulnerable.
- Nine organisations working with people in the asylum system and those with No Recourse to Public Funds have jointly submitted a briefing to the Home Affairs Select Committee's inquiry. These organisations are: Asylum Matters, Detention Action, Doctors of the World UK, Freedom From Torture, NACCOM, Refugee Action, Refugee Council, Scottish Refugee Council and UKLGIG.
- We recognise that we are operating in a fast-moving environment, with the Government announcing important changes to policy and practice on a daily basis. Our recommendations speak to the situation at the time of writing, but may evolve over time.
- We set out a number of recommendations which we believe the Government must urgently address in order to safeguard public health and ensure people in the asylum system and those with NRPF are safe, supported and their wellbeing and immigration status are not adversely impacted during the pandemic.

**About this briefing**

2. In the context of the Covid-19 health emergency, the following organisations working with people in the asylum system have come together to submit evidence and recommendations on how to continue to support vulnerable people in the asylum system and refugees, and to minimise risks around the spread of the virus in line with UK Government guidance:
- Asylum Matters
  - Detention Action
  - Doctors of the World UK
  - Freedom From Torture
  - The No Accommodation Network (NACCOM)
  - Refugee Action
  - Refugee Council
  - Scottish Refugee Council
  - UK Lesbian & Gay Immigration Group (UKLGIG)

3. The briefing contains an overview of key issues and recommendations on how to support refugees and those in the asylum system and people with NRPF status. A concerted cross-departmental approach led by the Home Office is needed to ensure these are immediately implemented.

### **Overview and context**

4. People seeking asylum are fleeing war and persecution. Yet the system they rely on all too often fails them, leaving them without support and in some cases facing destitution, even for those granted refugee status. In the current health emergency around Covid-19 people in the UK asylum system are facing additional risks and challenges and are more vulnerable than ever. It is vital that measures are implemented to protect and support people who by law are completely reliant on the support of statutory authorities or barred from any statutory services.
5. These risks include:
  - Physical health – potentially fatal impacts of Covid-19 for those with underlying health conditions or with barriers to accessing medical treatment, which is the case for many people seeking protection in the UK;
  - Destitution and poverty, especially among people who are NRPF or in need of asylum support and are at risk of homelessness meaning they face a higher chance of contracting Covid-19 and therefore undermining the public health response;
  - A compromised asylum determination system which cannot guarantee that a refusal of protection is safe or sustainable and risks subjecting people to greater or prolonged vulnerability;
  - Social isolation;
  - Mental health issues;
  - Hate crime
6. Whilst the Home Office have taken welcome steps over the last 10 days to amend elements of policy and practice in response to the public health risks associated with Covid-19, these steps appear to have been taken in response to concerns put forward by NGOs rather than the result of a robust contingency plan being systematically put into place. It remains unclear as to what contingency plans the Home Office had in place prior to the outbreak of Covid-19 to deal with a public health crisis on this scale.
7. Looking ahead, it is clear the Home Office must adapt the asylum system to service urgent wider public health needs. Key to this will be close liaison with the full range of UK public health bodies, reflecting the policy and sometimes legislative devolution of health in many areas of the UK.

### **8. Key issues**

#### ***Access to the asylum process***

9. Prior to the Covid-19 outbreak, the only way to claim asylum in the UK was to do so immediately upon arriving in the UK at the port of entry, or to present to the Asylum Screening Unit in Croydon to make an 'in-country' application. The travel restrictions and self-isolation instructions put in place as a result of the pandemic has meant that some screening interviews have been cancelled. We are unlikely to have many new asylum arrivals in the UK during the pandemic, but there must remain a mechanism for registering an asylum claim so that people in need of international protection can exercise the rights to which they are entitled.
10. This situation has underlined the need to provide alternative ways to make a claim for asylum, aside from a single point of access that requires physical attendance. The Home Office has committed to establish a process by which asylum claims can be registered with as limited contact and travel as possible but has yet to communicate how people will be able to access the asylum system given the current lockdown, which suggests a lack of effective contingency planning to deal with a situation where the single point of access is not accessible.

### ***Asylum applications and decision making***

11. People awaiting a decision on their asylum claim are often left for many months without a decision. In 2019 56% (22, 549) of the 43,632 main applicants waiting for an initial decision on their asylum application had been waiting over six months. Most people who are awaiting a decision are surviving on a very low income, paid in the form of asylum support (£5.39 a day), and are already at risk of isolation and physical and mental health problems.
12. In an update circulated on 18 March 2020, the Home Office confirmed that they are temporarily suspending face-to-face substantive asylum interviews, all of which have been cancelled from 19 March. While we fully appreciate and support the reasons for this, suspension of face-to-face interviews will nonetheless inevitably slow down decision making, increasing anxiety for many already vulnerable people awaiting a decision on their asylum applications. Digital, phone and post options are being explored with some offices already able to undertake digital interviews. This will not always be appropriate for many of the most vulnerable applicants; but where such alternative channels are appropriate and make it possible and safe for substantive interviews to take place, it is essential that grants of protection continue to be made during the health crisis, both to alleviate the uncertainty and strain for those awaiting a decision and to avoid a backlog in the system in the future.
13. However, it is also important to recognise that every decision (positive or negative) potentially creates new homelessness due to the end of accommodation provision and asylum support payments; and that these challenges must be addressed alongside a determination to continue wherever possible to progress decision making on asylum applications.
14. The Home Office should also bear in mind that many people will not be able to get legal representation at this time or communicate with their lawyers. This will have an effect on the evidence that they can submit and the ability to meet deadlines. The reduction in function of legal services will make accessing advice and representation extremely difficult, even when individuals have grounds to appeal. Exercising the right to appeal and judicial review is now heavily dependent on technology to which not all appellants or representatives have access. Under these circumstances, a refusal of asylum is unsafe.
15. The Home Office has been criticised in the past for failing to apply the correct standard of proof in their decision making, including in the Windrush Lessons Learned Review published last week. Now, more than ever, the Home Office must apply the correct standard of proof (reasonable degree of likelihood) to asylum decision making to ensure that cases can flow through the system and protection can be granted promptly to all those who need it.
16. For people who have received negative decisions, the increasing closure of borders globally will result in there being no viable routes of return during the Covid-19 outbreak. Even if they are not immediately removable, a refusal of asylum leaves someone extremely vulnerable in terms of their mental health, their access to support, accommodation and healthcare, and the risk of immediate removal once borders are open.

### ***Asylum support and accommodation***

17. A well-functioning asylum support and accommodation system should be safe and accessible, in a way which is consistent with public health efforts to minimise exposure to Covid-19 as well as securing people's essential living needs.
18. The government relies on external companies to run asylum support and accommodation services. This is done mostly through two main contracts:
19. Advice, Issue Reporting and Eligibility (AIRE). This contract focuses on providing advice and guidance to service users on the asylum process, their rights and the support available to them. It is also meant to be a single point of contact, independent from accommodation providers and the

Home Office, to report issues related to housing. Migrant Help was awarded the AIRE contract in January 2019;

20. Asylum Accommodation and Support Services Contact (AASC). This is a new generation of seven contracts covering asylum accommodation provision.
21. The transition of contracts led to many severe problems, including around delays in asylum support application processing, payments and accommodation supply.
22. In the context of Covid-19 pandemic, issues with asylum support and asylum accommodation create specific risks for people who depend on them.

#### *Access to asylum support*

23. Asylum support is the basic financial support granted to people in the asylum system (£37.75 per week for those on Section 95 and £36.95 for those on Section 4) and accommodation. Delays in processing support claims are still widespread. Data gathered by Refugee Action services on 259 asylum support applications between 1 July 2019 and 31 January 2020 showed the average wait for an initial decision by UKVI across all types of support was 20 days. People outside of standard Home Office systems, for example those sofa surfing and not in initial accommodation, are at particular risk of delays as their claims are already commonly dealt with less efficiently. Despite the current health emergency, support applications and cases are ongoing with pre-action protocols still being required.
24. Infrastructure at the Home Office and its contracted partners, as well as support which voluntary sector organisations can provide, is being heavily impacted by Covid-19. Delays and refusals on support decisions are therefore an increasing risk.

#### *Asylum support levels*

25. The already substantial challenges of subsisting on £37.75 or £36.95 a week are exacerbated in the current crisis. ASPEN cards are only uploaded with subsistence support weekly, meaning this small allowance makes it very difficult for people in the asylum system to bulk buy food and other essentials or shop around for cheaper deals. Additionally, shared dispersal accommodation provides limited kitchen and freezer space for each occupant, making storing essentials difficult.
26. Although the majority of asylum dispersal is in urban areas, some people seeking asylum may also be accommodated a significant distance away from large supermarkets and local shops. As the ASPEN card does not allow online purchases, people seeking asylum will not be able to order deliveries online, and those in receipt of Section 4 (cashless support) experience further limitations as to how and where they spend their weekly allowance.
27. Considering the closure of all schools across the UK, it is important to also recognise the significant impact this will have on families living on asylum support. Families are unlikely to have sufficient resources - access to the internet, digital devices, computers - to support children to engage in digital learning environments and continue their studies. The most recent methodology for calculating asylum support rates (2017) does not fairly reflect the current living situation for people seeking asylum and their families across the UK.
28. In summary, it will be very difficult for people seeking asylum to ensure they have sufficient food and essentials for themselves and their families if they were required to self-isolate.
29. On 20 March, the Chancellor confirmed that Universal Credit will be increased by £20 a week for 12 months to protect the most vulnerable and “strengthen the safety net” during the Covid-19 pandemic. It is imperative that the safety net for people in the asylum process - in this case Section 95 and Section 4 support - is equally strengthened.

#### *Right to work*

30. Current government rules mean that people seeking asylum can only apply for permission to work after they have been waiting for 12 months for a decision on their asylum claim; and then, only for jobs in the Government's narrow and restrictive Shortage Occupation List (SOL). This means that people seeking asylum in the UK are effectively banned from working. While many people seeking asylum would be unable to work during the current pandemic and require the minimal safeguards which the asylum support and accommodation systems allow, equally there are many who could work and would want to work, including in contributing to the national effort to tackle Covid-19.
31. The current rules have a well-documented severely adverse impact on people's mental and physical wellbeing, and on their ability to integrate once granted status; rather than allowing people to use their skills to support their families and contribute to the UK economy and society.
32. We believe that, during the current pandemic and beyond, people seeking asylum in the UK should have the right to work after waiting six months for a decision on their asylum application, unconstrained by the SOL.

#### *Asylum support and destitution*

33. People on S95 and S4 support who are evicted from asylum accommodation at the end of the move-on period or if their asylum claim is refused will become destitute and be at increased risk of contracting Covid-19. Creation of new homelessness is avoidable and controllable through ensuring that everyone receives adequate levels of financial support, evictions from all accommodation are suspended (as we understand is already the case in some areas), the waiting time for Universal Credit is cut and the move-on period for new refugees is extended.
34. An emergency situation requires an extraordinary response – no-one should be in insecure accommodation or be worried about where their next meal is coming from. The energies of voluntary organisations must not be spent on challenging delays and incorrect refusals of asylum support. A less prohibitive and unreasonable evidentiary burden is necessary to test if someone is destitute or cannot rely on the goodwill of extended family and friends. If someone applies for support they should receive it and no-one should be left destitute.

#### *Initial accommodation and use of hotels*

35. There are significant public health concerns about the conditions within initial accommodation, in particular as people seeking asylum are now likely to have to remain in initial accommodation for longer due to delays exacerbated by the crisis. Practices such as bedroom sharing between unrelated adults, communal eating facilities and crowded social spaces make social distancing difficult, and self-isolation almost impossible. One organisation has been contacted by someone in shared asylum accommodation with a housemate with Covid-19 symptoms (a cough), and was refusing to self-isolate and follow handwashing procedures.
36. Many of the concerns around initial accommodation also apply to hotel provision within the asylum estate. As a result of issues with the transition to new accommodation providers, large numbers of people remain in hotels across England and Wales. Hotels often lack adequate sanitation and can be overcrowded and without any kind of support service. Children have no space to play or to receive home education. Meals are often eaten in crowded shared spaces. Likewise, in hotels where meals are not provided, it may be extremely difficult for people to self-isolate where rooms are not self-contained, and they may not have sufficient financial resources to stock up on food and other essentials.
37. The Home Office has guaranteed it will send out detailed information on additional support measures, including medical assessments for people in hotels within the next few days.
38. In the Covid-19 health emergency people in hotels are at huge risk of contracting the virus and may face barriers to accessing medical care. The virus is likely to spread under such conditions. (Doctors of the World UK's separate submission to this inquiry provides more details on this)

39. We appreciate that it is vastly preferable for people to be accommodated – whether in hotels or in initial accommodation – than to be street homeless. Nonetheless, it's essential during a public health emergency that time spent in this accommodation is as limited a time as possible; and that every effort is made to ensure these suboptimal forms of accommodation are as safe as possible for people during their stay.
40. Therefore, the Home Office need to urgently put in place plans to ensure there is sufficient capability to self-isolate in a safe manner, with an appropriate level of support from staff to help ensure access to health services and translated materials are readily available to help inform people of the rapidly changing Covid-19 guidance and public health protection measures.
41. Furthermore, hotels are sites with a high concentration of people visibly from other cultures housed in one place. In the Covid-19 context of potential scarcity of resources and public anxiety about the spread of the disease, hate crime is real risk.
42. As part of the public health response to Covid-19, we believe people should be released from immigration detention. However, we are concerned that this could result in more people being accommodated in hotels, and extremely concerned that some people have been released from detention onto the street. People should be supported into appropriate accommodation upon release and connected with services.

#### *Dispersal accommodation*

43. There are also significant concerns around conditions in dispersal accommodation in the asylum estate. It is very difficult for residents to self-isolate or even practice social distancing in houses of multiple occupation with shared facilities and, in some cases, shared bedrooms between unrelated single adults. There are concerns about the support that will be available to single parents and disabled or vulnerable residents should they fall ill. It is also unclear what assessment has been made across the population of people seeking asylum as to whether any individuals are classed as highly vulnerable and should be 'shielding.'
44. The Home Office is responsible for ensuring it accommodates the specific needs of individuals with additional vulnerabilities. This includes minors, unaccompanied minors, people with disabilities, elderly people, pregnant women, single parents with children and people who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence. With the onset of Covid-19, and the potential for significant pressure on asylum accommodation, the Home Office must ensure that it continues to meet the additional needs of vulnerable people, and if necessary, find additional accommodation which is suitable, accessible and safe.
45. In addition, the Home Office should ensure vulnerable individuals can access the specialist support services that they require to facilitate their recovery and rehabilitation. In some instances, it may be appropriate to deliver this remotely, however this will not always be the case and the Home Office should ensure that individuals' access to essential services and support networks is not hindered by their accommodation.

#### *ASPEN*

46. All people granted financial asylum support are issued with a prepaid card, currently called an ASPEN card. Although someone may be officially granted asylum support, they will not actually receive any money until they receive a loaded ASPEN card and have their asylum reference number in order to activate it. Sodexo has been the Home Office's supplier of asylum support payment services since 2000.
47. During the transition period between AIRE and ASAC contracts, organisations across the country reported a significant increase in the cases of ASPEN cards being delayed for weeks or even months, cards arriving without money pre-loaded and, in the worst cases, people being dispersed and left in new and entirely unfamiliar locations without cards, including hotels sometimes far away from any support networks.

48. During the Covid-19 pandemic, these ongoing issues with ASPEN place people in the asylum system at risk of destitution and could have negative impacts for health.

***The move-on period and risks to public health measures***

49. Key policy changes are needed around the move-on period for people leaving the asylum system to support emergency public health measures. Currently those who have received refugee status are still being given 28 days' notice for their asylum accommodation and financial support to end. At the same time, people who have received a refusal on their claim are also receiving notice to quit accommodation and an end to any financial support they were receiving.
50. We have received reports from local partners in the North East and in Yorkshire and Humber of accommodation providers stating that some residents may be allowed to remain in asylum accommodation for longer than the 28-day move-on period if they are showing symptoms or it is otherwise deemed appropriate. At time of writing, this information had not been spread widely or publicly across the regions or directly from the Home Office. Additionally, the onus is on the individual to apply for this support and there has been no direct communication on this issue with residents. The lack of communication on this issue with residents and support services is concerning, resulting in clients being unaware of the option to extend support and accommodation. Furthermore, a 28-day extension is not in line with government expectations that the crisis will last for at least 12 weeks.
51. Despite some reports of this provision, the people we work with are still receiving Notice to Quit letters and are anticipating that they will have to leave asylum accommodation. This lack of clarity runs the risk of people being evicted from asylum accommodation into street homelessness or having no other option other than to stay with friends, going against government instructions. There is also a risk that some people will 'overstay' in asylum accommodation but will stop receiving financial support from the Home Office.
52. The government has acknowledged that it has a duty to ensure people are healthy and have enough to support themselves. It is crucial that no-one is made destitute in the midst of a public health pandemic. We maintain that there should be an immediate halt to all evictions from asylum accommodation, both for those granted refugee protection and those receiving a refusal. Any support (Section 95, Section 4 or Schedule 10) that people are currently receiving should automatically continue for the duration of the lockdown period, regardless of any decision that is made on their case.
53. Alongside the public health dangers of requiring people to move location during the lockdown period, evidence from the sector shows that existing barriers would make securing alternative financial support and accommodation almost impossible during this time.
54. Nearly all people who are new refugees in the UK already experience a period of destitution after they have been granted status, as asylum support ends 28 days on from a positive decision, whilst the first payment of Universal Credit is not made for at least 35 days. This destitution gap will grow in the current climate as people will struggle to access advice services due to closure and to make face-to-face appointments with the job centre. The Minister for Work and Pensions confirmed to the Work and Pensions select committee on 25 March that 105,000 claims for Universal Credit were registered on Tuesday 24 March alone, whilst the queue to access the telephone helpline was unprecedented with reports of 76,268 people waiting for advice. Existing research already shows that people who are new refugees struggle to access services because of language barriers and a lack of translated information.
55. We recognise that there is potential that this short-term emergency state could go on for some time and we urge that any measures brought in now make provision for development as the situation changes.

56. This crisis provides an opportunity for government departments to work more closely together to enable a more streamlined system of move-on. Some of the measures developed in response to Covid-19 have been relatively swift and quickly delivered, demonstrating that departments can work together as we have asked them to do to support refugees. The Home Office could provide information to fast track welfare benefits applications, avoiding the need for duplication of information about a refugee's identity, address and financial circumstances, all of which currently contribute to delays in support. This would also reduce the risk of refugees continuing on asylum support and receiving far less than they are entitled to on Universal Credit.
57. We accept that it will be difficult for newly granted refugees to apply for Universal Credit in the current context. However, if a newly granted refugee successfully applies for Universal Credit or other mainstream benefits whilst in receipt of asylum support, measures should be put in place so that asylum support does not terminate until the first Universal Credit payment is received by the applicant. Additionally, provisions must be put in place to allow newly granted refugees in receipt of Universal Credit to remain in their asylum accommodation.

### ***Communication, data and outreach***

58. The current situation means that many face difficulties receiving post (this includes people in the asylum system and voluntary organisations who support them). This means people in the asylum system may not receive essential correspondence which could impact the long-term outcome of their case or leave them without essential information about their situation.
59. Care must be taken so that all such correspondence is promptly served both to applicants and to their lawyers. For those who are unrepresented, the Home Office should make contact where possible with applicants by phone or electronic means in order to confirm the most suitable way of serving them decisions and related correspondence. If safeguards are not put in place, applicants may miss key decisions and the relevant deadlines to potentially challenge them by way of appeal or judicial review.

### ***Access to phones, internet and television***

60. People seeking asylum will not necessarily have wifi in their asylum accommodation, nor will they necessarily have access to a TV, computer or smart phone. Many will have relied on digital facilities in local libraries, community hubs and voluntary groups. Not only does this pose a problem for individuals keeping up to date with the Covid-19 pandemic and accessing relevant information, it will further isolate people seeking asylum from valuable support networks here in the UK and further afield. It is known that people seeking asylum are likely to suffer disproportionately from poor mental health and social isolation; having limited access to digital networks may exacerbate this situation.

### ***Loss of face-to-face support and outreach services***

61. For many people seeking asylum, face-to-face support and outreach services are essential services which provide social interaction and critical advocacy interventions. As many struggle to use digital forms of communication - either over the phone or on webchat functions - the loss of face-to-face support could mean that important needs are left unmet.

### ***Home Office communications***

62. Whilst we accept that this is a fast-moving, unprecedented crisis which has put the Government and its providers under significant strain, it is critical that the Home Office and its contractors commit to sharing regular updates and information with all stakeholders on the impact Covid-19 is having on service provision.
63. Whilst we welcome the changes the Home Office have already put in place, the communication of these changes to the voluntary sector has been inconsistent. By contrast we have received regular

official updates from the DWP on changes to the welfare benefits system. Currently, there is little to no information from the Home Office communicating the key changes to asylum policy in response to Covid-19 on the government website. The Home Office need to address this to ensure an effective communications plan is in place going forward.

### ***Mental health and safeguarding***

64. We know from our services and from research that people in the asylum system are at greater risk of social isolation and mental health issues than many other groups. This is often due to language barriers and, for many, existing mental health conditions due to torture or trauma experienced in their home country, or conditions which have been brought on/exacerbated by their experiences in the asylum system in the UK, such as depression and anxiety. Among the groups particularly at risk are LGBTQI+ people, since many do not have family members or diaspora networks to rely on.
65. The Covid-19 health emergency presents additional risks around this, not least due to the reduction or closure of specialist support and advice services, and it is vital that additional support is put in place to ensure people in the asylum system are in contact with what services remain to support them.
66. The Covid-19 context leaves groups with additional vulnerabilities, including children and those living in situations of abuse or domestic violence at additional risk. Support services for children and families and schools are largely now closed or running very reduced services, and as such additional pressure will be placed on families in the asylum system.
67. Risks are also increased for those living in situations of abuse, including domestic abuse or harassment at the hands of fellow residents in asylum accommodation, as the need for isolation and social-distancing may require them to remain in unsafe living conditions. If the lockdown measures increase, this risk will be magnified further.

### ***No Recourse to Public Funds (NRPF)***

68. Many of the people we work with are unable to access healthcare or housing because of NRPF conditions. This includes people who are appeals rights exhausted, EU and EEA migrants, people with existing visas and those whose status is not regularised. Further, many have underlying health conditions that make them especially vulnerable to Covid-19. There is evidence that women—particularly single mothers with sole responsibility for childcare—pregnant women, and disabled people are disproportionately subject to NRPF conditions.
69. Preventing people from accessing public funds and services is contradictory to all public health measures and endangers individuals and wider society. Coordinated cross-departmental work is needed from the DWP, MHCLG, the Home Office and the Department for Health and Social Care to ensure that people who are currently subject to NRPF can access housing, financial support and healthcare. Local authorities are already utilising the powers available to them to support people who are NRPF. Middlesbrough Council, for example, has utilised the Severe Weather Emergency Protocol (SWEP), however whilst they can accommodate people under the SWEP the council cannot lift NRPF conditions. As a result, local charities are having to provide financial support to people accommodated through the SWEP.
70. The first step towards enabling good cross-departmental work is a decision from the Home Office to suspend NRPF conditions for a minimum of 12 weeks or until the Covid-19 crisis is over.

**71. Recommendations**

The nine organisations involved in this joint briefing have a significant number of recommendations for the Government, which reflect the scale of this public health emergency and its impact on people in the asylum system; and the fact that the pandemic compounds and exacerbates problems within an already frequently dysfunctional and inadequate system.

During the Covid-19 health crisis, we believe the Government must take the following steps:

**72. *Asylum applications and decision making***

- Immediately put in place measures to allow people to make an in-country- claim for asylum without needing to attend the Asylum Screening Unit in Croydon in person.
- Where appropriate and possible, maintain substantive asylum interviews through non-face-to-face channels.
- Distribute information regarding asylum application and decision - both to applicants and to their lawyers - in a clear, understandable and timely way (and not just by post), especially to those whose interviews have been cancelled.
- Relieve applicants from submitting Preliminary Information Questionnaires during the Covid-19 crisis period.
- Apply the correct legal standard of proof (reasonable degree of likelihood) and the benefit of the doubt, and grant cases, including on the papers, from the existing caseload including initial and fresh claims.
- Cases pending an appeal hearing should be actively reviewed and both the appellant and their legal representative should be consulted to check if fresh evidence is available.
- If a decision maker is minded to refuse they should make every effort to communicate with the legal representative in advance of the decision and, if this is not possible or it becomes clear that evidence cannot be submitted within usual timeframes because of the Covid-19 crisis, suspend the decision.
- Release everyone detained under immigration powers. Reporting by phone or similar means could be considered instead. Released detainees should be accommodated in suitable, safe accommodation which allows for self-isolation and access to essential services regardless of immigration status. People with no means to provide for themselves should be provided with financial support.
- Cease all deportations, and removals under the Dublin Regulation.

**73. *Asylum support and accommodation***

- All evictions from Home Office asylum accommodation should cease for the duration of the Covid-19 emergency period, in line with Government policy on private and social landlord evictions.
- Grant all applications for asylum support during the exceptional Covid-19 crisis period and ensure everyone in need of support is housed in Home Office accommodation. Requirements for evidence or other potential barriers to applications should be minimal and support must be granted swiftly.
- Asylum support levels should be increased in line with mainstream income support levels (both section 95 and section 4). Section 4 support should be paid in cash.
- Urgently step up efforts to ensure that people in the asylum system promptly receive functioning ASPEN payment cards. Additional supplies of food and other essentials should be distributed to ensure those who experience delays or issues with APEN cards are supported.
- Minimise the number of people required to live for lengthy periods in hotels and in initial accommodation; and put in place overdue measures for people in these forms of accommodation to ensure there are contact points; and that issues with accommodation, payment cards or health are actioned promptly.
- Accommodation providers must urgently put in place measures to allow for greater social distancing, including securing more accommodation; ending the practice of enforced bedroom

sharing between unrelated adults; ensure people have access to soap and disinfectants; and establish clear protocols to allow for people in asylum accommodation to self-isolate where necessary.

- Provide the right to work for people who have been waiting more than six months for a decision on their asylum application, unconstrained by the Shortage Occupation List.

#### **74. *Move-on***

- Anyone already receiving Section 4, Section 95 or Schedule 10 support should continue to receive this, regardless of any decisions made on their case.
- These changes should be applied automatically and without the need for individual application for extension of support.
- If this crisis period continues there will be a need for cross-departmental work between the DWP and the Home Office to ensure that people can begin to transition safely to mainstream benefits without being at risk of homelessness or poverty.

#### **75. *Healthcare***

- Suspend all NHS charges and immigration status checks in NHS hospitals
- Provide assurances that patient data will not be shared with the Home Office for immigration decision making and enforcement. Launch an information drive to inform the public and NHS staff of these changes.
- Provide essential care packages for those who become unwell and need to self-isolate.

#### **76. *Safeguarding***

- Introduce additional support services and safeguarding checks to support children and families in the asylum system, including visits to accommodation by support services; care packages with additional food and other essentials; activities and educational materials for children; and mental health support.
- Ensure people in situations of risk, including those facing domestic or other forms of abuse, are offered safe accommodation where they would be able to self-isolate, and not forced into destitution or to remain in situations of abuse.
- Ensure that people with additional vulnerabilities, including people with a disability, survivors of torture or trauma and LGBTQI+ are housed in suitable, accessible and safe accommodation, with support to access specialist health and mental health services.

#### **77. *Communication***

- In all cases where people have internet access and email, shift all communication needs to email. Where people are required to sign hard copies, electronic or alternative remote processes should be enabled; and/or a voluntary sector organisation should be permitted to sign on the clients' behalf.
- Translate NHS Covid-19 guidance into the languages most commonly spoken by those seeking asylum and survivors of trafficking.
- Urgently communicate - to people in the asylum system and to the voluntary sector – the Home Office and its providers' plans for responding to the crisis and ensuring people in the asylum system get the support they need.

#### **78. *NRPF***

- Remove barriers to accessing public funds and services that people face due to their immigration status, enabling everyone to access mainstream benefits if needed.
- Ensure people who are Appeal Rights Exhausted but unable to return home are able to receive Section 4 support.

(COR0016)

March 2020