



'ASYLUM SEEKER' AND 'REFUGEE': DEFINITIONS

An **asylum seeker** is a person who has departed their country of origin and officially applied for asylum in another country, and who is awaiting a decision on their request for refugee status.

A **refugee** is someone who 'owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion, is outside the country of his nationality, and is unable to or, owing to such fear, is unwilling to avail himself of the protection of that country'.

An **undocumented migrant** may be someone who entered the UK legally but has lost their right of residence, or who entered the UK illegally and does not have the right of residence.

TRAUMA INFORMED & CULTURAL COMPETENCE

Many people will have experienced torture, the physical and psychological trauma of conflict, rape, domestic and sexual slavery, human trafficking, deprivation of liberty, and the disappearance or killing of loved ones. A 'cultural bereavement of exile' – the experience of loss of social structures, cultural values, community rituals, relationships, and material features - are often experienced by this vulnerable cohort.

Trauma is associated with the development of severe and enduring mental health disorders, chronic illness (e.g. diabetes, heart disease and cancer) and poor physical and mental health (e.g. suicide and high symptomatology) outcomes.

Trauma-informed organisations provide the culture to support staff to practice in a trauma-informed and culturally competent way, and recognise staff vicarious trauma, especially in the heat of a pandemic response.

HEALTH NEEDS OF REFUGEES AND ASYLUM SEEKERS

Refugees and people seeking asylum can have complex health needs. These may be the result of traumatic or adverse experiences prior to leaving their home country, during transit or after arrival in the UK. Poverty, poor housing and support, negative stereotypes, uncertainty and fear are often factors that negatively further impact on health whilst in the UK. Trauma-informed and person-centred care is therefore essential to support people during this process.

Common health challenges include:

- Mental health
- Maternal and child health
- Unaccompanied children (UASC)
- Malnourishment
- Untreated communicable diseases
- Poorly controlled chronic conditions

FREE ACCESS TO PRIMARY CARE

All people seeking asylum and who have refugee status are entitled to all healthcare provided by the NHS. Economic and undocumented migrants have fewer entitlements and are often referred to as having 'no recourse to public funds'.

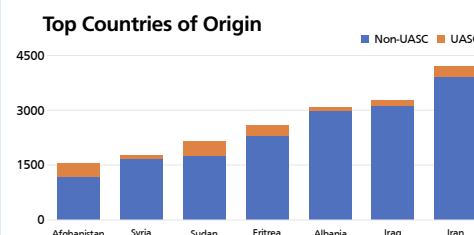
However, everyone, regardless of immigration status, has the right to access free primary care, including a GP, urgent care centres, and walk-in centres. NHS 111 is also free to all. People do not have to provide proof of ID or address to register with a GP, and families registering with GPs do not have to state their immigration status.

Government guidance on registration can be found [here](#). Doctors of the World have created [this useful toolkit](#), which supports GP surgeries to ensure everyone in their community can access the healthcare they're entitled to.

ASYLUM APPLICATIONS IN THE UK

There were 36,041 asylum applications in the UK in the year ending December 2020.

Within this number, 2,291 were unaccompanied asylum seeking-children.



WHERE TO FIND OUT MORE

The British Medical Association has produced this useful toolkit for [Refugee and Asylum Seeker Patient Health](#). It examines health needs specific to refugees and asylum seekers, and suggests ways in which health care practitioners can overcome common barriers to their care.

The Government paper [How many people do we grant asylum protection to?](#) provides detailed statistics on rates of asylum applications, protection and resettlement, broken down by country of origin.