

Mental health and the asylum process

Recommendations for Migrant Charities

My PhD tried to understand what affects people's mental health during the asylum process. I had the privilege of working with over ten different migrant organisations during this research and am eternally grateful for the insight, experience and recruitment assistance they provided. As a small step to repay their efforts, I have produced this summary of research recommendations.

My PhD consisted of three studies:

1. Summarising findings from almost 50 studies on mental health risk factors (e.g. unhygienic accommodation, unemployment) during the asylum process.
2. Working with three Iranian and Afghan organisations on mental health projects to understand how to work with migrants in a beneficial, non-exploitative way.
3. Interviewing people who had sought asylum, those who worked with them on migration or mental health issues, and Iranian and Afghan community members, on their experiences and opinions of the asylum process.

I go through each recommendation below and summarise the supporting evidence. If any part of these recommendations and findings are relevant to your charity I can:

- present findings in more detail to your staff, volunteers and service users;
- work with you to implement some of the recommendations;
- advise on using my thesis as evidence to support your work.

Recommendation 1: Use migration labels that reflect the lived experience of charity clients, service users and visitors

Legal terms such as 'asylum seeker' and 'refugee' can replicate rights-denying and divisive Home Office language. Moreover, many Iranians and Afghans I spoke to did not wish to be defined using these labels. I recommend that charities move beyond these legal definitions and group people according to: 1) how difficult it is for them to obtain permanent status and security; and 2) how supportive post-migration conditions are for their integration and inclusion. This is called the 'sanctuary seeker' framework. Under this framework, a Northern Pakistani seeking asylum may be grouped with an Afghan Pashto putting in a fresh claim. Even though they exist in different legal categories, their likelihood of obtaining status and the cultural barriers they face may be very similar. Though this framework can provide an initial basis for charities, charities should use it to help their populations self-define.

Home Office asylum policy functions on premise that it has the power to decide whether someone can build a life in the UK or not. The sanctuary seeker framework can undermine

this. It suggests that though difficult, it might be possible to find safety, inclusion and sanctuary regardless of status. Adopting this framework could centre attention on community solutions more in tune with people's lived experience. For instance, in terms of inclusion and integration while applying for status, charities could support access to volunteering opportunities or black market labour. Equally, in terms of easing the process of gaining permanent status, charities could run workshops on the curation of asylum cases to match Home Office criteria, or create room sharing arrangements in asylum seeker support accommodation.

Recommendations 2 and 3: Provide people opportunities to counter negative perceptions, and to shape their local environment to reflect their identity and histories

Participants reported experiences of invisibility, societal marginalisation and infantilisation during Home Office interactions, and the negative effect of discrimination on asylum seeker mental health was a key finding. This was compounded by a perceived parasitic framing in the media and wider society. Charities should provide platforms and mediums for sanctuary seekers to counter negative public perceptions. Self-organised and charity-supported networks (e.g., [Survivors Speak Out](#) and [Freed Voices](#)) may be useful in these reshaping endeavours, as is the burgeoning sanctuary seeker theatre scene (e.g., the [Borderline theatre](#) ensemble at PSYCHEdelight and [Phosphoros theatre](#)).

Sanctuary seekers should be supported in fundamentally reshaping the everyday and border enforcement spaces they exist in. For example, after Lewisham and Greenwich NHS Trust began [conducting background and credit checks on migrant patients](#) they thought may not be eligible for free care, school children in Lewisham [hand-delivered Christmas cards to their local hospital](#) asking for them to stop charging their migrant mothers. The children inserted their narrative and histories into a space that was discriminating against their mothers, in the process calling for structural change.

Recommendation 4: Design services and values in opposition to asylum process practices

Participants reported feeling attacked, threatened, disbelieved, and re-traumatised by the asylum interview and, resultantly, betrayed by the Home Office. After the interview, people entered a bureaucratic cycle characterised by a life-freezing and future-destroying waiting. Charity services may be at risk of replicating the most difficult aspects of the asylum process and my PhD recommends examining the structure of service provision to ensure that it is in opposition to the asylum process.

For instance, initial appointments should be reasonably short, trust building interactions with relatively few intrusive questions and interruptions. They should allow space for the client to lead the interaction and focus on their priority areas. Trauma-informed approaches may help ensure that services counter the negative mental health impacts of the asylum process. The [Helen Bamber Foundation's](#) interpretation of such an approach involves 'a mutual relationship of trust... [imparting a consistent sense of calm, security and safety... [increasing] the confidence of survivors and [minimising] the risk of causing distress and re-traumatisation' (p1).

Recommendation 5: Create more online social spaces

Qualitative interview findings demonstrated how participants had few stable physical spaces in which to feel safe and recover from difficult migration, and postmigration, experiences. Being housed in unhygienic and isolated accommodation, and forced dispersal was described as perpetuating feelings of instability, insecurity, and rootlessness. Accordingly, this PhD suggests that migrant organisations should create and support online spaces of safety. Refugee communities already gather through online social groups, for instance, I worked with many older Iranians who were part of a mass community Telegram group. Charities could support and grow such groups by providing people data, smartphones, and basic tutorials to overcome potential digital exclusion as well as forum moderation.

When describing the spaces in which they recuperated from migration stresses, only a few sanctuary seeking interview participants referred to charities and implied that they were safe, healing spaces. The interviews suggest that this could be because charities struggled to maintain a stable space, with organisations often being forced to move accommodation due to financial issues. It may also be linked to charities being orientated towards the provision of practical services (related to asylum claims, welfare, and language training) rather than providing an informal social space.

Recommendations 6 and 7: Provide more volunteering opportunities for sanctuary seekers, and mentoring opportunities for community members

Sanctuary seekers felt a sense of stagnation and deterioration during the asylum process. Amidst this, people had to proactively find purpose, fulfilment, and control in order to prevent or manage mental health problems. Participants were keen to engage in volunteering activities, particularly around supporting other migrants. Charities can support sanctuary seeker mental health by offering well-supervised, structured volunteering opportunities, that provide volunteer expenses.

Informally, established Iranians and Afghans used relevant personal and professional experience to advise people on the mental health challenges of the asylum process. Migration charities could create formalised programmes around mentoring and peer support. In the PhD, informal mentors and peer supporters received fulfilment, purpose, and social benefits from their role, and mentor-sanctuary seeker relationships were generally reciprocal. Many suggested that they were glad for the opportunity to produce positive outcomes from their negative migration experiences.

Though there are many excellent mentoring programmes run by charities such as the [Refugee Support Network](#), there are fewer reciprocal mentoring schemes. This thesis advocates for the creation of more projects such as the [Swati project in Scotland](#) where volunteers shared professional skills while receiving life lessons from refugees.

Recommendation 8: Provide people practical knowledge to navigate the asylum process

Charities should provide information on the asylum process around rates of acceptance based on nationality, and the importance of credibility in the interview. They should also translate the publicly available Home Office country guidance used by officials to make asylum decisions. [Right to Remain's asylum process toolkit](#) already provides some of this practical information. Similarly, applicants require information about how the chaotic and complicating asylum bureaucracy works in practice. Being provided with this information could help people prepare themselves mentally for a gruelling adversarial process, encourage them to be proactive in managing asylum process bureaucracy, and protect against feelings of desperation, shame, and being gaslighted. For example, The [Migration Policy Institute's](#) (2017) interactive graphic on acceptance rates by country and nationality could be usefully updated, translated, and shared with sanctuary seekers. Information on the practical realities and challenges of the asylum process could be delivered by peer supporters and community mentors.