



Refugee and Asylum Seeking Women: Challenges, changes, choices

Report of a conference organised by
the Refugee Council

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Aims and objectives of the conference

Women asylum seekers and refugees have many special needs, and the challenges they face are varied and complex. The conference aimed:

- to raise awareness of the barriers to protection faced by women seeking asylum and by women refugees;
- to identify challenges relating to safety, health, legal help, integration and other aspects of the women's lives;
- to demonstrate and develop practical examples in helping to solve and deal with these issues.

Each participant received a copy of the Refugee Council's new strategy document, *Making Women Visible: Strategies for a more woman-centred asylum and refugee support system*, written by Hildegard Dumper. This document was developed out of the Refugee Council's own self-analysis and strategy to improve its work with and for female refugees and asylum seekers and is designed to assist other organisations and agencies in their work.

The conference was chaired by **Anna Reisenberger**, Refugee Council Director of Development. Eight speakers provided information and raised critical national and international issues: **Heaven Crawley, Evan Ruth, Harriet Harman, Naaz Coker, Maeve Sherlock, Kate Allen, Claudia Hasanbegovic** and **Hildegard Dumper**. *The Corridor*, a film based on the experience of Iranian refugee **Zoe Neirizi**, was shown. Over 200 people from a wide range of voluntary and statutory organisations attended the conference and contributed their experience through questions to the speakers and in afternoon seminars.

Refugee Council welcomed such a prominent and diverse range of speakers and seminar facilitators. However, the views and opinions expressed by them in the conference were not necessarily those of the Refugee Council.

Presentations

Heaven Crawley, a researcher who established and ran a programme of research on asylum and migration issues in the Home Office, became Associate Director of the Institute for Public Policy Research, and then set up AMRE, an independent company specialising in research and analysis on asylum, migration, race and equalities. In her talk on **Engendering protection: women as asylum seekers in the UK** she described the challenges, outlined changes over the past decade and suggested ways forward.

Heaven Crawley said that women's experience of persecution was often different from that of men, yet this was not necessarily taken into account in asylum determination. Procedures might be based on the model of an asylum seeker as a young man engaged in fairly formal political activity against the state, and an assumption that political cultures in the countries of origin were the same as in Western Europe. Women's experience of harm often was left out when their political activity had taken the form of providing food and shelter, or taking messages. There was also a lack of recognition that gender identity itself (such as how she behaves, what she wears or who she associates with) might be a political issue. Western governments often considered sexual violence against women as 'personal' rather than within the public sphere, even when connected to political aims and even when there were implications for how a woman was treated in society following rape.

When a woman arrived in the UK with a man, it was often assumed that it was his persecution which was the subject of the application. She might not be asked about her own experience; or she might be asked only whether she was a member of a political party and if she answered 'no' there would be no further exploration. Even if more questions were asked, her credibility might be doubted – for example, if she didn't make eye contact because of cultural constraints or context.

However, there had been some encouraging developments. In 1991, UNHCR produced guidelines on treatment of women asylum seekers and refugees. The Refugee Women's Legal Group (RWLG) provided British guidance in 1998 (www.rwlg.org). The Immigration Appellate Authority's *Asylum Gender Guidelines*, published in 2000 (www.iaa.gov.uk/gender.pdf), was followed by Home Office guidance in 2004 (*see link from* www.rwlg.org). The Home Office had commissioned RWLG to provide training for caseworkers. Some Home Office asylum statistics were now available by gender. An evolving case law was showing recognition of gender issues. The government had taken action on female genital mutilation and trafficking.

Unfortunately, all this has taken place in a hostile context which had seriously undermined progress. There was continuing evidence that rape and women's political activity were still not considered important. Recent changes in support and legal aid were further marginalising women. Despite all the evidence showing that women needed time if they were to gain confidence enough to report rape and torture, in the new fast-track arrangements at Yarl's Wood women would have immigration and legal interviews on day 2 with decisions on day 3.

How then, could rhetoric be turned into reality? Heather Crawley said there was a need to work with the Home Office to improve the quality of country information and initial decision-making. But we also had to continue reminding the public, politicians and the media about the principle of protection, and to raise awareness of women's experiences.

Evan Ruth, Legal Officer, London Office of the United Nations High Commissioner for Refugees (UNHCR) and formerly an appeals caseworker at the Refugee Legal Centre, spoke on **Young female asylum seekers and refugees**.

Evan Ruth said that there were an estimated four million female asylum-seekers and refugees under 18 worldwide, but too often they were 'invisible' when refugee camps were being set up or people were being resettled from such camps. Even when there was an attempt to be gender-sensitive, girls were often seen as part of a family rather than as individuals – yet within the family there might be violence, forced labour or forced marriage. Danger to girls did not cease when they left their country of origin: there were many hazards during flight and afterwards. Refugee camps were unfortunately often hotbeds of intimidation and sexual violence. The main challenge was to reach out behind traditional family structures and traditional community structures in order to stand up for the girls' rights, give them a voice and uphold international human rights standards.

Drawing on examples from his own recent experience, Evan Ruth described attempts to meet this 'extremely difficult' challenge. Traditionally, registration of refugees was by family, but in Malaysia UNHCR decided to register every person. This revealed that often men in their 30s or 40s had wives aged 13 or 14. UNHCR could not recognise such marriages. However, if a girl was not registered as a wife she would lose her role in the community. Some had children whose welfare had to be considered too – there were no social services in Malaysia for them. Raising the issue aroused anger, demonstrations and attacks. Compromise was clearly necessary, and UNHCR staff said they would speak individually to the girls in confidence and ask what they wanted to do; if there appeared to be no other solution, the girls would be treated by UNHCR as part of the family. When staff talked to the girls, they found that families in the countries of origin had sent the girls to be married, and UNHCR wouldn't be able to trace the families. A solution was still being sought.

In Pakistan, UNHCR had a programme to assist refugees to move to a better camp and wanted to interview women and children individually, not least because they had heard rumours of child abuse and forced marriage. Against strong objections the UNHCR staff insisted they would not arrange resettlement unless they could interview all females. A solution was found: interviews were carried out in a room with glass partitions so interviewer and interviewee could be seen but not heard by other family members.

Evan Ruth also described a situation in the refugee camps in Kenya where, since the early 1990s, an attempt has been made to shift perceptions of female genital mutilation by treating it as a health issue, with health as a human right. UNHCR, the Kenyan government and NGOs were working together to explain the health consequences in discussion groups bringing together women who had undergone the practice, girls who had not yet done so, and those carrying out the practice. Improvement was coming through giving a voice to all parties while standing up for international standards.

Evan Ruth was asked about the support being given to Afghan women returning from Iran and Pakistan. He said UNHCR was monitoring returnees to Afghanistan, and he suggested the UNHCR website (www.unhcr.ch) for up-to-date information.

The film ***The Corridor*** was shown in a slightly edited version. It tells the story of a politically active Iranian woman and was produced by **Zoe Neirizi** based on her own experience of torture, imprisonment and loss.

Zoe Neirizi came to the UK in March 1993 after having been arrested and imprisoned in Iran for over three years. Since then she studied law, intending to follow a career in international law and human rights. She became a qualified solicitor in February 2005.

She said she saw her film as demonstrating the close connection between the personal and the political. Making the film had been a struggle. She was setting up a forum for those wanting to overcome the barriers to film-making, and anyone interested in this or in arranging a showing of *The Corridor* should see www.blackswanfilms.co.uk

Harriet Harman QC MP, Solicitor-General and MP for Camberwell & Peckham.

She spoke on **The prosecution of traffickers in human beings**. She said that although such trafficking takes many forms, her talk would focus on young women who set off to promised work in Western Europe but their papers were taken from them; they were raped and made to have sex with many men; if they tried to escape they were recaptured. The word 'prostitution' was wholly inadequate to describe this - it was kidnapping and modern-day slavery. She outlined the steps the UK government was taking to tackle the issue by protecting the victims, prosecuting the traffickers, prosecuting the men who raped the trafficked girls, and confiscating the proceeds of the traffickers' crimes. Critical to this was joint work with countries across Europe and elsewhere. The UK would be taking the opportunity of its European Presidency from July to strengthen cross-country links to tackle trafficking.

Young women and their families had to be made aware that there could be dangers in travelling illegally or with relatively unknown people. As well as liaising with governments and agencies in the countries of origin, we needed to work with communities settled here whose warnings would carry weight when they told those back home about the ill-treatment. Laws had to be strengthened and enforced. Although trafficking was covered by the Sexual Offences Act 2003, all relevant legislation should be used, including that on forgery, assault and fraud. She had been working with the Crown Prosecution Service on a toolkit setting out the laws available for use. Besides ensuring that the traffickers felt the full force of the law, it was important to focus on the men who used the girls. 'They are the cause of this serious and organised crime and deterring them is key to prevention.' The toolkit identified the offences under which such men could be prosecuted.

Harriet Harman said that an interagency governmental group met monthly, reviewing strategy and monitoring action; and a new advisory committee was being established to bring the agencies together with voluntary and community groups to oversee progress in prosecutions. Victims could provide vital evidence to ensure successful prosecutions, but this had implications for the type and level of support given to them. It was clearly right in principle to provide support. The problem was that in our adversarial court system, defendants might argue that such support provided an inducement to give evidence. The judge might then instruct the jury to discount the evidence.

The profits from trafficking are considerable, including from selling girls on to other gangs. She and the Attorney-General had power to refer cases to the Court of Appeal when sentences handed down seemed insufficient. Although this was a power which in general she might be reluctant to use, in the case of trafficking it was critical that sentences should deter others. She described a case where, as a result of their intervention, a trafficker's sentence had been increased from 10 to 23 years. That message had gone back around Europe.

In her talk Harriet Harman had referred to victims being helped to settle in the UK. One of the participants asked how the government would ensure that the trafficked women were helped under the 1951 Convention. Another participant drew attention to Italy's practice of offering amnesty, immediate residence and a work permit to any woman trafficked into that country. Harriet Harman said the Italian experience was of great interest, as were arrangements in some other countries. However, if amnesty were automatic, traffickers might persuade women to come with them by holding out the possibility of gaining permanent residence; and a victim's evidence against a trafficker might be discounted because amnesty was an inducement. Victims' evidence was crucial, but women beaten or raped by police in their own country might believe traffickers' warnings that it would be dangerous to go to the police. The Home Office had commissioned a study of how different jurisdictions in Europe encouraged victims to report.

An asylum seeker from Pakistan drew attention to women who sought asylum because of domestic violence. They were being refused because the lack of realistic choices open to them in Pakistan was not recognised. Harriet Harman agreed that we needed to get 'the right understanding' of the problem and its context. She was always anxious to be informed when there was evidence that an Immigration Officer appeared not to have treated an individual properly. Maeve Sherlock, Chief Executive, Refugee Council, pointed to the critical role of Home Office country profiles. Decisions were likely to be affected by how the Immigration Service interpreted the situation of women in the context of the 1951 Convention, but also by Immigration Officers' access to accurate country information.

Naaz Coker

Chair of the Refugee Council and of St.George's Healthcare NHS Trust.

In her talk on **Health issues for women refugees** she pointed out that equity and responsiveness were the key guiding principles of the health service. She wondered, though, whether current procedures might well give the message that some people were not welcome. Unfortunately, there were still many people in the health service who did not recognise cultural practices or the need to adapt to diversity; on the other hand, there was 'heroic work' by many who went out of their way to provide constructive help to marginalised groups.

There was currently much discussion in the NHS about the market place, and the extent to which people in particular groups were entitled to any share, or an equal share, or a larger share of health care. This was the context in which the health needs and health care of refugee women were being considered. Many women experienced fatigue, anxiety and depression because of the conditions of their lives. Refugee women suffered, in addition, the physical and emotional health implications of their experiences pre-exile and then during the arduous conditions of flight. Once in the UK, there was often racist abuse and harassment – some of it by staff or patients within the health service.

Among the key barriers to seeking and accessing health care were lack of language support and lack of information about how the NHS worked. Support for people with mental health problems was patchy. Lack of awareness and knowledge among health service personnel could be a problem. There were also issues of resources. The Department of Health had taken steps to overcome some of the difficulties, for example by publication in 2002 of *Meeting the Health Needs of Refugees and Asylum Seekers in*

the UK: An information and resource pack for health workers by Angela Burnett and Yohannes Fassil (www.dh.gov.uk).

In discussing constructive ways forward for the NHS, Naaz Coker said that beyond changes in health services themselves, referring women to a support group could be very helpful. It was also critically important to speak to refugee and asylum-seeking women directly, not through their spouse or other family members. The women's experience had to be viewed in a holistic way, taking account of poverty, accommodation and other aspects of their lives. They should not be seen as 'a mental health problem' or 'a drain on limited resources', but as individuals with knowledge and resilience who could make a contribution to the design of services as well as their use.

Maeve Sherlock

Chief Executive, Refugee Council, then spoke briefly about the **Refugee Council women's strategy**. She explained that the Refugee Council had carried out a review of its own services to women, and had found this exercise so valuable that it was decided to continue the work and identify the lessons to share with others (although she recognised that some people were already doing all this and more). The result was the document in each participant's pack: *Making Women Visible: Strategies for a more woman-centred asylum and refugee support system*.

She outlined issues faced by women seeking protection in the UK, including poverty and destitution, and now anxieties about having children removed. Delays in dispersal meant that often women and children spent too much time in unsuitable emergency accommodation. Health problems included those of anaemia and lack of protein, with implications for pregnancy and breastfeeding. Being detained with men caused distress. Women might not report domestic violence for fear of jeopardising their own or their partner's asylum claim. If women were working, there might be issues of long hours or variable hours. The issue of sexuality was an area that could be potentially hard for women to talk about, therefore signposting towards services is important.

In its work the Refugee Council strived towards gender equality, but recognised that equal treatment alone was insufficient as a strategy to achieve this – hence the necessity of a strategy specifically about women. She set out steps which might be adopted. These included review of existing services, training, making women more visible in the organisation and to the media, arranging communication in appropriate languages, and collecting gender-differentiated information.

A participant asked about support for unaccompanied minors when they reached age 18. Maeve Sherlock said that the Hillingdon judgement had made clear that a higher level of support was required at 18, but there were questions about how widely this was being applied, and issues of funding were unresolved. She noted with concern that the government had been signalling an intention to return unaccompanied minors. Another participant asked what was being done about the dire position of asylum seekers who had been refused; 'they are human beings as well' yet were being refused food, shelter and medical attention. Maeve Sherlock said the Refugee Council had been campaigning strongly on this, and would continue to do so. It was wrong to keep people in limbo, and we mustn't use destitution as a tool of public policy.

HIV/Aids had not been raised as an issue thus far during the conference, and a participant expressed concern. Naaz Coker apologised for not having mentioned it. She

explained that this was because of her concern that asylum seekers and HIV were increasingly being associated in the media. She said she thought that many doctors and nurses would continue to treat refused asylum seekers with HIV/AIDS, although they might have to deal with the consequences.

Kate Allen

Director of Amnesty International UK and formerly Deputy Chief Executive of the Refugee Council.

After lunch the conference heard from Kate Allen. She described **Amnesty's current work on women refugees and asylum seekers**, but started by noting that refugee issues had formed part of Amnesty's remit from its foundation. The human rights framework had traditionally been seen largely in terms of men, but in the past few years there had been a shift towards taking women's experience into account more fully. Last year, Amnesty began a campaign to stop violence against women, concentrating on domestic violence and violence in armed conflict. She described the 'outrageous scale' of violence against women, including honour crimes and dowry deaths, and she noted that in many countries 'honour' was still accepted as a defence.

Trafficking was 'the modern-day slave trade'. She spoke warmly of Harriet Harman's initiatives but expressed concern that at the same time another arm of government was closing legal routes to protection, thus increasing the likelihood of trafficking. Amnesty saw many women who had been trafficked. If they applied for asylum, their accounts were not always believed, and they were penalised for not applying on arrival. In London there was only one refuge for trafficked women, the Poppy Project. With 25 bed spaces, it could not meet the level of need for protection, and it could take only those women who had agreed to give evidence against their traffickers.

Amnesty has been arguing that trafficked women should get shelter and support for education and training, and that these shouldn't be dependent on their willingness to give evidence; that they should have a three-month period of reflection before having to decide whether to be involved in prosecutions; and that they should be entitled to a six-month residence period in which to decide whether to stay or return home. The Council of Europe was considering a draft Convention on trafficking in human beings. Although this was unlikely to include all Amnesty's proposals it would mean governments had responsibilities. Once the Convention was passed Amnesty would campaign to ensure that the UK played its full part in implementation.

Amnesty was concerned with women in many other aspects of its work – for example, in attempting to get effective international intervention in the Democratic Republic of Congo and in Darfur, where rape on an extraordinary scale was being used in a systematic attempt to destabilise villages. The organisation was proud of its role in working with others over 20 years to establish the International Criminal Court, which now recognised a broad spectrum of sexual crimes and crimes against women as crimes against humanity.

A participant expressed concern about the sources used by the Home Office for its country profiles. Kate Allen said it had been clear for a long time that the information was inaccurate, and Amnesty's 2004 report *Get It Right: How Home Office decision making fails refugees* had documented this (www.amnesty.org.uk). Amnesty would continue arguing for an independent documentation centre, as in Canada. In response to a question about Tamil women who had experienced violence from the Sri Lankan armed

forces, Kate Allen said that Amnesty had produced many reports on Sri Lanka over the years and offered to provide references to these. A participant from Norfolk welcomed the opportunity presented today for finding out about information and services available, but wondered how these could be made available more widely. Anna Reisenberger commented that this had become a really important issue since dispersal. The Refugee Council had an Information Service for service providers, and an email newsletter going out to 15,000 people - see www.refugeecouncil.org.uk

Participants then met in seven seminar groups to discuss a range of issues affecting female asylum seekers and refugees in the UK, please see below.

Claudia Hasanbegovic

In the plenary session which followed, the first speaker was **Claudia Hasanbegovic**, Domestic Violence Co-ordinator for the Latin American Women's Rights Service (www.lawrs.org.uk). She spoke on the subject of **An underdeveloped world in the developed world: the experience of LAWRS supporting survivors of domestic violence in London**. She said that there were services and opportunities for victims of domestic violence who had secure immigration status, but the situation was different – and desperate – for those who didn't. Depending on their status, they were not allowed to work and/or not allowed access to public funds such as housing benefit (which would be required for a hostel place). Returning home was not a realistic option, especially in the case of those who had fled from torture and imprisonment. She compared the experience of 107 women who had sought help from LAWRS with data from Women's Aid. The proportions suffering psychological abuse were about the same, but sexual and physical abuse were much greater among the Latin American women. Because of insecure immigration status, they were anxious about going to the police; and this insecurity was also used as a threat by those committing the violence. When women did call the police or go to the station, often little consideration was shown to them (or to LAWRS staff or volunteers providing support) and no practical action taken.

Claudia Hasanbegovic said that it was important that the police, the courts, the executive, social services and housing worked together to provide effective prevention and support. Immigration law reform was urgently needed so women suffering domestic violence had access to public funds and immigration security. Only then would they be treated as human beings.

Hildegard Dumper

The final speaker was Hildegard Dumper, the author of *Making Women Visible*, the document launched at the conference to help organisations working with refugee and asylum seeking women. She said that she hoped participants would be inspired to take forward issues raised in the conference, and she set out four areas of work for participants to engage with:

- 1. Develop a profile of your stakeholders.** Even the smallest organisation should find it worthwhile to collect and analyse data on gender, age, nationality. What kinds of advice questions do women bring? What employment issues?
- 2. Conduct an internal review of your organisation.** Might the times or location of sessions be discouraging women? Have you considered the needs of older women, or mothers? Are your services offered in a woman-friendly environment?

- 3. Develop strong partnerships between refugee women's organisations and other women's organisations, and between refugee organisations and mainstream ones.** The Refugee Women's Network, for example, provided an opportunity for smaller unfunded groups to benefit through working with larger and better-resourced organisations. Refugee organisations concerned with domestic violence needed closer links with mainstream support groups.
- 4. Choose a policy issue that fits your work plan.** The last few pages of *Making Women Visible* list important policy areas: health, education and others. If you choose one area and set targets in relation to it, you can keep reviewing progress.

Hildegard Dumper urged participants to circulate *Making Women Visible* as widely as possible - it was available on www.refugeecouncil.org.uk. She reminded participants that Harriet Harman had said she was always glad to receive information about Immigration Officers who should be working better with women applicants. Finally, she encouraged participants to continue reviewing work in this area and not to give up.

Anna Reisenberger warmly thanked the speakers, the seminar facilitators, the people who had planned the conference and those who had helped during the day, and all the participants. She hoped that 'the really passionate people doing the work in the community' had gained something during the day to take away for their own work.

Seminars

There were seven seminar groups.

Legal services for women asylum seekers

The seminar was facilitated by **Richard Lumley, Refugee Council** and **Ezinda Franklin-Houtzager, Asylum Aid**. She presented information about accessing asylum procedures, legal advice and the asylum determination process. She discussed the advantages of a woman claiming asylum in her own right rather than as a dependent, and the importance of confidential and woman-friendly settings. She drew attention to the increased number of women being detained at HMP Holloway and HMP Bronzefield under Section 2 of the Asylum and Immigration (Treatment of Claimants etc.) Act 2004 and the implications for asylum applications, noting that some women completed their sentences before being issued with a SEF form. She explained how changes in legal aid (including the unique client number and the casework five-hour time limit) were affecting women asylum seekers adversely. Participants from many parts of the UK contributed to a lively discussion, sharing experiences and concerns about availability and quality of legal advice. Considerable anxiety was expressed about the fast-track system for women at Yarl's Wood, for which legal practitioners were currently being sought.
(*Notetaker: Natasha King*)

Integration of refugee women

The seminar was facilitated by **Katherine Blaker** and **Marna Carroll, Refugee Council**, and **Emma Gray** and **Beauty Chimbetete, Northern Refugee Centre**.

The session aimed to identify factors causing isolation for refugee women, share examples of successes and challenges in working towards integration of refugee women, and come up with possible solutions to such challenges. The Home Office considered that integration issues arose only with achievement of status, but it was important to see them as starting on arrival in the UK. Among the causes of isolation were poverty, lack of access to language lessons and child care, public transport problems, unfamiliarity with systems and structures, uncertainty about entitlement to services. Isolation could lead to depression and other mental health problems.

Integration projects could play a part in diminishing some of the difficulties, as shown in examples like the Sheffield Refugee Women's Group and the Zeela Group for Liberian women who had come through the Gateway Protection Programme. Among the ideas put forward for running effective integration projects were spending time with women to build trust and confidence, according respect, involving women in projects and enabling them to make decisions. Small projects could make a big difference, but the emotional pressures on staff and volunteers could be great.

Refugee women faced many barriers when accessing projects and services, including insufficient interpreters, lack of awareness among gatekeepers (such as doctors' receptionists), and the criteria required to access services (which in any case might be culturally inappropriate). Some refugee women preferred to remain 'invisible' in areas where the BNP was strong and there were few other people from ethnic minorities.

(Notetaker: Martha Lee)

Personal and community safety

The seminar was facilitated by **Bharti Patel, Refugee Council**. She explained that little systematic information was available about the safety of women refugees and asylum seekers, except for Hildegard Dumper's 2002 *Is It Safe Here? Refugee women's experiences in the UK* (www.refugee-action.org.uk). This set out the views and experiences of 149 women (mostly asylum seekers) from a wide range of countries who described a life of loneliness, despair and loss. Many had been subjected to verbal or physical abuse, and felt unsafe even within their NASS or other accommodation. Seminar participants discussed the issues raised, contributing their own experiences and ideas for improving the situation. These included increasing women's confidence and self-respect so they felt able to report harassment and crime, and easing the conditions for reporting (including availability of interpreters, and training of police and others in order to increase sensitivity and awareness of relevant cultural factors). Less intimidating than reporting incidents to the police might, where appropriate, be approaches to transport authorities or to anti-social behaviour order officers; or through stressing local authorities' duty to be proactive in creating good race relations under the Race Relations (Amendment) Act 2000.

(Notetaker: Cat Robertson)

Employment, training and adult education

This seminar was delivered by **Deng Yai, Refugee Council** and **Ayse Bircan, Refugee Women Association**. Deng Yai delivered a short presentation on 'Barriers to Employment, Training and Adult Education' followed by small group discussions that focussed on overcoming barriers, examples of good practice and key recommendations.

Whole group discussion focussed on barriers specifically experienced by women, in particular cultural differences. Other issues highlighted in discussion: the need not to generalise, difficulties in making women aware of where to go for information and the fact that it is often easier to access this if it is sited within, and the differences in entry to professional jobs in the UK. Lack of childcare and the difficulties in accessing information was thought to be a major barrier. It was seen as vital to use Refugee Community Organisations for effective recruitment and to do outreach work with women.

A discussion of existing good practice took place in two groups focusing on women and young women (16+). Strategies included: improving facilities and courses, awareness raising, confidence building and work experience opportunities.

Recommendations included: lobbying to reinstate right to work for asylum seekers, working with Job Centre Plus to standardise responses, working with employers including training on legal information, networking to provide advice on existing services, share best practice and create awareness, developing outreach work, mandatory allocation of education places and promoting opportunities.

(Notetaker: Nora McKenna)

International realities

The seminar was facilitated by **Tina Puryear, Writer/Researcher/Trainer** and **Clare Palmer** of the **Refugee Women's Resource Project at Asylum Aid (RWRP)**. The aim of the session was to raise awareness of the importance of improving country information in order to reflect the experiences of women seeking asylum. Narrow interpretations of international conventions coupled with a lack of gender-specific country information often hinder women's ability to seek international protection. Some of the barriers include: claims not meeting convention grounds (for example, assuming women's activities are not political), a lack of understanding of the nature of 'serious harm' (such as rape or sexual assault), and unrealistic expectations of a woman's ability to access state protection.

The group considered case studies from Albania and the Democratic Republic of Congo, with some participants taking the part of Home Office decision-makers and others that of the woman's legal representative. Discrepancies were highlighted between the official CIPU country reports used by the Home Office and more in-depth information available from other sources.

Sources of country information were discussed and the group discussed the lack of detailed data regarding the broad range of issues impacting a woman's ability to seek protection. RWRP gave a list of key topics that producers of country information should include in their reports, including: the position of women before the law, cultural mores and practices, incidences and forms of violence against women, penalties for perpetrators, protection available and risks if returned to their home country. RWRP is lobbying for these improvements as well as for better access to information and plans to offer training for advisors, as part of its Strategy on Country of Origin Information and Gender.

The Refugee Women's Resource Project at Asylum Aid was used as an example of good practice. They provide legal advice and representation for women asylum seekers and

also research, publish and campaign on issues which affect them. Their services are widely used by asylum-seeking women and those supporting them.
(*Notetaker: Jane Dykins*)

Domestic Violence

This session was facilitated by **Fathiah Yazdi** and **Dagmar Grafton, Refugee Council**. The session aimed to identify initiatives for improving services for asylum seekers and refugee women who are at risk of or are suffering from domestic violence. Whilst domestic violence is a recurring problem it remains invisible in society and it was recognised that there is a lack of funds to improve this situation.

The group discussed general barriers facing women at risk or suffering domestic violence, and then more specific, those that might affect asylum seekers and refugees. These included: lack of language skills, new culture and lack of knowledge of rights there in, fear of hindering asylum claim or other support, fear of losing a child or inability to leave the family home.

Important services available to asylum seeking and refugee women at risk of domestic violence highlighted by the group included solicitors, social services, refugee community projects, Women's Aid, ante-natal clinics, health visitors, doctors and mental health services.

Key strategies for improvement include: dissemination of information on women's rights and availability of services to asylum seekers and refugees (preferably in their own language), developing specialist provision, involving volunteers in the community, training of mainstream organisations and other groups, support for victims of domestic violence locally, putting refugees, asylum seekers and domestic violence on every relevant agenda.

Health issues faced by women refugees

Helen Murshali (Refugee Council) and **Jane Cook (Hillingdon Hospital)** facilitated this session. The first part of the seminar focused on the journey of exile and the various implications this had for women's health, mental health and how they accessed health care services in the UK. Restrictions in women's home country can be caused by decreased mobility, cultural issues, experience of violent acts including torture, bereavement, separation and sustained stress, risk of HIV/AIDS and STIs.

During the flight women face very specific challenges including poor, crowded living conditions and unclean water which cause the spread of disease. In refugee camps women are at risk from prostitution and rape. Having entered the host country the stress and the uncertainty of the experience leads to various health issues including a lowered immune system, low standard of housing and diet exacerbate this. Many women are unaware of their right to health care as the information they receive is not translated into the languages they understand.

Refugees and asylum seekers ability to access health care was different depending on the region. New legislation has dictated that failed asylum seekers will no longer have access to primary health care. If they had previously been receiving treatment for a

condition then this would continue, but if a new condition was diagnosed, they would not be treated unless they could pay for the treatment. A discussion followed on how in reality this would be monitored. Several delegates gave examples of people they knew who had been treated or had been refused treatment. Further examples were given of women who had been refused maternity care at a hospital and children who were refused vaccinations. It was felt that this might contravene both the Universal Declaration of Human Rights and the Convention of the Rights of the Child.

Women face many issues related to their gynaecological health related to stress and infection including hormone problems, genetic issues arising from marrying family members, obstructed labour and delivery of premature babies. Women also experience mental health issues related specifically to their experience as refugees/asylum seekers. There is a limited provision of services specifically addressing this issue.

To ensure that refugees and asylum seekers are able to access health services, the services must become culturally appropriate and focus on empowering the service users and making them aware of their rights.

(Notetaker: Roisin Cavanagh)

The Refugee Council is grateful for help in preparing this report from Refugee Council volunteer, Naomi Connelly.