Refugees and asylum seekers: the social work role

Book Section

How to cite:


For guidance on citations see FAQs.

© [not recorded]

Version: Accepted Manuscript

Link(s) to article on publisher’s website:
http://www.routledge.com/books/details/9780415553360/

Copyright and Moral Rights for the articles on this site are retained by the individual authors and/or other copyright owners. For more information on Open Research Online’s data policy on reuse of materials please consult the policies page.
Chapter 9

Refugees and asylum seekers: the social work role

Monica Dowling and Parissa Sextone

This chapter added to my admittedly media filtered view of this topic and reinforced some traditional social work values such as the importance of anti-discriminatory practice within the context of the increasing denial of rights toward refugees and asylum seekers.

Introduction

The plight of refugees and asylum seekers is a historical and global issue which is often reduced to an economic problem by the laws and policies of individual countries. Because of this, social workers are often compromised in relation to their profession’s responsibilities and duties in working with refugees and asylum seekers including unaccompanied minors (Humphries 2004). Asylum-seekers in contrast to refugees are people who enter a country without legal documents or whose documents expire once they have arrived and who claim refugee status (Nash et al. 2005).
The legal contexts for practice

Legislation in the UK has steadily sought to deny refugees and asylum seekers social rights which the welfare state proclaims as universal. The 1993 Asylum and Immigration Appeals Act withdrew asylum seekers’ access to social housing tenancies, the 1996 Act ended their right to social security benefits unless they had children whilst the 1999 Act created a separate welfare regime for asylum seekers and their families with food vouchers at levels significantly less than the official poverty line. It also introduced compulsory dispersal which took people away from the informal support of their ethnic communities. The 2002 Act abandoned vouchers and dispersal in favour of warehousing in prison whilst The Asylum Acts of 2004 and 2006 further tightened the monitoring of asylum seekers and speeded detention and removal by the withdrawal of legal rights.

The government has identified a shift towards ‘managed migration’ in the context of growing shortages of, for example, social workers, dentists, and teachers. In relation to race and ethnicity, ‘legal’ migrants have been mainly white people from the new member states of the EU while those without documentation come from outside the EU and are ethnically distinct (Ginsburg 2009). Furthermore the EU’s ‘fortress Europe’ policy on asylum means that individual countries no longer have the same freedom to respond unilaterally to applications for asylum.
The contribution of research findings informing practice

Research in this country and overseas (Valtonen* 2001, Hessle* 2007), raises questions about the policies of governments, and welfare agencies, in the complex immigration and social welfare environments in which social workers operate. Where good social work practice exists, it does so despite negative circumstances. The common picture from research is one where workers feel guilty, resentful and frustrated because they do not have the legal knowledge or expertise to offer a good service and where service users are neglected and vulnerable (Hayes and Humphries 2004).

*Humphries (2004) cites work by Duvell and Jordan (2000) who interviewed members of asylum teams in London and reported that staff often lacked preparation and training for work with refugees, while research in Greater Manchester found that although local authorities could claim a special grant for unaccompanied asylum seeking children, young people were often not supported because the relationship between asylum teams and social work teams was not clear.

Jordan and Jordan (2000) also found that some social workers do not accept that social problems faced by asylum seekers are any of their business while some local authorities avoided their responsibilities under community care and national assistance legislation. Team members were aware of and concerned about the
trauma experienced by young refugees but had little knowledge of their immigration status or the legislation.

Poole and Adamson (2008) looked at the difficulties faced by the Roma community arriving in Govanhill, Glasgow without employment. They were unable to make any claims on public funds given the primary legislation developed by the Department of Work and Pensions and the Home Office (Home Office UK 2008). This limited their access to emergency payments from social work in times of ‘destitution’. Such restrictive legislation created a tension between professional social work ethics and the principles of anti-discriminatory practice on the one hand, and the day-to-day realities of trying to work with excluded minority ethnic groups. Furthermore, changes in the role carried out by social workers and others in acting as agents of the Home Office through taking steps to confirm immigration status, can result in aiding deportation.

Research with asylum seekers and refugees in North Glasgow (GoWell 2007) found they had difficulties in accessing health services because of problems including language and registration. The research also identified a range of health needs many of which were unmet or required involvement of other support for example social services, health services and housing.

Hayes and Humphries (2004) point out the importance of anti-racist practice and the response of social work agencies. Save the Children’s research (2004) found
statutory agencies were not always aware of the extent and impact of racism experienced by refugees and asylum seekers. Black and minority ethnic groups are often diagnosed as having higher rates of mental disorder than the general population and refugees and asylum seekers are especially disadvantaged (Browne 2009, Chase et al. 2008). Depression is frequently overlooked and these groups are less likely to be referred for psychological therapies (Chase et al. 2008). However refugee rather than asylum seeker status is necessary to access community mental health teams.

Hayes and Humphries (2004) cite examples of good practice from housing providers including the private sector whose workers were well informed and were providing support and advice which went beyond the provision of accommodation. Housing providers and support workers in this research were often the first to identify mental health problems and were instrumental in helping refugees and asylum seekers to register with a GP.

Research evidence from both the UK and other countries indicates that social work with refugees and asylum seekers is developing into a new area of practice where information is sought from lawyers, medical practitioners, NGOs and the voluntary sector rather than social work practitioners working with other client groups (Valtonen 2001, Findlay et al. 2007).
Skills and knowledge for the complexities of practice

The realities of working with asylum seekers and refugees will vary from country to country and from time to time. The examples of practice discussed here are from the UK in 2009 and are used to highlight general issues and practices which are summarized in the conclusion.

Social workers tend to work with a small section of the refugee and asylum seeking population – either women and children in financial difficulties or children and young people in need of safeguarding (Bokhari* 2008). A key role of the duty and assessment social work team in a local authority is to assess an unaccompanied minor. The core assessment will classify them as a child in need and then will take them into care under Section 20 of the Children Act (2004) which allows the social worker to provide a comprehensive service including being entitled to Leaving Care services under the Leaving Care Act (2000). Social workers are specifically required to complete assessments that determine whether a young person is entitled to a service and age disputes are a huge problem. While social services are required to do age assessments, the Home Office can dispute the assumed age. An assessment is required to build up a picture of the unaccompanied minor over time and there should be two social workers present for this type of skilled assessment which will include medical reports and dental records.
Social workers and others are increasingly required to integrate their role with the Home Office and their policy is clear in making it difficult for the individual to stay in the UK when there is no longer any support (Asylum and Immigration Act 2004). The aim of the immigration policy in these circumstances is to encourage the person to return to their home country.

If the asylum seeker is a child or young person who is assessed as a child in need and is taken into care, the social worker will need to work closely with them to establish whether they have a right to refugee status. Many young people, who are refugees or asylum seekers, may have a different cultural conception of the role of a social worker or do not understand the role of social services and the time it takes to work through the bureaucracy. The social worker will need to have the skill to explain what is possible from a professional perspective and the knowledge to clarify the workings of the benefit system so that the young person may experience the system with external support.

The social worker may have to find her own network of expertise outside the local authority if they are the only worker in the team providing this service to young people. However, the social worker’s role in co-ordinating services is only part of the picture. It is also important to have listening and counselling skills so that the young person is able to explain their experiences and simply being there with the young person and giving them space is a fundamental part of the role and involves skills and knowledge that cannot be underestimated. The relationship a worker
will develop with a young person or family who is seeking refugee status can be powerful and enabling and failed asylum seekers are the most disadvantaged group in this population. Children who are permitted to stay temporarily can experience acute anxiety about their uncertain status and fear for their future (Chase et al. 2008, Hill and Hopkins* 2009). The social worker’s role in this context may be primarily about getting to know the child so that she can decide how to balance a focus on the loss and trauma the child has suffered with an equally important focus on strength and durability.

Clearly some local authorities will have more knowledge and experience of working with asylum seekers and refugees mainly due to their. How seamless the service is for the service user will depend on how experienced the social worker and colleagues are and whether they have the right resources. Sensitivity is paramount when working with refugees. Support services that are anxious to help, sometimes bombard new arrivals with advice and guidance and this help can be met with resistance due to many people who are seeking asylum and refugee status living in a state of uncertainty as they do not know how long they will be remaining. If an appeal is reached and refugee status is not granted, asylum teams are in the position of having to remove families from National Asylum Support Service support, including accommodation. Social worker teams are also expected to play a part in their deportation.
There have been some positive policy developments in the UK which will aid social workers in developing their practice with refugees and asylum seekers. The Guidance for local authorities’ assistance for young people leaving care after 18 (Leaving Care Act 2000) now includes a specific reference to taking account of a young person’s immigration status (Denis 2007). This enables the local authority to fund education for the refugee leaving care until they are 21 years old and refugees tend to make use of the provision with a high percentage going on to further education and university (Findlay et al. 2007). The Department for Children, Schools and Families (DCSF) has a revised framework for Every Child Matters where its five outcome statements apply to every child and young person ‘whatever their background and circumstances’ (DCSF 2008) and they acknowledge that asylum seeking children are one of the practice areas of greatest need (Hill and Hopkins 2009).

However every day in the UK people in the asylum system are condemned to sleeping on the streets or waiting years for a decision on their refugee status, they can be locked up in detention centres and eventually sent back home. The British system at times makes children take on the burdens of their traumatized parents and prevents parents from being the protectors they want to be to their children.

Walters (2009) suggests there are hundreds of families who could talk about their treatment in the UK but feel too frightened to speak out. In 2007, approximately 30,000 people came to the UK seeking asylum and 4,000 of these were children.
Nothing is gained in terms of justice or efficiency by compounding the trauma of families who have already experienced persecution in their home countries by locking families up in detention centres.

Nevertheless refugees and asylum seekers often talk about the individual acts of kindness that sustain them day to day and social workers play their part in supporting and comforting these families. There are some social workers who provide an outstanding service in this field and the ripple effect on the lives of people, groups, and societies has an everlasting positive impact.

Recommendations for practice

Healey (2001) has called this type of casework the ‘international/domestic practice interface’ where the complex problems that social workers encounter are often linked to the person involved having different countries of origin. She gives many examples of cases where social workers must cross national borders both symbolically and sometimes physically in order to arrive at acceptable solutions in dialogue with clients.

Hessle’s (2007) approach is to suggest that transcultural and inclusive principles are key responsibilities for frontline workers when working with these vulnerable groups in society. She argues for understanding the worldwide agenda and getting
help, support and expertise in dealing with these issues from international and professional networking and suggests that:

Social workers are at the frontline of solidarity with vulnerable groups in all societies and international exchange of knowledge is necessary for dealing with trans-cultural problems.

(Hessle 2007: 240)

What is evident from research and the realities of practice is that social workers need to be knowledgeable and effective in their role with refugees and asylum seekers. Professional leadership, support and training both nationally and internationally in transcultural issues, immigration legislation, trauma counselling and support and inter-professional working is essential to prevent the demoralization of social workers working in this area.

Conclusion

This chapter has looked at how the social worker is at the heart of a punitive system for immigrants and asylum seekers. This can create conflict and tension for social workers if they feel they cannot support this vulnerable group in society in the ways they wish. More research is needed with good practice examples, on how barriers can be overcome and effective solutions can be achieved.
Lovelock, Lyons and Powell (2004) point out that social work research needs to grasp the moral and political realities as they question the ‘what works agenda’ and its implications for human rights and welfare principles in contemporary Britain. They suggest a continuing awareness of connections between policy and practice, the nature of anti-oppressive practice, the role of ethics, politics and strategies of alignment of social work with forces that contradict its expressed values.

The profession cannot avoid the moral and political aspects of its operation. It is time to progress networks with social workers from other countries working in similar situations and use the knowledge and support gained to assert the principle of social justice and defend social workers’ professional practice in supporting vulnerable citizens.

Questions for reflection

What are the vulnerabilities and strengths of refugees and asylum seekers in the UK?

How can I develop my network of knowledge and expertise to ensure that I practice effectively and appropriately?
What practice approaches are helpful when social workers become involved with refugees and asylum seekers?