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**Refugee and Asylum seeker Participatory Action Research (RAPAR)**  
C/o Faith and Justice Commission, Salford Diocese, 61 Leicester Road, Salford, M7 4DA

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30<sup>th</sup> January 2002

Dear Councillor Merry

**RE: Asylum Seeker-Refugee Accommodation in Salford**

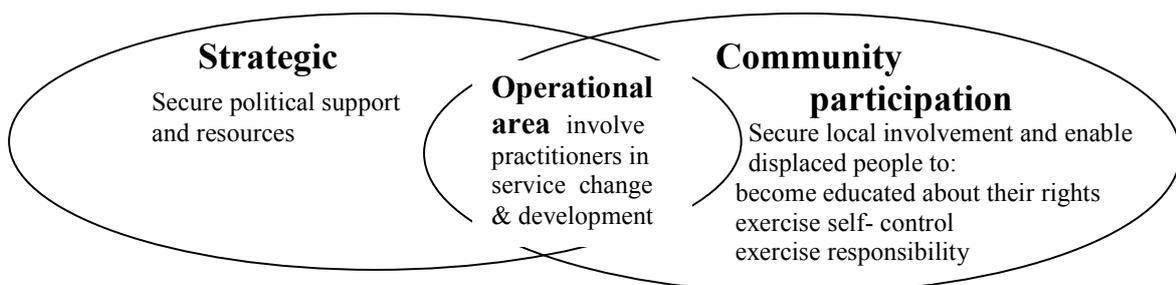
On the advice of a number of people who are working with asylum seekers in the Salford area, I write to you on behalf of RAPAR to alert you to our current concerns about the accommodation situation and in the hope that immediate, practical attention will be given to this matter.

After offering a brief background to RAPAR, I set out a case example that is offered with the intention of demonstrating how asylum seeker-refugee Salford residents are now beginning to become homeless. It concludes with some key points.

**1. Background to Refugee and Asylum seeker Participatory Action Research (RAPAR)**

With the overall aim of delivering sensitive and appropriate services within an increasingly diverse community, Refugee and Asylum seeker Participatory Action Research (RAPAR) was formed in July of 2001. It has the following objectives:

- In general, develop participatory action research with (not on or for) displaced people, practitioners and applied academics
- Specifically, enable specific service development for specific communities on the basis of robust evidence
- Develop a parallel approach:



The engagement of potential non-academic users of research is integral to our work. We have set up a multi-agency and multi-sectoral consortium that crosses administrative and geographical boundaries. This has been achieved through involving policy formulators and practitioners from a range of statutory and voluntary sector agencies, asylum seeking and refugee communities and academics across Trafford, Salford and Manchester. Most importantly, it includes individuals with commitment, coal-face experience, research capability and the power to deliver services that build on the research results.

Our methodology includes social relations patterning which means that it reaches people without formal contact with agencies or community organizations: it is this approach that is enabling their voices to begin to be heard within our work.

## **2. The nature of the accommodation problem**

2.1. On Thursday 17<sup>th</sup> January I received a telephone call from the single person's homeless team of Manchester City Council. Aware of RAPAR's contact with the afghani asylum seeking community, this worker was looking for afghani families/individuals who would be in a position to offer some temporary accommodation to afghani men who were presenting at a Men's Direct Access Hostel in North Manchester. With no spare capacity either at the hostel or in local B&B's, the service was currently referring men to the local Mosque in the hope that they would allow them to stay there overnight before re-presenting at the hostel the next morning. I advised that RAPAR could not offer contacts at this time, as this would expose afghani asylum seekers in NASS accommodation in Salford to the potential of being found in breach of the conditions under which they are accommodated i.e. taking in people who are not eligible for NASS accommodation because their status has changed from asylum seeker to refugee.

2.2. Since that event, and through the community development work of RAPAR that has created partnership working within RAPAR between asylum seekers and front line staff in Salford, we have become aware of a homelessness case involving two single young men from Afghanistan who have been dispersed to Salford. In our view, this case is a useful illustration of the nature of the problem that is beginning to be experienced in Salford and that requires a speedy, strategic and practical response if Salford is to avoid a crisis similar to that being experienced in Manchester.

2.3. Homelessness is extremely bad for health: physical, mental and social. Maslow's hierarchy of need (1954) gives the very basics of health as being physiological need - food, drink, oxygen, warmth etc. - without which progression cannot take place. All homeless people are deprived of the basic needs to a great extent, but the problem is compounded in the case of asylum seekers by the language barrier, which makes it much harder for non-english speakers to access even the services which are available. In these circumstances, deteriorating health is almost inevitable, particularly since, as is well documented, the health of asylum seekers generally deteriorates after their arrival in the UK, for a variety of reasons. Health problems can include depression, suicide (the largest killer of young men in the UK), weight loss, TB, reduced resistance to disease, and a general increase in ill health, all leading to a greater demand on resources. These men are already at risk of racially-motivated attacks, and this risk is greatly increased by homelessness.

### **3. Case example**

3.1. Following the receipt of Leave to Remain, a letter from NASS was sent to John (names have been changed to protect confidentiality) telling him that he should leave his accommodation by 7<sup>th</sup> January. John speaks/reads no English. Between 7<sup>th</sup> and 25<sup>th</sup> January, John slept on the floor of that accommodation and, occasionally, stayed at the homes of fellow asylum seekers. At some point between 7<sup>th</sup> and 25<sup>th</sup> January, John went to an interview at Salford Housing (Churchill Way) accompanied by an asylum seeker friend who acted as interpreter. At this time John was given a list of B and B accommodation and a Salvation Army Hostel telephone number. On 24<sup>th</sup> January, John was evicted from his accommodation and went to another friend and fellow asylum seeker-refugee, Michael.

3.2. Michael's description of the reason for the visit and his reaction follows:

“John came to my flat and asked me to give him a place to live because he had been barred out of his home by Bolton Housing. It was very difficult for me to give him a flat because I am also living in the NASS accommodation and if they did know that someone else is living with me they might make a problem for myself. I could not refuse that, because he was very depressed and he told me that I should help him otherwise he has no one to help him. So I did give him a room and after that I called for you and the others to help find him a place to live.”

3.3. That evening, Thursday 24<sup>th</sup> January, Michael spoke a RAPAR member, Health Visitor Cath Maffia who advised him to keep John with him overnight until she could refer the case onto a small voluntary sector agency in the morning. Michael rang this agency in the morning and they contacted the Salvation Army Hostels in Manchester and Salford and a range of other hostels, all of which were full. Finally, they tried the Direct Access Hostel in Manchester and were told that, at that time on Friday afternoon, they were giving priority to over 30's and they could not help. The voluntary sector worker then rang Michael and asked him if he could allow John to stay for the weekend, which he agreed to do.

3.4. On Monday 28<sup>th</sup> January, the Health Visitor, Cath Maffia, contacted the voluntary sector worker with the names of two private sector landlords. The worker was concerned that John should be rehoused close to his college where he is learning English (which is his lifeline) and to his friends in the Afghani community for support. One landlord suggested that he might have something and, in the interim, the voluntary sector worker accompanied John with Michael as interpreter, to Salford Housing. It emerged that John had already been interviewed by Housing and that he did not have priority and he would need to either have a family or a particular mental health need for priority status. At this point, and because John was without an address, the worker gave her own address to Salford Housing so that they would be able to make contact with John when his name came up on the list. Once again there was no room at any hostel but one of the landlords contacted previously suggested that they view a room that he could offer. The room was dirty and John did not want to take it, reflecting the significance of cleanliness within the Muslim culture. The voluntary sector worker asked if Michael would allow John to remain with him. Currently, John is still with Michael and Michael, himself a young man from Afghanistan, is seeking out a discussion with his own private sector landlord to see if they might be able to offer John a room somewhere.

#### **4. Key Points**

4.1 Asylum seeker-refugees who have been dispersed to Salford are becoming homeless at the point where their status moves from asylum seeker to refugee.

4.2. Single people in general, and under 25's in particular are especially vulnerable as they are failing to be considered as any sort of priority.

4.3. Asylum seekers in NASS accommodation are risking their own accommodation security as they extend temporary support to their friends and acquaintances.

4.4. There is no spare housing capacity evident, within either the public or the private sector, that is taking in people who are beginning to be evicted from NASS accommodation.

4.5. Once in possession of Leave to Remain, NASS writes to asylum seeker-refugees advising them that they have either 7 days (if single) or 14 days (if a family) to leave their accommodation). *Many asylum seeker-refugees do not read/speak English and have no way of knowing what they should do with this information, or what it means for them.*

4.6. With Leave to Remain asylum seekers-refugees can register with job centers but without a NASS 35 (laminated with photo that acts in some ways like a passport) refugees who have until recently been designated as asylum seekers cannot access the system of support from public funds and do not have a secure address at which they can be contacted.

4.7. Asylum seeker-refugees with little or no English language, face huge obstacles when trying to communicate with any potential accommodation provider.

#### **Conclusion**

A mechanism in Salford for housing people who have acquired refugee status before they have to leave NASS accommodation must be introduced as soon as possible: the standard 'homeless route', particularly using direct access hostels is absolutely inappropriate.

- Currently, it is failing Salford residents who are refugees and who, until very recently, have been asylum seekers
- It often deals with people whose homelessness is related to issues such as drugs, alcohol, family breakdown and, as such, it has little or no experience of the needs of asylum seekers, much less the appropriate resources to cope with them.
- It is expensive
- If refugees use this route it quickly becomes full and so the provision needed for other groups is reduced

The proposed changes to Homeless Legislation that are supposed to come into effect in March 2002, would enable these people to be given automatic priority need and then

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enable them to be given full duties under the Homeless legislation in terms of securing accommodation.

If there is any further information that we can help you with, please do not hesitate to get in touch.

With many thanks for your attention

Dr Rhetta Moran  
(Chair, RAPAR)

cc. Professor David Botham, Revans Institute for Action Learning and Research,  
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All people currently included on RAPAR's contact list