Beyond the edges of healthcare provision: the impact of destitution on the health of refused asylum seekers

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Aims

This briefing paper [Number 13] forms part of a series produced by Positive Action for Refugees and Asylum Seekers [PAFRAS]. This paper provides an update of the briefing paper number 11 [Beyond the edges of healthcare provision: refused asylum seekers and access to healthcare].

Methodology

The content of the paper is derived from interviews or conversations with people who use the PAFRAS drop-in centre based in Leeds, United Kingdom, and includes a survey of 63 service users.

Key issues

Since 2004 irregular migrant and refused asylum seekers can be charged for secondary treatment unless the care required was deemed ‘urgent’ and ‘immediately necessary’ by a clinician. The charging regime resulted in many cases of people being refused treatment with long term implications for their health. In 2008 a High Court ruling effectively allowed free secondary care to all refused asylum seekers who had been resident in the UK for at least 12 months, although this was later overturned by a Court of Appeal ruling in 2009. In 2010 the Department of Health launched a consultation on new charging regulations and guidance. However, lack of clarity is still seen as a significant problem but responsibility for its implementation lies with all NHS staff. Many refused asylum seekers put off seeking medical attention until they are much more seriously ill.

Conclusions

The paper suggests that the proposal for making all NHS staff responsible for ensuring that the charging regime works places greater pressure on clinicians to conform to the policy which could lead to a worsening situation for refused asylum seekers in coming years.

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