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# HEALTHCARE FOR ALL

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## Refugee and migrant health



Welcome to our eleventh newsletter, highlighting research that addresses the top challenges currently facing general practice...

**SCENARIO:** How would you feel if you were told the large hotel close to your practice, is set to house 200 asylum seekers, who will be registering at your surgery?

**Unprepared? Unsure? Excited at the thought of being able to help an underserved group?**

Since Russia's invasion of Ukraine in February more than 4 million people have fled the country seeking protection and safety.<sup>1</sup> 35,000 refugees have so far arrived in the UK.<sup>2</sup>

Last year the UK offered protection to 13,210 people. Of these most were granted refugee status following an asylum application.<sup>3</sup> These refugees originated from countries such as Syria and Afghanistan.<sup>4</sup>

**DEFINITIONS<sup>5</sup>**

<b>Asylum seeker</b>	A person who has left their country of origin and applied for asylum in another country but whose application has not yet been concluded.
<b>Refused Asylum seeker</b>	A person whose asylum application has been unsuccessful.
<b>Refugee</b>	Someone who the government agrees meets the definition in the 1951 UN Refugee Convention- their asylum application has been successful.
<b>Undocumented migrant</b>	Someone who enters or stays in the UK without the documents required under immigration regulations. They usually have 'no recourse to public funds'.

**Answer:**

**QUESTION:** Which of above groups are entitled to free primary care and what documents must they provide to register?

- All the above are entitled to free primary care services in the UK.<sup>6</sup> A practice cannot refuse a patient because they do not have proof of address or immigration status.
- For secondary care services you must be living lawfully in the UK on a properly settled basis to be entitled to free healthcare (exemptions to this include public health, A&E, family planning).

Therefore, patients may be reluctant to tell you their immigration status in fear of being reported, if they are an undocumented migrant.

Barriers to accessing healthcare:

**You can help patients feel reassured and welcomed by becoming**

**A SAFE SURGERY**

A Safe Surgery can be any GP practice which commits to taking steps to tackle the barriers faced by asylum seekers and refugees in accessing healthcare e.g., ensuring that lack of ID or proof of address & immigration status are not barriers to patient registration. Training resources are provided for all staff including the reception team. **You can find more information at [doctorsoftheworld.org.uk](http://doctorsoftheworld.org.uk).**<sup>7</sup>

**Primary Care Research from 2021: Focus groups carried out in Wales:** Found the main barriers for refugees and asylum seekers accessing healthcare were availability of interpreters; knowledge about entitlements; access to specialist services, and being unaware of some services, such as out of hours and preventive health care.<sup>8</sup>

### Reducing barriers:

#### Tips for first consultation<sup>6</sup>

Give yourself at least 20 minutes for the first consultation, especially if using an interpreter.

- 1) Explain to the patient how the NHS works and their entitlements to healthcare: Doctors of the world have a leaflet in 33 languages outlining this [https://www.doctorsoftheworld.org.uk/translated-health-information/?\\_gr=navigating-the-nhs-and-right-to-healthcare](https://www.doctorsoftheworld.org.uk/translated-health-information/?_gr=navigating-the-nhs-and-right-to-healthcare).
- 2) Ensure that they are up to date with the UK immunisation schedule, considering both adults and children. NB only 35% of Ukrainian adults have been vaccinated against Covid 19.
- 3) Explain screening for cancers and other conditions that are available.
- 4) See the [country specific pages](#) for risks of infectious diseases and other possible health issues affecting migrants from different countries.
- 5) Offer screening for hep B, hepatitis C and HIV.
- 6) Work with a professional interpreter (do not rely on friends and family to translate) where language barriers are present. Consider the impacts of culture, religion, and gender on health. Ask the patient if there is a preference for gender of the interpreter
- 7) Assess for mental health conditions, including referral for trauma counselling.
- 8) Discuss chronic disease management, and whether these have been treated in their country of origin.
- 9) Refer pregnant women for antenatal care immediately, in females consider history of FGM.
- 10) Link in with local voluntary-sector organisations who can provide support and link people into the local community

## WiseGP Approach

### Exploring the patients biography...

There is no one size fits all way to assess the health needs of these patients. Like every patient, asylum seekers, refugees and migrants, no matter where they are from, have a unique story, and may have suffered great trauma. This can impact their current and future health.

It is important to recognise this trauma when consulting with these patients. Trauma-informed practice is an approach to care provision that considers the impact of trauma exposure on an individual's biological, psychological and social development.<sup>9</sup> For more information on trauma-informed practice, access the [trauma-informed practice toolkit](#).<sup>9</sup>

Consider the patient's life experiences prior to migration and find out about their circumstances now, for example, where are they living, who with and what support they have. They may suffer with anxiety about the complex asylum process. They may worry about accommodation, money, education or access to legal advice. They may fear detention, deportation and homelessness. They may also be concerned about loved ones they have left behind.<sup>10</sup>

**In this patient group there is a high incidence of mental health issues, but due to cultural differences, patients may present with physical manifestations of psychological distress. Allow your patient time to talk.<sup>11</sup>**

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Our next newsletter will be focusing on antibiotic prescribing...

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## References

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## Further Resources

There are many helpful resources available and communities of practice to join: see details below:

1. Refugee Integration Yorkshire and Humber Local support <https://www.hullccg.nhs.uk/our-work/current-projects/ccg-of-sanctuary/refugee-support/>
2. The British Medical Association has produced an [asylum seeker and refugee health toolkit](#) for medical practitioners.
3. [e-GP online e-learning resource](#) for NHS general practitioners and doctors undertaking speciality training for UK general practice, jointly developed by the Royal College of General Practitioners and e-Learning for Healthcare.
4. Language interpreting and translation: migrant health guide <https://www.gov.uk/guidance/language-interpretation-migrant-health-guide>
5. Right to remain <https://righttoremain.org.uk/>