Forced migration and sexual and gender-based violence (SGBV) in the UK: The Facts from the SEREDA project

Forced migration and SGBV

- The SEREDA project offers new evidence on the SGBV experiences of forced migrants in the UK.
- Between 2018-2020, researchers from the University of Birmingham, interviewed 68 forced migrant SGBV victims, and 26 service providers working with victims.
- Forced migrant women, men and LGBTQIA+ in the UK experience multiple forms of violence including sexual, physical, psychological, economic, and a failure to meet their basic needs.
- Forced migrants suffer the aftermath of the effects of SGBV perpetrated by combatants, smugglers, authorities, and strangers in countries of origin, in conflict, during their risky journeys to seek refuge, and after claiming asylum in the UK.

Forced migrants, SGBV and the UK’s Immigration and Asylum Systems

- Asylum seekers in the UK are not allowed to work, study or be reunited with their families.
- Hostile asylum procedures intensify the SGBV traumas already experienced pre-arrival and lead to mental health problems, such as PTSD, anxiety and depression.
- Asylum interviews often continue for many hours with aggressive interview styles and individuals’ accounts of SGBV refuted. These experiences generate new traumas.
- Some victims feel a great sense of shame about being a SGBV victim and the use of male caseworkers and interpreters makes disclosure of SGBV impossible.
- Post-interview counselling is not available despite the distress and trauma generated by interviews.
- Waiting times for asylum decisions take many years and waiting aggravates mental health problems, as victims are unable to engage in activities that can distract them from thinking about their experiences. They live in terror of a negative decision and return to persecution.
- Unstable and unsafe mixed-sex accommodation, and lack of appropriate shelter increases risks of SGBV, with women and LGBTQIA+ commonly experiencing sexual harassment.
- Rejected asylum seekers are made homeless and destitute and some have to engage in transactional sex in exchange for food and housing.
- The visa conditions of refugee spouses, and of those married to lead applicants in their asylum claim, made their residence in the UK dependent on remaining in that relationship.
- Some partners threaten dependent women with deportation if they are not obedient. Women fear being returned to persecution by authorities or by families who feel shamed by their failed marriage.
- Some victims are subjected to interpersonal violence (IPV) and are unaware that the Domestic Violence Rule means they can seek safety without being deported.
Some are prostituted and/or forced into domestic servitude by husbands who trick them into coming to the UK. Victims are not aware that they have been trafficked and can seek support.

Many victims cannot leave abusive relationships because they have no recourse to public funds and are not permitted to work so cannot access housing or welfare support.

Support for forced migrant victims of SGBV

- The majority of victims receive no health or psychological support. There is insufficient specialist provision for forced migrants SGBV survivors and especially those with complex trauma.
- Some GP practices reject victims’ registration on the (incorrect) grounds that they lack appropriate identification.
- Clinicians lack the skills and knowledge needed to support victims to disclose or to offer care.
- Specialist organisations supporting forced migrant victims of SGBV are underfunded and overwhelmed. Many are fire-fighting immigration cases, access to healthcare and destitution, with limited scope to address trauma.
- Poor physical and mental health impacts on refugee victims’ ability to integrate. Some find help through small community organisations or the aid of neighbours.

Key recommendations

Forced migrant SGBV survivors must be treated with the same levels of care and sensitivity as other victims.

The Home Office should appoint a new entity to oversee protection for forced migrant SGBV victims in the UK immigration and asylum systems, and provide SGBV and trauma awareness training for all those working with forced migrant victims. The following changes are needed:

- Asylum interviews to be more humane. Interviews to automatically be undertaken by women for claimants coming from countries, or via routes, with high SGBV risks, using female interpreters and with specialist NGOs contracted to provide pre- and post-interview counselling.
- Uncoupled women to be placed in safe and single sex accommodation, with female only employees. Accommodation providers to be mandated to ensure safety and security with accommodation regularly audited through on-the-spot checks.

The Home Office to ensure the specific needs of forced migrant victims are integrated into the guidance and implementation of the UK Violence Against Women and Girls Strategy (HM Government, 2021).

Department of Health and Social Care, NHS England and NHS Improvement to provide guidance and training for healthcare professionals about forced migrant SGBV victims, and their care needs and entitlements.

Contact information: sereda@contacts.bham.ac.uk