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TOWARDS INTEGRATION

The Syrian Vulnerable Persons
Resettlement Scheme in the
United Kingdom



IOM International Organization for Migration



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EST 1894


EXECUTIVE SUMMARY

UNHCR and partners studied the degree of integration achieved under the UK's Syrian Vulnerable Persons Resettlement Scheme (VPRS). The programme aims to resettle 20,000 refugees by 2020. The study showed the programme working relatively well. In terms of initial reception and early integration, refugees were grateful for the genuine welcome they had received and impressed by the efficiency with which tasks were completed by central Government, Local Authorities (LAs) and civil society. Nevertheless it also highlighted areas for improvement, notably in English language provision, the need for support on the road to employment and further assistance for housing. Among the key recommendations were the establishment of a national integration strategy to better inform and guide those supporting refugees, for the benefit of this population. Other proposals included a review of surge capacity to ensure LAs are able to support higher numbers in a short time if they chose; strengthening provision of appropriate accommodation by the central Government; and making family reunification planning more integral in the VPRS. UNHCR believes the study shows the UK has the capacity to resettle meaningful numbers of refugees and hopes that, with further development, the model can be used to help more refugees, from Syria or elsewhere, resettle in the UK after 2020.




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 Having recently been resettled with his family under the VPRS programme, 3-year-old Joud enjoys an afternoon on Brighton beach. © UNHCR/Katie Barlow

LONDON BUS T



 Syrian refugee Joud playing on a London bus on Brighton Pier. Joud and his family were resettled to the UK from Syria in 2016. © UNHCR/Katie Barlow

INTRODUCTION

Integration in the refugee context is the end product of a multi-faceted and on-going process. The successful integration of refugees, in all its dimensions (legal, economic and social), is a crucial undertaking. It is a prerequisite for enabling a positive economic impact, but also for refugees to benefit from a welcoming environment as productive members of their new societies and towards building a cohesive social environment. The monitoring of such a process requires specialist skills and expertise.

Since 2015, the UK authorities have significantly increased resettlement activities, particularly for Syrian refugees. This response to the increasing number of refugees in need of resettlement globally has been warmly welcomed by the United Nations High Commissioner for Refugees (UNHCR) and others. Given the significant expansion of resettlement under the UK Syrian Vulnerable Persons Resettlement Scheme (VPRS) in recent years and the need to address related growing integration needs, UNHCR initiated a study on initial reception and integration for Syrians resettled to the UK.

UNHCR, in collaboration with the International Organization for Migration (IOM), partnered with City, University of London, have produced this paper based upon evidence gathered as part of an independent, UNHCR-funded study of the initial phases of the UK Government's VPRS. The study included observations of integration activities, a review of strategy and programme documents, interviews with Local Authority (LA) officials and their partners engaged in integration activities, and participatory assessments with resettled refugees. This paper reports on the observations, highlighting positive findings including good practice and innovation, and identifies shortcomings or areas for development.

At UNHCR, we seek to uphold the basic human rights of uprooted or stateless people in their countries of asylum or habitual residence. We work to ensure that refugees will not be returned involuntarily to a country where they could face persecution. Longer term, we also help refugees find solutions, by repatriating voluntarily to their homeland, integrating in countries of asylum or resettling in third countries.

SCOPE AND METHODOLOGY

The study took place between August 2016 and January 2017. The team comprised: a consultant from City, University of London; and staff from UNHCR and IOM in the UK. The study included:

- desk-based review of LA and Home Office documents on the integration strategy, (where available) monitoring and evaluation reports;
- participant-observation of activities of policy and operational staff and other practitioners engaged in the integration process;
- attendance at internal meetings and meetings with external stakeholders and UK central government departments on VPRS;
- topic/question guided interviews conducted with integration managers from a representative sample of LAs on integration policy;
- participatory assessments with resettled refugees in each of the sample locations.

The participatory assessment process sought to gain a better understanding of the protection and integration problems faced by Syrian refugees arriving in the UK under the VPRS; gather insights into the causes of any problems identified and solutions that might be available; and identify solutions from both the refugees' point of view as well as the stakeholders involved in supporting their integration into the UK. It thereby aims to inform UNHCR's and IOM's programs and advocacy efforts with the respective authorities involved with the VPRS.

Participatory assessment is a process employed by UNHCR that includes building partnerships with refugee women and men of all ages and backgrounds by promoting meaningful participation in the design of programs and advocacy efforts through structured dialogue. Participatory assessments may include holding separate discussions with women, girls, boys, and men, including adolescents, to better understand their specific concerns and challenges and involve them in finding solutions. The information gathered from different groups also reflects a diversity of perspectives and viewpoints, minimizing the risk of exclusion of certain groups in the design of programs and advocacy efforts.

The study involved visits to thirteen VPRS participating LAs in Scotland, Wales, Northern Ireland, the North-East, East Midlands, East of England and South of England. This included meetings with five Borough Councils, five

County Councils and six City Councils within those LA areas. The visit schedule was agreed between LAs and the study team, with the administrative lead from UNHCR, and the Regional Strategic Migration Partnerships (RSMP) assisting in coordination.

Interviews with LA staff and their delivery partner organisations were held locally. LA staff were drawn from across the services (housing, health, social, education) engaged in the VPRS. Some of the meetings included other agencies and public bodies such as the police, National Health Service (NHS), Public Health England, Department for Communities and Local Government and devolved administrations.

Refugees were identified for interview by LA staff or their case workers after consultations with the study team about the format of the interviews and the numbers of refugees to be approached. The purpose of the study was explained to refugees and they were asked if and how they would like to participate. An information and consent sheet in English and Arabic was provided that set out the arrangements for the interviews, outlined the consent process and gave details of the study team. Reflecting the preferences of the participants and practical constraints, interviews were conducted either in mixed gender or single gender "focus groups" of between four to nine refugees, with single families, groups of families, or simply with cohorts of refugees who had arrived in the UK at the same time or who had lived in the same area. Where refugees asked for one-on-one interviews to discuss personal matters they did not wish to share with the group, these were also arranged. A further discussion was held with nine young refugees in their school, accompanied by their case worker, a teacher and an interpreter.

The interviews were normally conducted with interpreter support and in the absence of LA staff or their case workers. Brief background information on the participants was gathered (i.e. gender, family circumstances, date of arrival in the UK, country of asylum, length of stay in country of asylum, place of residence in Syria, occupation in Syria). Using the abovementioned participatory methodology, the group discussions were used to gather qualitative information about expectations, views, impacts and experiences of participating in the UK Government's resettlement programme, and experiences of settlement and integration in the UK and the local area.

Interviews were conducted with 167 refugees resettled through the VPRS since October 2015; 42% of the interviewees were women and 58% men, representing

Table 1: Country of Asylum, Time Spent and Location

	Lebanon	Jordan	Turkey	Egypt	Iraq
Percentage located in country of asylum	53%	17%	13%	9%	8%
Average time spent in country of asylum	3.5 years	2.5 years	2 years	3.5 years	3 years
Percentage (non-camp) "urban refugees"	90%	63%	92%	100%	40%

about 110 families of whom 10 percent were "linked" through close kin. As Table 1 below shows, slightly more than half of those resettled in the UK were previously refugees in Lebanon, with the remainder travelling from Jordan, Turkey, Egypt and Iraq. The average time families spent as refugees in the region before being resettled was between two and three-and-a-half years, the shortest time being 12 months (from Turkey) and the longest five years (from Lebanon). The overwhelming majority of refugees were not living in camps, but rather, reflecting the dynamics of the refugee population in the region, they were living in accommodation in urban areas.

Thirty-eight percent of the refugees interviewed arrived in the UK before Christmas 2015 in the first phase of the VPRS, during which the Government committed to receiving 1,000 refugees. Almost half (48%) of those interviewed entered during the second phase of the VPRS, between May and December 2016, with the remainder (14%) arriving during a "pause" period from January to April 2016 when the Home Office slowed arrivals to take stock of the programme.

Since the study was completed, a number of significant policy changes have taken place in the UK relevant to the VPRS. Where relevant, these are highlighted in the report.

DEFINING INTEGRATION

UNHCR recognises that there is no formal definition of immigrant integration in the context of developed countries or under international refugee law. Broad understanding of integration as processual, individual and two-way underpins many government and academic attempts to define what integration or an integrated society looks like.

UNHCR understands integration to be the end product of a dynamic and multifaceted two-way process with three interrelated dimensions: legal, economic and social-cultural. Integration requires efforts by all parties concerned, including preparedness on the part of beneficiaries of international protection to adapt to the host society without having to forego their own cultural identity, and a corresponding readiness on the part of host communities and public institutions to welcome

beneficiaries of international protection and to meet the needs of a diverse population.

At the core of UNHCR's definition is the concept of integration as a two-way process and this is premised on 'adaptation' by one party and 'welcome' by the other. It does not, however, require the beneficiary of international protection to relinquish their cultural identity, and integration consequently differs from assimilation.¹

ESTABLISHING THE VPRS

The VPRS was introduced in early 2014 by the UK Government with the aim of providing a safe and legal route for certain categories of the most vulnerable Syrian refugees to travel to the UK. Whilst the UK Government's priority remained the delivery of assistance in the region, it recognised that for certain individuals the best option was to provide resettlement support in the UK. Designed to complement existing UK and UNHCR resettlement schemes, the VPRS initially focused on women at risk, survivors of violence and torture and cases with medical needs; 216 people had arrived in the UK under the scheme by June 2015.²

EXPANSION OF THE VPRS

In September 2015, the Government extended the VPRS, including a provision to resettle up to 20,000 Syrian refugees in the UK by May 2020. Previously the sole responsibility of the UK Home Office, the VPRS became the joint responsibility of the Home Office, the Department for International Development (DFID) and the Department for Communities and Local Government (DCLG). Under the extended scheme, resettlement was offered to Syrian refugees in Turkey, Jordan, Iraq, Egypt and Lebanon, who met the UNHCR's 'vulnerability criteria' with additional specific recognition of the needs of children. The UK Government worked closely with UNHCR, IOM, devolved administrations, LAs and Regional Strategic Migration Partnerships to rapidly scale up the response to the escalating crisis in Syria and the region. By end December 2016, 5,454³ refugees had been resettled in the UK to over 200 LAs through the VPRS.⁴



Given that when the scheme commenced in 2014 it was only intended to provide sanctuary to several hundred refugees over a three-year period, the upscaling in resettlement since its September 2015 expansion is considered an exceptional achievement.

RESPONSE TO THE VPRS IN THE UK

The VPRS has been subject to widespread scrutiny since its inception. The UK Parliament has produced a number of briefing papers, most recently in June 2017⁵; the National Audit Office examined the achievements of the programme in a report⁶ published in September 2016 and there have been many other local and regional assessments of the impact of the scheme. The VPRS has been broadly welcomed by the public, media and local and regional authorities who have taken the opportunity to contribute to supporting those in most need as a result of the crisis in Syria. LA support is particularly important given that the success of the scheme, in terms of meeting delivery targets, is reliant on it. The response from the voluntary sector, churches, mosques and community groups to the VPRS has been strong; their participation has generated closer links between LAs and their communities as well as enabling community groups to better understand the scale and sensitivities of providing

support for refugees. This engagement offers the prospect of working towards enhanced social cohesion and an improved understanding of the pressures that families are facing.

PATHWAYS TO RESETTLEMENT AND INTEGRATION

This briefing paper primarily considers the post arrival-phase of the VPRS. However, the process for the refugees accepted onto the programme begins months, sometimes years, before their arrival in the UK. Families and individuals may have been displaced many times before travelling to the UK; initially within Syria to escape conflict, and then to seek refuge in neighbouring countries. The UK Government, UNHCR and IOM co-ordinate closely across the region to ensure that individuals and families are prepared for their resettlement in the UK, as well as gathering information for LAs, which is essential to planning the support package provided for refugees. The successful implementation of the programme in the UK relies heavily upon months of preparatory work in the region. Although not discussed in detail in this paper, it is, therefore, important to recognise that pre-departure experiences and processes are vital to successful post-arrival settlement and integration.



“We left Syria as it was not a safe place for us to be.”
Nehad, Merry, and their son have found safety in the UK. © UNHCR/Katie Barlow

INITIAL RECEPTION AND EARLY INTEGRATION

The UK central government sets out the responsibilities of the receiving LAs for the initial 12 month period of the VPRS in a Statement of Outcomes.⁷ This includes a short period of intensive initial support during which time LAs meet refugees at the airport on first arrival. They provide furnished accommodation with utilities installed and operational; a welcome briefing, orientation and ongoing practical support to help refugees establish themselves in the community; and a cash/clothing allowance for the initial set-up period until benefits and other support is in place. At the time the study was conducted, LAs supported refugees with registration for Biometric Residence Permits (BRP);⁸ with local schools, language classes and health services; and with support setting up bank accounts and providing assistance with access to employment.⁹ They also ensure access to interpreting services. LAs may commission third parties to deliver support services where appropriate. Services are delivered by a range of local partners but tend to be from the voluntary sector or housing specialists with expertise in resettlement support. Where individuals are assessed to have complex needs, additional support and services should be put in place by the LA.¹⁰

The devolved administrations have established arrangements for participating in the VPRS and supporting refugee integration. The Scottish Government has established a taskforce, with representatives from the Scottish and UK Governments, LAs and other partner organisations to coordinate Scotland’s refugee response.¹¹ Similarly in Wales, a Syrian Refugee Taskforce is in place to co-ordinate the response with LAs and the voluntary sector.¹² In Northern Ireland, the Northern Ireland Executive has lead responsibility for implementing the scheme, working with delivery partner organisations.

LAs and devolved administrations commented that the VPRS funding enables them to commit the necessary time to ensure the success of the intensive support period, building a rapport with the new arrivals, and helping them establish themselves in the UK. However, there can be additional pressures when multiple family groups arrive at the same time in one area, and LAs would welcome additional resources at these times.

Refugees were impressed at the speed and efficiency with which tasks were completed and expressed gratitude to

the UNHCR, IOM, UK central government and LAs for giving them safety in the UK and the chance of a new life. Refugees spoke warmly of the reception they had received from their local communities, which they acknowledged as cautious but genuine.

The UK Home Office has explained that a number of steps are taken before resettling Syrians to rural locations to help ensure that they are being appropriately placed. These efforts include aiming to only resettle in remote locations families who had previously resided in rural areas in Syria; asking families if they were happy to be resettled to remote locations, explaining that saying no would not impact on resettlement to the UK; and in some instances providing factsheets on the relevant resettlement location. However, for certain groups, despite these efforts, the initial integration process appears to have been more challenging as a result of rural placements.

Some of the refugees resettled in small towns and rural areas of the UK found the process more complicated

than for those in major cosmopolitan cities. A number of refugees resettled in more remote locations expressed the view that they would like to move to another location in the UK either to join relatives and friends, or to places where they believed there were better employment and education prospects. A small number of refugees, also desired living closer to members of their own community, who could help accelerate the integration process.

Some refugee youths, primarily men but also some women, aged 17-24, including those arriving as part of family groups, found the transition particularly testing and faced relatively greater challenges to successful integration. Some of them experienced disruption in their schooling in Syria and the region. Others had not been able to secure gainful employment due to the conflict in Syria and limited employment opportunities for refugees in the country of first asylum. These factors, together with varying degrees of English language skills, professional certification and trade qualification, posed an added challenge for this particular group.



📷 Mohammad and his family outside their new home in Scotland. © UNHCR/Andrew McConnell

RECOMMENDATIONS

It is recommended that surge capacity and resources are examined by the UK central government and LAs to ensure that adequate initial support is provided and planning takes place where an LA elects to receive a high number of refugees within a short timeframe.

UNHCR advocates for greater consideration to be given to the allocation of refugees to remote and rural areas to reduce the instances of refugees requesting transfers to other parts of the UK. Such transfers can be disruptive to the integration process; require ongoing coordination including over tariff-funding transfers; and are resource-intensive to implement. Where a refugee's transfer takes place without LA cooperation, there is a risk of them becoming "voluntarily homeless" and losing access to the VPRS support. This in turn may undermine their future integration.

Particular attention should be paid to the support provided for young men and women, where there is a recognised need to find practical solutions to accelerate their integration through continuing education and skill development opportunities. In addition, where skills and qualifications are already present, support should be given to ensure that these are validated in the UK. This will enable refugees to become more self-reliant and better integrated in UK society.

SOCIAL COHESION

For the majority of LAs, given political support to participate in the VPRS and a financial assessment of the council's capacity to receive refugees, the decision to accept Syrian refugees is based on five main considerations: first, the household category based on vulnerability¹³; second, availability of suitable and affordable housing; third, the nearby availability of school places with appropriate support where required; fourth, the accessible provision of hospitals, general practices and other clinics; and fifth, assurances from the police and community safety teams that relocation to a specific location presented minimal risk in relation to safety and community cohesion. Subsidiary considerations include the availability of property in reasonably close proximity to other families linked by kin, or in areas with good public transport.

The study found that the general barriers to community cohesion in the arrival and settlement of refugees through the VPRS were low. LAs have established partnership arrangements across the services (housing, education, health etc.) drawing in statutory bodies (police, NHS etc.) and work in close collaboration with the voluntary sector, providing an effective response to the resettlement needs of refugees and promoting social cohesion and engagement. The partnerships forged have had benefits for LAs beyond the immediate VPRS, with councils feeling more confident about participating in other refugee resettlement schemes. Coordination between councils in two-tier authorities has also been effective. The involvement of the RSMPs has also helped enhance information sharing and coordination between LAs and other organisations supporting the VPRS.

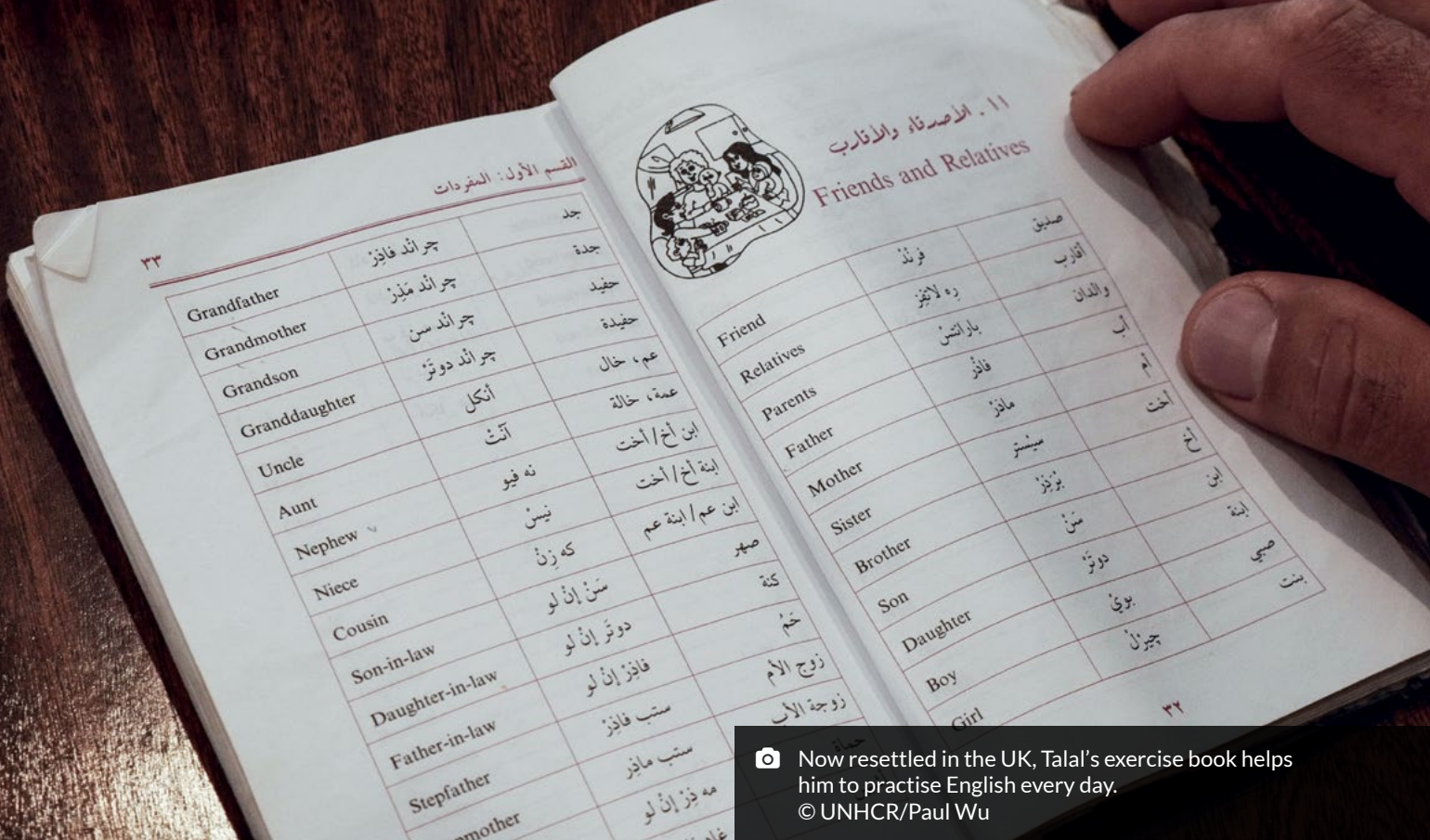
As part of the welcome and integration process, LAs and refugee organisations such as the Refugee Council, Refugee Action, British Red Cross and Scottish Refugee Council are working to ensure that the arrival and acceptance of refugees into an area is carefully managed and that community, church and volunteer groups involved in supporting the refugees are fully aware of sensitivities and concerns around their arrival. IOM has to date provided 35 information sessions on Syrian refugees to nearly 900 participants in LAs and communities receiving refugees, complementing the information provided to Syrian refugees prior to arrival. LAs are engaged in an ongoing process aimed at emphasising the need to protect the identity of refugee families in advance of their arrival and remain discrete about the whereabouts of refugees in order not to draw undue or unwelcome attention to families as they settle into a new area.

Responses gathered through the interviews underscored the significance of continued pre-departure health screening and security/criminal background vetting. Regarding the latter, LAs highlighted the importance of being able to explain to local residents security screening procedures undertaken by UNHCR and the UK Government for reassurance purposes. However, some felt that additional information on those procedures could be provided to LAs so that they could describe the relevant procedures with more confidence. Responses also highlighted the importance of early identification and monitoring of risks to integration success where these may reduce individual resilience and affect behaviour.

RECOMMENDATIONS

To help ensure social cohesion, it is recommended that LAs and delivery partners closely monitor individual cases with early integration challenges where non-participation in integration activities is identified and early intervention required to prevent isolation and diminished resilience.

LAs recognize the importance of security checks undertaken as part of the VPRS by both the UNHCR and the UK central government. To ensure that LAs are sufficiently informed for engagement with the community on issues relating to security checks and public confidence, UNHCR and the UK central government should review information provision to LAs on the robustness of security procedures, including information on security checks and integrity safeguards at various stages of the resettlement process.



Now resettled in the UK, Talal's exercise book helps him to practise English every day. © UNHCR/Paul Wu

INTERPRETATION

The critical role played by interpreters in arrival, adaptation and settlement was acknowledged by refugee resettlement staff as well as by the refugees themselves. The presence of professionally trained interpreters was seen as vital during the first three to four weeks following a family's arrival when the most intensive support was required and disorientation most likely.

LAs suggested that the model that appeared to work best involved an Arabic speaking case worker with previous experience of housing, welfare or community health work, managing a case load of no more than three new families at any one time, who was embedded in a resettlement team and was included in management level multi-agency partnership meetings. Through this model, case workers were able to draw on their previous experience, develop a relationship with refugee families, quickly gain knowledge about their particular circumstances and needs, and explain from the outset what levels of assistance would be available in the coming months and years, thus managing expectations and encouraging independence.

Such an arrangement was not possible in all LAs, where suitably-trained Arabic speaking professionals were not available. In those cases, interpreters were privately contracted for key meetings either in person or via telephone interpreting services. The benefits of employing agency interpreters included assurance over the quality

of the service and a guarantee of a necessary level of detachment between the interpreter and the refugee family. This was seen as important in those locations where the experience of working with locally-based freelance interpreters or volunteers had raised problems of confidentiality, specifically where the lines between interpreting, counselling and befriending had become blurred. In addition, volunteers, in their natural enthusiasm to help, in some instances, may also give information not necessarily aligned with official information, in some cases confusing service provision.

RECOMMENDATIONS

There is a need to provide training, particularly for volunteer interpreters, which includes establishing the duties and responsibilities of the interpreter in different interviews and other settings. The training should emphasise the need for independence, confidentiality, consistency and impartiality; raise awareness of the challenges of working with refugee populations where distress or trauma could be a factor; and improve knowledge about the background to conflict in Syria and the displacement that has occurred.

ACCOMMODATION

In taking decisions on accommodation, LAs showed an acute awareness of the need to manage wider community concerns over pressures on housing and other services. Specifically to assure residents – including those already in the private-rented sector as well as those in the social housing sector – that newly-arrived refugees resettled under the VPRS would not place additional demands on social housing. In the majority of LAs, housing for resettled refugees was secured from the private rented sector rather than using social housing even where such housing was available. The majority of resettled refugees arrive in family groups, typically with two or more children, resulting in the need for larger, three-to-four bedroom properties. In addition, those with mobility challenges may require properties that can be adapted. Although the numbers of families in any one location is quite small, LAs recognised a danger of ghettoization and drawing attention to Syrians as a group, and for this reason there was a preference not to cluster families in one part of a town or city.

Financial support provided by the Home Office enabled LAs to secure private-rented sector and other sources of accommodation in the first year of the VPRS that met the housing needs of new migrants and did not compromise refugee or community safety. It is also understood that the Home Office operates a proactive case management approach to reduce waiting times for large cases and those with mobility issues. However, the stock of properties available for rent at close to Local Housing Allowance (LHA) rates (as opposed to the higher market rates) was reportedly small and diminishing in areas covered by this study. Many LAs expressed concern that refugee families could struggle to access good quality and secure housing in the coming years for a number of reasons:

- The introduction of a cap on benefits in November 2016, limiting the total amount of money that a family (outside London) could claim in benefits to £20,000 a year,¹⁴ would have a detrimental financial impact on a large proportion of refugee families resettled under the VPRS. A number of LAs are already using discretionary housing payments (DHPs) to cover the gap between the LHA rate (covered by housing benefit) and the market rates but argue that such payments are not sustainable and, if continued, would undermine the broader objective of building the refugees' capacity to be independent.
- The often complex health and social needs of “vulnerable” families, a lack of English language and instances of illiteracy in both English and Arabic, mean there is a continuing risk of refugee families not understanding their rights or the policy and legal context of housing, and without intensive case worker support after year one, may drift into insecure and poor-quality housing.
- Private-sector rented properties have been difficult to access where landlords have shown a reluctance to let their properties to refugee families on benefits even with council guarantees. This appears to be based on a number of misapprehensions about the rights and entitlements conferred by Humanitarian Protection status, in particular, the widely held belief that refugees are not entitled to work and would be expected to leave the country after a number of years. However, since the study was conducted, the government has announced that those resettled under the VPRS will be granted Refugee Leave instead of Humanitarian Protection from 1 July 2017. Those who have already been resettled here will be able to request to change their status.¹⁵ This is a very welcome move and should help address concerns related to the earlier conferral of Humanitarian Protection (also see Legal Status below).

Refugees interviewed by the team were generally happy with their accommodation. Most importantly they reported feeling safe both in the neighbourhood and once inside their properties. In some instances, family members had chosen to live together rather than in separate properties (typically parents moving in with sons or daughters, or sons and daughters moving in to their parents' home). Despite LAs allocating refugees to accommodation in accordance with statutory rules, the decision of family members to subsequently move in with each other can result in overcrowding. A very small number of refugee families sought alternative accommodation because of accessibility problems and the difficulties of adapting or modifying particularly older properties.

RECOMMENDATIONS

Provision of affordable, secure and suitable accommodation is very important for the success of the VPRS. The cap on benefits introduced in 2016 will increasingly require councils and districts to make discretionary housing payments towards the costs of housing where housing benefit has been reduced. LAs, the church, and voluntary, social and private landlords have sought practical solutions to the housing problem but the contribution of these will always be limited. The Home Office should consider strengthening the provision of appropriate accommodation including, where appropriate, through further contributions towards the additional costs.





ACCESS TO HEALTH CARE AND TREATMENT


VPRS has played a key role in securing life-saving medical support for many resettled Syrians. A number of those resettled will have acute and chronic conditions and the VPRS scheme provides an opportunity to access treatment that improves overall quality of life. In common with other UK refugee resettlement programmes, the VPRS requires that refugees undergo a Medical Health Assessment (MHA) prior to their relocation.

The principal objectives of the health assessment are to identify health conditions for which treatment is recommended before the individual travels to the UK, and to ensure that refugees are safe to travel. It also informs the provision of any necessary special travel requirements for the most vulnerable cases. Additionally, the MHA ensures that current tuberculosis screening practice is met in all pre-entry assessments, helps identify conditions and diseases with public health significance so that these can be addressed before travel, and offers immunisations, wherever possible.

Importantly, the MHA is also a means of providing medical information to resettlement authorities in the UK for the purpose of organizing immediate or urgent care and treatment if required upon arrival, as well as sharing necessary information with LAs to allow them to prepare for new arrivals and provide appropriate accommodation and facilities. Fully and accurately reporting health concerns in the refugees' pathway to integration is of key importance both for the well-being of the individuals involved and the wider success of the programme.

Refugees interviewed worried most about securing treatment for their health problems and in some instances may have travelled to the UK with unrealistic expectations of treatment available. Many are overwhelmed by a public health service with complex referral rules and waiting lists, where the patient is expected to manage much of their treatment through appointments, ordering their own medication through chemists and renewing prescriptions. Understanding and using the system can be challenging. That is even more so for those with poor or non-existent English, particularly where the treatment is for very serious illnesses such as cancer, kidney dysfunction requiring dialysis or for plastic surgery to treat extensive burns.

When intensive support ends and individuals no longer benefit from Arabic speakers to accompany them to consultations or to translate medical correspondence,

 Jinan, her parents and two siblings, fled their home in Syria and lived as refugees in Lebanon, before being granted resettlement in the UK.
© UNHCR/Andrew McConnell



falling back on telephone interpreting service or relying on children to translate can lead to a sense that they are not in control and unsure about their condition or the treatment being proposed.

In trying to address this issue whilst understanding the constraints under which the pre-departure health assessment are undertaken, some LAs would welcome more, comprehensive descriptions of an individual's health conditions to make decisions about accepting cases, and in securing and preparing suitable accommodation, school places with support as appropriate, and medical services in advance of arrival. In some isolated cases, LAs' concerns centred on the perceived failure to identify and/or record medical conditions, including mental health issues, and an underreporting of the severity of conditions.

Where details have not been fully reported or in instances where new medical complications are presented immediately prior to/on arrival, additional challenges may arise for LAs in the provision of immediate specialist medical intervention and adequate ongoing support, leading to delays for patients with complex medical needs. This may also lead to difficulties in the allocation of accommodation where properties that were thought to be suitable were found to be inadequate only on the families' arrival or following a medical assessment in the UK.

It is acknowledged that the current scope of the MHA focuses on assessing an individual's fitness to travel, rather than providing a comprehensive assessment along the lines of referrals commonly received by local clinics in the UK. The current Health Protocol does not

include provisions for mental health assessments; this report therefore welcomes the pilot, which is currently ongoing, to include enhanced mental health assessments in pre-departure health assessments. LAs have, however, requested that the provision of medical information provided on individuals and families be strengthened.

RECOMMENDATIONS

To the extent possible, all relevant actors should continue to prioritise the provision of medical information to receiving LAs at as early a stage as possible. The Home Office, IOM and UNHCR may explore the possibility of securing additional medical information from treatment centres in the region to assist medical professionals providing care in the UK.

This report acknowledges the importance of refugees, LAs and all stakeholders having realistic expectations. It is, therefore, recommended that opportunities to address unrealistic expectations at various points throughout the resettlement process, including pre-departure and post-arrival, be managed effectively. This includes raising awareness amongst LAs on the scope of pre-departure health assessments so they can better interpret the information provided.



📷 First trip on the London Underground for a Syrian family who were resettled from the Bekaa Valley, Lebanon.
© UNHCR/Paul Wu

MENTAL HEALTH AND PSYCHOSOCIAL PROVISION

UK Government figures¹⁶ show that approximately two-thirds of the refugees who arrived under the VPRS before September 2016 were resettled as part of cases under the survivor of violence and torture violence or specific medical needs grounds. Amongst the cases resettled, therefore, there are individuals with extensive physical and mental health needs, which LAs need to be in the best position to respond to.

LAs expressed concerns that, while there is additional funding to cover health costs in years two to five of the tariff, there are uncertainties about the ongoing costs to local councils and the NHS of supporting refugee families with complex mental health and social needs beyond the term of the VPRS. Further concerns about psycho-social and mental health needs, both those that are known and those that are likely to emerge, are also expected to challenge LAs, particularly in those parts of the country with few mental health services.

RECOMMENDATIONS

LAs and UK central government should closely monitor the provision and associated costs of medical care for those resettled to the UK to ensure that gaps do not arise, particularly beyond the term of the VPRS.

FAMILY REUNIFICATION

It is generally agreed that the family is the fundamental group unit of society entitled to protection by society and the State. Separation of family members can have devastating consequences on peoples' well-being and their ability to rebuild their lives and this is further exacerbated in a situation of forced displacement. Family unity is, therefore, key in bringing normality into the lives of persons who have fled persecution or serious harm and have lost family during forced displacement and flight.

If one family member is being considered for resettlement (e.g. on protection grounds), UNHCR will seek to ensure, where possible and in line with the principle of family unity, that all of the refugee's family members, including dependent non-nuclear family members, are resettled together. Wherever possible, UNHCR promotes the restoration of family unity within a country of refuge while the family awaits a durable solution. Efforts are also made to preserve the integrity of family groups in the course of resettlement operations and to promote the admission of refugees who need to be resettled in countries where they have relatives or other personal ties. This not only provides protection and a durable solution to the separated family members in exile but also helps the family in the UK to fully-concentrate on integrating successfully. To this end, during registration and the resettlement interview, refugees are asked about their family composition and whether they have family members in a resettlement country. The existence of a family tie in a resettlement country is one of a number of factors that determines whether a refugee will be submitted for resettlement consideration to that country. Once it is established that a refugee meets the resettlement criteria, a resettlement country is selected based on the profile of the individual case concerned, as well as other factors such as the priority of the case (emergency, urgent, or normal), the availability of resettlement quotas, and any additional criteria set by the resettlement country (e.g. family size).

Where refugees with family members in the UK are accepted for resettlement, efforts will be made by the UK Government to resettle them close to their family, ideally in the LA where the UK-based family lives. This is not, however, always possible. LAs and partner organisations commented that if, despite efforts, family members are based in different locations, resettled Syrian families are highly motivated to reunify their scattered relatives in one place. The location may not necessarily be the UK and families may seek to move on to countries where members of the extended family group have acquired a more permanent and secure residency status.

Family reunification in the UK may happen through the asylum route, through the VPRS or through family reunion and other routes under UK immigration law. Many LAs mentioned a lack of confidence in understanding how various family reunification processes work, and feel that they have insufficient information to best guide those families interested in having their family members join them in the UK. They thus indicated a need for additional guidance on this matter.

Some LAs mentioned that families reuniting, through the various channels, may create an increased accommodation demand that will be difficult to meet especially for larger properties and properties in close proximity to one another. However, it was also acknowledged that family reunification would bring integration benefits to resettled refugees.

RECOMMENDATIONS

UNHCR continues to actively promote facilitated family reunion in the context of the Syria emergency, where countless families have been separated.

In March 2016, UNHCR released a briefing paper on family reunion in the UK²⁵, in which there are twenty-two recommendations made that are highly pertinent to integration. These recommendations should be given careful and favourable consideration by the UK Government.

It is recommended that provision for family reunion be built into ongoing planning and strategy development relating to VPRS to help ensure that, where appropriate, family reunification needs can be met, thereby facilitating more effective integration. It is also recommended that such planning includes further guidance to LAs on the family reunion process.



3-year-old Joud being taught to read and write at a nursery in South London.
© UNHCR/Katie Barlow

EDUCATION

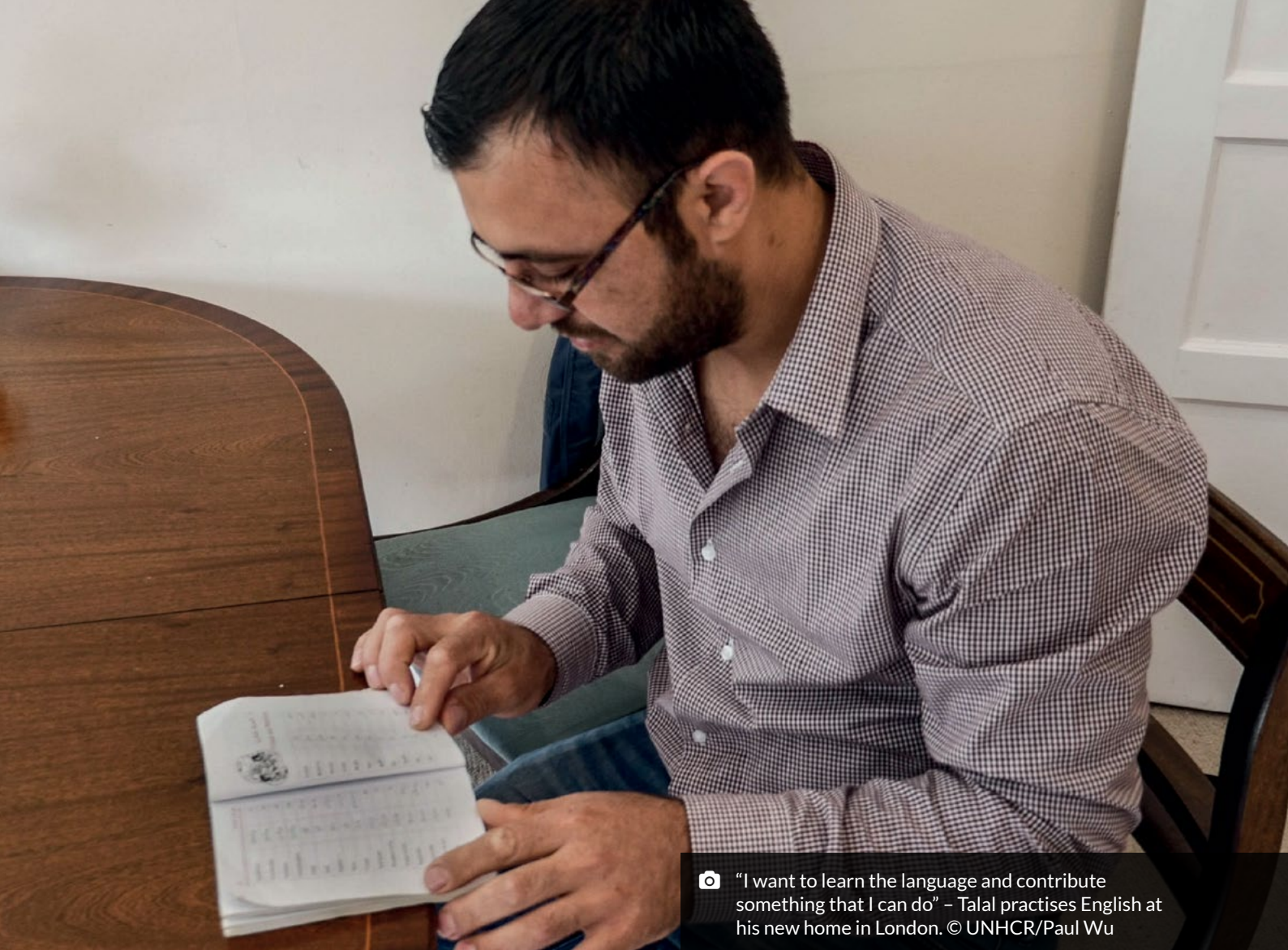
Families interviewed were particularly heartened that their children could enjoy pre-school, primary or secondary school, catching up on lost education in Syria and in the region, and were encouraged by the fact that children were quickly acquiring English language skills and making friends.

At schools visited by the team, Syrian parents discussed the education of their children, their participation as parents in the life of the school, and their aspirations for the children's future. Overall the responses were very positive. Parents spoke proudly of the progress their children were making in acquiring English and, once competent in the language, their general progress in academic subjects, and also in making friends with fellow students. Teachers spoke warmly of the children, believing them to be a positive presence in the classrooms, where their understanding and experience of world events contributed to the general student population's knowledge.

More broadly, it was felt that the involvement of parents and children in the school community could make a positive contribution in the integration of the family in the wider society.

RECOMMENDATIONS

Each child resettled under the VPRS attracts an education allowance to contribute towards costs incurred by the school in providing a place, and additional funding for education is provided to the LA tariff for each child where the case is deemed complex. The study found that schools were not necessarily aware of such funding, or were unsure about the application process. It is recommended that an improved information flow is provided to schools to ensure that they access all available funds and support.



“I want to learn the language and contribute something that I can do” – Talal practises English at his new home in London. © UNHCR/Paul Wu

ENGLISH LANGUAGE

It is widely agreed that knowledge of the receiving society’s language is considered to be integral to successful integration. It is, therefore, crucial that provision of English for Speakers of Other Languages (ESOL) is adequate and appropriate for the integration of Syrian refugees. The UK Government’s September 2016 funding commitment of £10m towards English language classes for Syrians arriving under the VPRS and Vulnerable Children’s Resettlement Scheme (VCRS) is a very welcome step towards enhancing their integration process in UK society. This is to be used flexibly, with guidance provided to LAs recommending only that it be used to provide an extra 12 hours per week of additional ESOL classes for up to six months. It is noted, however, that refugees either resettled to the UK under other resettlement schemes or recognised in the UK do not benefit from the additional funding. At the same time, strengthened English language provision would also play a similar role in enhancing the integration prospects for non-Syrian refugees.

Attendance at and completion of English language courses for those refugees below ESOL entry level 2 is a requirement for receiving certain benefits. Despite this, a number of adult refugees admitted that they were struggling with both ESOL and less formal conversation classes and as a consequence were progressing more slowly than they had anticipated or hoped. This was particularly the case for those joining classes mid-term; based in locations where the provision of ESOL classes was limited or catered for large mixed ability groups; and for those who struggled with the mainly literacy based classroom style of learning in which no Arabic was spoken and full and immediate immersion into English was the norm. Concerns over some instances of low attendance rates was shared by some LAs and case workers.

Nonetheless, the acquisition of English language skills is viewed as vital by all refugees interviewed for a number of reasons:

- First, the rapid acquisition of English was seen as vital for employment, enrolment on vocational and skills training courses and upgrading qualifications.
- Second, resettled refugees spoke warmly of their limited interactions with British people, particularly with their neighbours and wanted to deepen that engagement, to hold meaningful conversations as a critical step towards belonging in their new communities.
- Third, many of the families have arrived with complex health needs requiring frequent hospital visits and receiving medical correspondence with complicated but important information. While support from Arabic speakers to help understand such correspondence will be available during the first year of resettlement, access to such support will decline and refugees as patients will increasingly have to manage their treatment for which a capacity in English is recognised as vital.
- Fourth, refugees felt that knowledge of English will help them better understand the law, culture and norms of the British society. This in turn will help them become successfully integrated in the UK.

It is clear from the study, that there is a lot of enthusiasm amongst the refugees to benefit from ESOL, as evidenced by the high rates of attendance in general. However, there was also recognition by LAs that attendance rates are relatively low (considerably short of the DWP ceiling of 16 hours per week) among certain specific categories of refugees and efforts were being made to address this. The situation is not consistent across the country, however. There were several groups identified with relatively low attendance, as follows:

- First, those who were not literate in Arabic or English and for whom learning based on letter and word recognition was a significant challenge. Within this group the elderly felt left behind.
- Second, a small number of women with young children: even where funding was made available for childcare, some young mothers tended to have lower attendance rates than their husbands.
- A third group of concern, though small in number, were 18-24-year-olds, mainly men, who were neither in full-time education, training, volunteering or employment, some of whom had responsibility for caring for parents.

- And finally, the study encountered a very small number of refugees who arrived in the UK with mobility issues (wheelchair users), serious medical conditions (requiring surgery or ongoing medical treatment for life threatening conditions), and others with serious psychological conditions. Their conditions and treatment regimes understandably proved major barriers to attending language classes.

LAs, their partner organisations, community groups, churches, mosques, ESOL teachers and college lecturers on a voluntary basis, and the refugees themselves, were pursuing a whole range of practical solutions to improve speaking and listening skills. Informal classes have been established across the country and are in heavy demand. Such classes are usually open to all migrants, asylum-seekers and refugees providing an opportunity for social engagement. Befriending initiatives benefit particularly mothers with children, where home visits provide an opportunity for conversations in English. Refugees are also taking advantage of self-learning material via free on-line tutorials, YouTube videos and the BBC.

RECOMMENDATIONS

Initiatives are being explored to increase the number of English language course hours available to resettled refugees (including through additional central government funding), and these initiatives should be continued. Consideration should, for example, be given to stipulating a minimum number of hours of English language training to be given by LAs to refugees to ensure consistency in provision across the UK. The UK Government is encouraged to: provide additional support for low participation groups, specifically, women with young children, youths aged 18-24, and elderly refugees; identify the reasons for low participation; and provide additional assistance to increase participation (e.g. at-home family learning).

EMPLOYMENT

Most of the refugees interviewed for this study have been in the UK for less than 18 months. A small minority of those are now in part-time or full-time employment (including shop assistants, waiters and kitchen hands). Roughly 25 percent of those interviewed and of employment age were engaged in voluntary work, typically for a few hours a week. However, the vast majority were attending a mix of formal ESOL, pre-ESOL classes and informal English conversation classes. Most men were skilled with some previous work experience (in Syria and/or in countries of first refuge) or trade such as carpenters, builders/labourers, chefs, stone masons, plumbers, barbers or shop workers. A small minority of men and women had university level qualifications including in engineering, psychology and nursing though their studies were typically disrupted by the conflict and as a consequence of their displacement in Syria and the region. A smaller number of women compared to men were previously in employment including in nursing, hairdressing, journalism, teaching and government service.

LA representatives interviewed understood that the priority of the Department of Work and Pensions was to promote English preparedness before employment. This was accepted by LAs as a realistic way to proceed initially; however, all agreed it was important to ensure a shift in emphasis towards gaining employment by the end of the first year. In addition, recent research has highlighted the importance of early labour market integration in the long-term integration achievements of refugees. In those LAs hosting refugee families who had been in the UK for eight months or longer, a number of initiatives were underway to create pathways into employment. This was seen as a particular priority where a high proportion of their families would have an additional adult member in the coming one to two years as their children aged. In addition to seeking volunteering places, the initiatives included working with private skills trainers, council-based skills' units, further education colleges and local and national companies to prepare refugees for employment through work placements (including shadowing), CV and interview preparation, and skills and qualification upgrading (for example in trade-linked health and safety). In a very limited number of cases, construction companies who offered work placements were also providing English language programmes. Such initiatives are important in enabling refugees to gain valuable skills, to be awarded certificates for the knowledge they have acquired, and importantly to boost their sense of self-worth and belonging in the UK.

While “into work” programmes for refugees were welcome, the scale was modest, and the participation rates quite low. LAs were generally working in isolation developing tailored programmes with a minimum of shared learning between LAs.

RECOMMENDATIONS

While there is a general acceptance that priority should be given to English preparedness, LAs should also emphasise and direct resources at employment preparation at the earliest opportunity to ensure self-reliance and mitigate any risk of dependency. LAs should explore opportunities that encourage and enable refugees to take entry-level jobs, educating employers about the work entitlements of VPRS and other refugees, and encouraging employers to provide language training alongside employment or vocational training.

It is recommended that central and local government better coordinate their programmes for employment preparedness, to learn from best practices across the UK, but also to learn from experiences in other countries where companies are more active in integration activities including language and vocational training. A skills audit of refugees, which is recommended, provides a basis for engagement with local and national employers.

LAs should ensure information about equal opportunities in UK and access to work for women fully prepares families for the work environment in the UK with the expectation that both men and women may find employment outside the home.

MATCHING AND MOBILITY WITHIN THE UK

The resettlement process relies on LAs identifying and securing properties to which refugee families can be “matched,” where the main considerations are security of tenure, affordability, health, physical access and education needs, and community safety. LAs and their partner organisations were keen to explore the potential for expanding the matching criteria to find a better fit between the resettling family and their final destination to improve integration outcomes and reduce the risk of transfers being requested e.g. where refugees with particular skills and experiences were matched to an area of high demand.

In addition to other matching considerations, there are indications that in the future LAs may have preference for refugees who have family connections with refugees already resettled in their area. This responds to the strong requests from refugees for family reunion, and an assessment on the part of LAs that integration success would be more likely where families are reunited. There are signs that such matching is happening through the refugee referral and LA acceptance process. It is also happening with the movement, at their request, of a small number of newly-arrived refugees from their original to alternative locations in the UK, usually with the assistance of and through the coordination actions of LAs (with the RSMPs playing a role). However, there is no clear policy position from the Government on reunification.

The reasons a few refugees sought to be relocated, or moved without assistance, fell into two categories. First, there were those who were not unhappy in their original location but who were moving to join family members, either asylum-seekers or VPRS resettled refugees, who had been settled in a different part of the country, or to study at a university. And second, refugees who were dissatisfied with their original location and who had identified what they considered to be better opportunities elsewhere. The push factors for these refugees included what they perceived to be a sense of “isolation,” the lack of a close by Arab or Syrian population, the lack of a mosque and halal food, and a lack of economic opportunities, in particular employment opportunities that matched their skills or their ambitions.

Relocation has taken place within counties and between counties both in the same region of the country and to further afield. Where there is a reasonable case for relocation to take place, the LAs, sometimes working through the RSMPs and the Home Office, have cooperated, allowing the VPRS tariff to be transferred, and where necessary compensation paid to cover any additional costs incurred by either LAs.

At present, the number of requests to relocate is very small and individual cases are mostly manageable. Some LAs, however, cautioned that if the number of requests grows significantly as the VPRS progresses then it could create problems for the overall programme as destinations that are thought less desirable simply become points of entry and stepping stones to other more desirable locations, in particular, larger cosmopolitan cities. Accepting that onward movement is inevitable, it is critical that this issue is actively addressed, including through cooperation between relevant authorities in order to avoid the VPRS being discredited.

RECOMMENDATIONS

Given, on the one hand, the disruption to refugees and LAs as well as the additional resources required to support relocation, and on the other, the substantial integration benefits associated with family reunification for refugees, the UK central government should provide further guidance to LAs on how family reunification will be addressed in the refugee referral process and future matching.

It is acknowledged that there are always limitations in matching processes, as the decision of where to rebuild one’s home is a very personal one. The potential benefits of enhanced matching are recognised. However, the level of personal details required to make such decisions cannot easily be gathered and agencies engaged in the resettlement process face capacity challenges in undertaking such a complex task within the resettlement model currently used. However, efforts to enhance the effectiveness of matching, such as the recent video conferencing pilot, are welcome. It is recommended that further consideration be given to strengthening the matching process.

INFORMATION AND ORIENTATION

Refugees and LAs agreed that providing accurate, timely and ongoing information throughout the resettlement process was vital to the integration process. All actors involved in the resettlement process are aware of the problem of high and unrealistic expectations of resettlement and the challenges such expectations create for resettling authorities and their support providers. In some instances, for example, refugees interviewed indicated that they had unrealistically high expectations before departure relating to the speed of health-care provision, accommodation size and location, and general living conditions in the UK, which could have been minimised through strengthened information provision. It was important to ensure consistent information flow as well as to better manage resettlement-related refugee expectations at each stage of the resettlement process, including the principle of fully informed consent underpinning the VPRS.

The pre-departure cultural orientation sessions offer an ideal initial opportunity to provide the essential facts that refugees need in advance of their arrival. These sessions currently focus on basic information with key messages, including topics such as access to health, housing, education and benefits, and an explanation of refugee rights and entitlements. Ideally, pre-departure orientation provides the bedrock from which continuing orientation provided by LAs can be built and delivered upon arrival in the UK. Such post-arrival orientation is also integral to providing more locally-specific information to enhance the general pre-departure orientation offered to Syrians being resettled across the UK. It is recognised that the pre-departure orientation programme has been significantly overhauled since the upscaling of the VPRS in September 2015, including through additional sessions being provided to refugees (from five to 10 hours) and strengthening of the curriculum substance and delivery format.

Whilst successful integration requires adaptation on the part of resettled refugees, it is also important that they receive adequate help in doing so. Given the fact that refugees come from varying backgrounds and experiences and are being resettled to a variety of locations, it is important to ensure that they are provided with ample support in better adapting to what may be for some a different way of life than they were previously accustomed to.



“I was very happy when I came here. It felt like home.” Hiba and her daughter at their new home in London. © UNHCR/Paul Wu

RECOMMENDATIONS

The importance of a continuum of information provision throughout the resettlement process, which includes cultural orientation, is recognised. It is recommended that a regular review of the continuum of information provision is conducted to ensure that it is effective. The review should examine sources, types, delivery and sequencing of information in the context with which it is received by refugee families. Non-formal information and impressions passed between refugee families and gathered from social media, which are not always accurate, should also be considered. It is also recommended that options for enhanced coordination between pre-departure and post-arrival stakeholders for improved information provision are explored.

LEGAL STATUS

There was uncertainty among refugees interviewed about their Humanitarian Protection status in the UK, in particular with reference to travel documentation and entitlement. This lack of understanding about their new status and what would happen to them after five years made it more difficult for some to plan, invest and commit to the long term. Employers and LAs were also uncertain about the rights and entitlements that came with Humanitarian Protection.

LAs reported that the UK's differentiated, or multi-tiered, asylum and refugee system in which there are multiple legal statuses, pathways to citizenship, and inconsistencies in the levels of integration support creates confusion in the minds of refugees and divisions between categories of resettled refugees, and between resettled refugees, in-country recognised refugees and asylum seekers (often originating from the same country and who are in contact with one another), contributing to disaffection and expectations that are difficult to manage.

Refugees resettled under the scheme and interviewed for this study arrived with a three-month visa permitting Leave to Remain outside of the Immigration Rules. On arrival, the refugees were issued with a Biometric Residence Permit with five years' Humanitarian Protection, a status ordinarily used for people who have not been granted refugee status. In the UK, those deemed eligible for Humanitarian Protection have rights to work, education, healthcare, and other benefits. Once established under the Programme, refugees are eligible to apply for family reunification for immediate family members under the UK's Immigration Rules. After completion of five years under Humanitarian Protection, individuals are eligible to apply for Indefinite Leave to Remain in the UK, also known as Settlement Protection.

As indicated above, since the study was conducted, the government has announced the move to grant Refugee Leave to those admitted under the VPRS (and VCRS) effective 1 July 2017. This is a very welcome move and should help address some of the concerns highlighted in this section.

RECOMMENDATIONS

The UK Government decision to grant all refugees resettled in the UK Refugee rather than Humanitarian Protection status, will increase the likelihood of integration success by: (i) giving certainty to refugees and the wider community, including LAs, employers and educators, about the rights and entitlements of resettled refugees; (ii) enabling refugees to have a long-term view on their integration from the outset of the resettlement process; (iii) enabling refugees to apply for affordable and accessible travel documents to reconnect with family and friends, thereby addressing separation, which can be a key source of anxiety.

Consistency in how resettlement schemes function in terms of levels and type of support available to both LAs and refugees to avoid different classes of refugees with different entitlements is important. Ideally, existing schemes should be aligned so that all reach the "gold standard" of the VPRS.

The central government should also support LAs and their partner organisations in extending access to the support available through the VPRS to those who become refugees through the asylum route.



📷 A new start: Talal plays games with his son Hisham.
© UNHCR/Paul Wu

MONITORING, EVALUATION AND LEARNING

The success of any resettlement and integration programme is dependent upon high quality evaluation and monitoring. There has also been no widespread systematic evaluation of the integration of refugees since the Survey of New Refugees in the United Kingdom, between 2005 and 2009, which was published in July 2010.

LAs were asked by the Home Office to record data after refugees had been in the UK for two and 12 months and then submit this data during two submission windows – in October and April. However, it is understood that after the first round of submissions in October 2016, the process was simplified whereby LAs are now asked to provide monitoring data on their VPRS arrivals at two points during their first 12 to 18 months in the UK. This is intended to allow for the examination of changes in outcomes over time and creation of different arrival cohorts to see how length of time in the UK affects this. Separately, LAs are developing their own monitoring and evaluation tools and set of indicators which take into account the specific dynamics of refugee integration in their particular region.

While the data being collected by the central government can provide a useful baseline, the scope of the monitoring appears to be limited and it is not clear how the data will be used, how learning will be derived and how the findings will be fed back to LAs and their delivery partners. Lessons could be learned from collating these models for monitoring and evaluation.

LAs are keen for the central government to move ahead with its plans for a detailed and comprehensive evaluation of the VPRS. UNHCR understands that a new monitoring framework has been decided upon by the Home Office which has been heavily informed by the “Indicators of Integration” work by Ager and Strang. There is an opportunity for the Home Office to work in collaboration with UNHCR and LAs to develop a “Resettlement and Integration Risk Model” that anticipates risks, guides monitoring and evaluation, identifies interventions to mitigate against risk, and better plan for future resettlement and integration.

RECOMMENDATIONS

The central government is encouraged to work with the UNHCR, IOM, LAs and their delivery partners to develop a monitoring, evaluation and learning strategy for the VPRS based on an assessment of integration risks (identified in the report as the risks of joblessness, marginalisation, poor housing, poor health and social disarticulation) and strategies for their avoidance and reversal as well as sharing best practice.

INTEGRATION STRATEGIES

Integration plans have been developed by individual authorities and reflect the local circumstances, structures and support available for the resettled refugees as well as the scale of resettlement in the local area. Plans vary in detail and complexity. The document 'New Scots: Integrating Refugees in Scotland's Communities 2014 – 2017', sets out a four-year strategy to co-ordinate organisations involved in supporting refugees and people seeking asylum in Scotland, with action plans which aim to make the most of resources and promote partnership approaches.

The Welsh Local Government Association provides guidance in the form of a 'Syrian Vulnerable Persons Resettlement Scheme Toolkit', which contains information and contact details of the wide range of organisations available to provide services supporting the arrival, resettlement and integration of refugees. Many individual LAs have planned or published local integration plans while other Councils, at an earlier stage of planning, and recognising the challenge of integrating resettled individuals and families, have commissioned charities and other community or faith organisations to support resettlement and integration in their area.

While the UK central government issued national strategies for refugee integration in 2000, 2005 and 2009, it has not done so on a national basis since then.

There is an argument that integration would be assisted significantly if it took place in the context of a national refugee integration strategy with a clear vision of integration in its broadest sense, i.e. what is "the Britain" in to which we are seeking to integrate refugees, setting out clearly refugees rights and responsibilities, how integration should be achieved based on personal and family/community targets.

This strategy would include refugees transferred to the UK via its resettlement programmes and those recognised as refugees in country. Evidence from Scotland suggests that the Scotland National Refugee Integration Strategy has provided a framework for integration through which LAs have developed their own family or individual/personal integration plans. RSMPs could play a more active role in producing and sharing integration plans within their region, and disseminating best practice nationally.



📷 Hamza, Asma and their three children walk to catch a bus after a community event in Abingdon, Oxfordshire. © UNHCR/Andrew McConnell

RECOMMENDATIONS

The UK Government should consider adopting a national UK refugee integration strategy which outlines means of a successful integration and highlights the importance of norms and values such as equality and societal participation. The Strategy should identify goals for achievement of successful integration for both resettled refugees and the wider community, whilst being sensitive to the risks of marginalisation and isolation of recently arrived refugees.

COMMUNITY SPONSORSHIP

The UK Government's Community Sponsorship Scheme announced in July 2016 is a ground-breaking development for the resettlement of Syrian refugees in the UK and is very much welcomed by UNHCR. It enables charities, businesses and community groups to become directly involved in supporting the resettlement and integration of vulnerable people fleeing conflict and in need of protection.

While implementation to date has been deliberately small scale, there is considerable interest amongst the voluntary sector, churches, mosques and community groups to support the scheme. Community sponsorship as a complementary means of enhancing integration of resettled refugees in the UK will enable community groups to better understand the scale and sensitivities of supporting refugees. This in turn will help bring communities together and support these often traumatised and vulnerable families as they rebuild their lives and contribute positively to the UK society. In addition it can help build bridges with existing communities which can enhance the full integration of resettled refugees.

Although the team conducting this study did not interview refugees benefitting from the nascent Community Sponsorship Scheme, UNHCR views its introduction as a very positive initiative. UNHCR extends its full support to the UK Government and those involved in its implementation.

CONCLUSION

The study finds that the UK Government's VPRS is welcomed by UK LAs, devolved administrations and refugees. Funding, particularly in year one, is sufficient to provide the services necessary to settle and integrate refugee families in the short term. LAs, in partnership with charities, churches and community-based voluntary groups, have risen to the challenge of immediate settlement and adaptation, preparing the ground for integration in to the UK. The Resettlement Team in the Home Office, supported by DFID and DCLG, works effectively to deliver the programme.

Refugees already in the UK are determined to integrate into UK society and play an active economic role, avoiding dependency on the state. The success of their children in schooling and beyond is a priority. The study has, however, identified challenges to integration which include: the non-acquisition of English; un- or under-employment; loss of income; the social isolation of elderly refugees; and the possible marginalisation of youths whose education has been severely disrupted, and who, with a poor command of English, are struggling to establish a social identity in the UK.

This report aims to identify these challenges and provide recommendations for further development of the programme. It aims to highlight opportunities to build on the very positive work undertaken by the UK central government, LAs and partners in significantly upscaling resettlement for Syrian refugees, and to highlight areas for further investment to ensure that the VPRS is successful in supporting and resettling highly vulnerable refugees in the UK.

UNHCR is very grateful to the UK Home Office, DFID, LAs and external stakeholders for their very positive engagement in carrying out this study. It is also very appreciative of the strong partnership with City, University of London, and IOM in producing this piece of work. Particular thanks go to Dr. Christopher McDowell, of City, University of London, for leading the study.

ENDNOTES

- 1 See UNHCR, *A New Beginning: Refugee Integration in Europe*, September 2013, available at: <http://www.refworld.org/docid/522980604.html>
- 2 UK House of Commons Library, *Briefing Paper Number 06805: The UK Response to the Syrian Refugee Crisis*, 14 June 2017, available at: <http://goo.gl/4UQVeD>
- 3 UK Home Office, *Immigration Statistics*, October to December 2016, available at: <https://goo.gl/JzfwDC>
- 4 Since this study was completed a further expansion of the VPR criteria has taken place. On 3 July the UK Home Secretary Amber Rudd announced that the VPR would be expanded to include refugees of all nationalities, not just Syrian, who have fled the conflict in Syria to neighbouring countries. UNHCR welcomed the UK Government's announcement. This will help provide life-saving resettlement opportunities to particularly vulnerable non-Syrian refugees fleeing the crisis who sought refuge in Syria, but had to flee again as a result of the conflict.
- 5 UK Commons Library Briefing, *The UK response to the Syrian Refugee Crisis*, 14 June 2017, available at: <http://goo.gl/4UQVeD>
- 6 National Audit Office, *The Syrian Vulnerable Persons Resettlement Programme*, September 2016, available at: <https://goo.gl/AsWbdu>
- 7 UK Home Office, Department for International Development, and Department for Communities and Local Government, *Syrian Resettlement Programme; Funding to Local Authorities*, 23 March 2016, Annex B: Statement of Outcomes, available at: <http://goo.gl/mSDx9S>
- 8 Biometric enrolment now takes place regionally with BRPs sent to LAs for distribution shortly after resettlement arrival.
- 9 UK Home Office, *Funding to local authorities financial year 2015-2016 (Pre- 31 December 2015). Home Office funding; Syrian Resettlement Programme (SRP)*, Version 1.0 Clause 2.6.6, available at: <http://goo.gl/6rDexE>
- 10 Local authorities' responsibilities are explained more fully here: Migration Yorkshire, *Syrian Refugee Resettlement – a guide for local authorities*, Spring 2016, available at: <https://goo.gl/oy1vci>
- 11 Scottish Government, *Refugee Task Force*, available at: <https://beta.gov.scot/groups/refugee-task-force/>
- 12 Welsh Government, *Resettling Syrian refugees*, available at: <http://goo.gl/KDo8TB>
- 13 Families are assigned a complexity category based on information provided in the referral from UNHCR. The categories include having specific medical needs, mobility issues, and special educational needs.
- 14 A reduction of £6,000 per family from the current £26,000 limit.
- 15 UK Parliament, Amber Rudd (The Secretary of State for the Home Department), *Syrian Vulnerable Persons Resettlement Scheme and Vulnerable Children's Resettlement Scheme – Arrangements: Written statement – HCWS551*, 22 March 2017, available at: <http://goo.gl/fQ4B47>
- 16 National Audit Office, *The Syrian Vulnerable Persons Resettlement Programme*, September 2016, available at: <https://goo.gl/AsWbdu>
- 17 See for example, United Nations General Assembly, *Universal Declaration of Human Rights*, 10 December 1948, 217 A (III), Article 16(3), available at: www.unhcr.org/refworld/docid/3ae6b3712c.html; and United Nations General Assembly, *International Covenant on Civil and Political Rights*, 16 December 1966, United Nations, Treaty Series, vol. 999, p. 171, Article 23(1), available at: www.unhcr.org/refworld/docid/3ae6b3aa0.html
- 18 A fundamental principle of refugee protection, the unity of the family, derives directly from the universally recognized right to family life. When refugees flee their country of origin, family members are frequently left behind or dispersed during flight.

- ¹⁹ VPRS would only be a route to family reunification where family member(s) in countries of asylum outside the UK meet UNHCR's resettlement criteria and are identified, referred to the UK and accepted under the VPRS.
- ²⁰ Organisation for Economic Co-operation and Development, *Making Integration Work, Refugees and Others in Need of Protection*, 28 January 2016, available at: <http://goo.gl/SQqCuW>
- ²¹ UK Home Office, *Spotlight on Refugee Integration: findings from the survey of new refugees in United Kingdom: Home Office Research Report 37*, 2010, available at: <http://goo.gl/8Vz4Ti>
- ²² See Ager, A. and Strang, A, *Indicators of Integration: Final Report. Home Office Development and Practice Report 28*, 2004, London: Home Office: available at: <http://goo.gl/TnSNTS>. The Home Office has advised that the new model identifies key outcome areas to be monitored to examine integration and post-arrival support needs, including: employment; English language; education; health; secondary migration; security and safeguarding; social bridges and bonds.
- ²³ Scottish Government, *New Scots: Integrating Refugees in Scotland's Communities*, March 2017, <http://www.gov.scot/Resource/0051/00515713.pdf>
- ²⁴ Wales Strategic Migration Partnership (WSMP), *Syrian vulnerable persons relocation scheme toolkit*, 1 March 2016, available at: <http://goo.gl/qd52M>
- ²⁵ UK Home Office, *Full and Equal Citizens: a strategy for the integration of refugees into the United Kingdom*, 2000
- ²⁶ UK Home Office, *Integration Matters: a national refugee strategy for refugee integration*, 2005
- ²⁷ UK Home Office, *Moving on Together: government's recommitment to supporting refugees*, 2009





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