

Women's Asylum News

Women's Project at Asylum Aid

IN THIS ISSUE

Lead Article: Pregnant Women in Detention: Findings from Medical Justice's research	pp. 1-4
Sector Update	p. 4
Significant Legal Issues	pp. 5-6
National News	pp. 6-8
International News	pp. 8 -11
Publications	pp. 11-13
UK Training and Events	p. 13
Charter Update	p. 14

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Pregnant Women in Detention

Policy and legislation dictate that pregnant women should only be detained in immigration detention in very exceptional circumstances. Section 55.9.1 of the Enforcement Instructions and Guidance outlines that:

*“Pregnant women should not normally be detained. The exceptions to this general rule are where removal is imminent and medical advice does not suggest confinement before the due removal date”.*¹

The government does not know how many pregnant women are detained and have not been able to respond to parliamentary questions or Freedom of Information requests on the subject. However,

¹ UK Border Agency, *Enforcement Instructions and Guidance*, Chapter 55 <http://www.ukba.homeoffice.gov.uk/sitecontent/documents/policyandlaw/enforcement/detentionandremovals/chapter55.pdf?view=Binary> Section 55.10 also highlights groups considered suitable for detention in only very exceptional circumstances and this includes: ‘(...) pregnant women, unless there is the clear prospect of early removal and medical advice suggests no question of confinement prior to this...’

the Independent Monitoring Board found that during 2011, 93 pregnant women were detained at Yarl's Wood,² a detention centre that holds over 80% of all female immigration detainees.³

At Medical Justice, an organisation that promotes the health rights of immigration detainees, we have seen rising numbers of pregnant women being referred to us. This is consistent with the findings of Her Majesty's Inspectorate of Prisons inspection of Yarl's Wood in 2011, where it was noted that: 'Too many pregnant women, who should only have been held in exceptional circumstances, were detained in the centre.'

Several of the women we assisted reported force being used on them during (failed) removal attempts. In many cases, women were warned in advance of their flights that the use of force had been authorised and would be used on them if they failed to cooperate. One of our former clients was mistreated to such a degree that the team leader of the escorting services ordered his team of men to stop as he feared for the unborn baby's welfare. The lady was taken to A & E immediately afterwards. The G4S incident note records the following: *"Even though we had permission to use force, the job was stopped as Team Leader was very concerned for the safety of her unborn child"*.

At the end of last year, Medical Justice referred a case of a women held in Yarl's Wood who had been threatened with the use of force to Bhatt Murphy solicitors. On 22 February 2013 following a judicial review on behalf of this pregnant woman and four children (*R on the application of Chen and Others v SSHD CO/1119/2013*) UKBA re-published a policy prohibiting the use of force on pregnant women and children save for where it is absolutely necessary to prevent harm.

The fact that the Chen case has now forced the UKBA to concede that force can only be used in cases to prevent harm highlights the brutal nature of immigration policy. There is also concern that force will continue to be used in cases and not solely to prevent harm either because of the lack of monitoring or because policy changes often take time to trickle down to staff on the ground. Medical Justice knows of one case where a pregnant woman who was due to be removed following the High Court case, where escorts physically restrained her causing bruising.

The UK Border Agency strongly argued that the use of force was essential to execute removals: now that this has been repealed (save to prevent harm), it must be questioned whether it is now feasible to continue detaining women when it is clear that removing them remains problematic.

In our experience, removing pregnant women is very difficult and the "success rate" of removals is far slimmer than for women in general. A Medical Justice audit of 75 pregnant women held between 2005 and 2011 showed that only four were known to have been removed.

Over the past year, Medical Justice conducted research on pregnant women held in immigration detention. The sample was based on 20 women and the data relied upon includes subject access request files, healthcare records and interviews with women.

² Yarl's Wood is currently run by the private company, Serco, who internally sub-contract primary healthcare provision to Serco Health. Secondary and tertiary care services are commissioned by NHS Bedfordshire.

³ Of the total detainees held in 2011, 22,857 were male and 4,324 were female. 3,560 of the total detainees (27,181) were held at Yarls Wood IRC. Source: UKBA, *Immigration Statistics: April-June 2012*
<http://www.homeoffice.gov.uk/publications/science-research-statistics/research-statistics/immigration- asylum-research/immigration-tabs-q2-2012/detention-q2-2012-tabs>

The majority of the women in the sample had complex obstetric histories and there was a high prevalence of additional vulnerabilities, including rape, torture and trafficking. However, the results show that women do not always receive NHS equivalent care in detention. Information about antenatal care is limited; informed consent about tests and medication is rare; mental illnesses are not detected or treated effectively; and inappropriate anti-malarial prophylaxis are prescribed.

The results of the data highlight that the current policy of detaining pregnant women is flawed. The primary purpose of detention is removal. However, our research and audit results show that approximately only 5% of pregnant women are actually deported. With the change in policy on the use of force, we now expect that this figure will fall.

The current system is unworkable because the policy on protection against malaria does not account for the health issues that typically afflict pregnant detainees. The majority of pregnant women held in detention are from countries where there is a high risk of malaria. Whilst there is a policy instruction that states that pregnant women should be protected on return through prophylaxis, in many cases (where there is a history of mental health problems and/or the lady is in the early stages of pregnancy), the only prophylaxis which would work is contraindicated. Thus, for these women (who constitute the majority), there is no safe way for them to be returned.

The results of the data on the prescription of anti malarial prophylaxis (AMP) were damning. They reveal that both UKBA policy is regularly breached and prescriptions run counter to leading healthcare advisory services. There is a lack of communication between healthcare and UKBA caseowners, which results in people being prescribed drugs unnecessarily and removals attempted prior to women establishing tolerance from the medication.

Detaining pregnant women is not only ineffective but it is also damaging. The results show that the healthcare that pregnant women received was inadequate, and not always NHS equivalent. For women with such complex needs, the data showed that healthcare was not geared up to meet their needs; and there were failures to identify and deal with high risk pregnancies. There appeared to be no appreciation that even without complications this is a group of vulnerable women who need to be managed according to the National Institute for Clinical Excellence (NICE) Pregnancy and complex social factors pathway. This is despite some of the women displaying significant risk factors, such as medical hypertension and mental illness.

One of the principles outlined in the NICE guidance on Antenatal Care CG 62⁴ is whether the woman has had easy access, choice and continuity in her antenatal care. However, our data highlights several breaches of NICE guidance relating to information provision. Medical notes were incomplete; women reported an absence of information; interpreting facilities were inadequate; and informed consent was rare.

Pregnant women should be at the centre of maternity care.⁵ However, for women held in detention, they have no choice over when they see a midwife, or in the midwife that they see. The overwhelming majority of women who are detained are not removed but released back into the community later in their pregnancy. Therefore, pregnant women's antenatal care will be interrupted by being detained and they will receive their care from a different provider either before and/or

⁴ NICE 2010 Antenatal Care CG 62 <http://www.nice.org.uk/CG62>

⁵ National Institute for Health and Clinical Excellence (2008), *Antenatal care Routine care for the healthy pregnant woman*

certainly after their release. This is the antithesis of what is central to good practice in maternal care, as outlined in national and international guidance. With so few pregnant women detained and limited prospects of removal, detention is simply not serving any purpose. The belligerent use of immigration detention seriously needs challenging.

Medical Justice will be publishing its findings at the House of Commons, Committee Room 12, on June 11 2013. We will be calling for the end of the detention of pregnant women.

For further information, please visit www.medicaljustice.org.uk or email N.Tsangarides@medicaljustice.org.uk

Sector Update

Legal Aid Cuts – what can women seeking asylum expect from 1st April?

On April 1st, the coalition government unveiled cuts to Legal Aid. The Ministry of Justice has been tasked with saving £350m from its £2bn a year budget. To help meet this goal, civil Legal Aid is no longer available for cases across a vast range of work, including divorce, child custody, clinical negligence, welfare, employment, housing, debt, benefits, education, and immigration. For people in need of publicly-funded legal advice, the landscape has been reduced to rubble.

New asylum work will still be funded through Legal Aid – something we should reflect on gratefully amid so much carnage – but the cuts are almost certain to have catastrophic implications for asylum seekers nonetheless. And women seeking asylum will be left disproportionately at risk of losing access to justice. Women present some of the most complex asylum claims of all. Research has shown time and again that asylum officials struggle to get to grips with the specific reasons why women are persecuted, or the types of gender-based violence to which women are subjected. Yet it is precisely the most complex claims which are in danger of slipping through the net.

Solicitors' firms and charities have long used straightforward immigration work to cross-subsidise in-depth, complex asylum claims. One plank of that funding has now been removed, which means that organisations face a hopeless choice either to dedicate less time to the most complicated cases or to try and absorb the cost of work for which they are not funded. The sort of expertise needed to negotiate gender-based asylum claims will be lost, or will be applied more sparingly. These are choices that no dedicated asylum advocate would make, but which have been foisted upon them. Judicial scrutiny will become a hyper-expensive alternative to good legal representation at the beginning of the process, or more women will be left destitute without their claims ever being adequately explored. The only sure result is that women caught up in the asylum system will suffer.

In the last decade, the Women's Project at Asylum Aid has been part of the fight to ensure that gender-based persecution is properly interpreted by the Home Office. Working with so many others, it has exposed the persistent myths and misunderstandings that dog asylum decision-making on women's cases. That work is as important as ever, but Legal Aid cuts imperil the lot.

with thanks to Russell Hargrave of Asylum Aid for this article

Significant Legal Issues

Country Guidance Case – FGM in The Gambia

K & Others (FGM) The Gambia CG [2013] UKUT 00062 (IAC) [2013] UKUT 00062 (IAC)

K & Others is the first, and long overdue, Country Guidance case on FGM in The Gambia. The appeals involved two sets of appellants. The first Appellants (K,J & Miss K) were a family with a young female child who they claimed would be at real risk of FGM on return to Gambia, despite their own opposition to the practice. The appeal was dismissed by the immigration judge (IJ). A reconsideration was sought by the appellants.

The second appellant, (KA) was a young woman from the Mandika ethnic group, whose appeal had been allowed by the First Tier Tribunal (FTT) on the grounds that she was at real risk of FGM in her home area and that internal flight alternative (IFA⁶) was not a viable alternative. However, the SSHD had successfully sought permission to appeal on the grounds that the IJ had erred in his finding on the viability of the IFA.

It was accepted by all parties that FGM amounted to persecution for a Convention Reason not only for the individual found to be at real risk, but also of the parents of a female child if they were opposed to the practice but nonetheless there was a real risk that the child would be subjected to FGM. The focus of the Tribunal was therefore to assess the risk of FGM on return and the viability of IFA.

The Tribunal had the benefit of considerable expert evidence before it. Expert oral evidence was provided by Professor Tony Barnett and Professor Sylvia Chant, both of the LSE, to which the Tribunal attached considerable weight. An expert report was also provided by Comfort Momoh, FGM and Public Health Specialist at Guys and St Thomas Foundation Trust. The Tribunal was also assisted by the reports of GAMCOTRAP (Gambia Committee on Traditional Practices Affecting the Health of Women and Children) an NGO active in combatting FGM since 1984.

Whilst acknowledging that FGM is very widely practiced, with roughly three quarters of the female population being subjected to it, the Tribunal concluded that the evidence as at the date of the hearing in November 2012 did not support the conclusion that all intact women are at real risk of FGM. However, it identified a number of key factors to be considered and general guidance on the weight to be attached to each factor. At a basic level, the risk factors were identified as follows:

“4. (i) the practice of the kin group of birth: the ethnic background, taking into account high levels of intermarriage and of polygamy;

(ii) the education of the individual said to be at risk;

(iii) her age;

⁶ Also known as Internal Relocation

(iv) whether she lived in an urban or rural area before coming to the UK;

(v) the kin group into which she has married (if married); and

(vi) the practice of the kin group into which she has married (if married).

Also relevant is the prevalence of FGM amongst the extended family, as this may increase or reduce the relevant risk which may arise from the prevalence of the practice amongst members of the ethnic group in general."

The starting point for the assessment of risk is the applicant's ethnic group and the statistical evidence regarding the prevalence of FGM within that group. For unmarried women, the relevant ethnic group is likely to be that of the father. If the woman is married to a man from a different ethnic group, the relevant group is likely to be that of the husband. However, prevalence among the ethnic group is a starting point only. The analysis must then hone in on the particular factual matrix of the applicant, as per the variables identified in 4 above. Indeed, the Tribunal commented that:

"The rate of incidence of FGM in an ethnic group must therefore be distinguished from the degree of likelihood of infliction on an individual against her will or against the will of her parents. Some individuals from ethnic groups with a high incidence may not be at risk, while some individuals from ethnic groups with a low incidence may be at risk" (para. 7).

The Tribunal acknowledged that, if an individual is found to be at real risk of FGM, there is very unlikely to be a Sufficiency of Protection available to her. It further concluded that, in general, IFA is not a viable alternative for an individual found to be at real risk in her home area given that *'ethnic groups are thoroughly interspersed, the country is small and ethnic groups in different parts of the country are highly interconnected'*. Indeed, *'cogent reasons'* would need to be provided by an IJ for concluding that an individual at risk in her home area could safely relocate (para.128).

In relation to Appellant K, the appeal was allowed on the findings that the child was at real risk of FGM on return in the foreseeable future (taken to be the next few years) from which there was not a Sufficiency of Protection and that there was no viable Internal Flight Alternative. The case of AS was also allowed on the grounds that IFA would not be a viable alternative for her.

A country guidance case on FGM in Gambia is useful for a number of reasons. The expert evidence fills the hitherto considerable gap in reliable information on the prevalence of FGM across the ethnic groups and on the complex and varied factors which can combine to place an individual at real risk both in her home area and in any potential area of relocation. The specific acknowledgment that there is, in general, no Sufficiency of Protection available to an individual at real risk of FGM, either from the State or from family member, is also to be welcome.

National News

Women Asylum Seekers Deserve Better Health Care

Refugee Council's Anna Musgrove reflects on the situation of pregnant asylum seekers in The Guardian (as covered in WAN issue 116). She draws upon the recent report published by the Refugee

Council and Maternity Action, and discusses the difficulties pregnant asylum seekers face. As well as their journeys to the UK impacting upon the health of pregnant women, the two organisations are critical of what happens to women when they arrive in the UK and the role of dispersal. Their report argues that moving asylum seekers around the country makes it almost impossible for them to receive continuity of care from health professionals. Dispersal can also isolate women from friends, family and support groups and thus have a detrimental impact on women.

This was the situation for Afya from Eritrea who, whilst pregnant, was moved six times around south west England and Wales (including time spent in a detention centre). She was also moved again shortly after she gave birth. She stated: *"It would have been better if I could have stayed in one place. Moving around made me sad, tired and unhappy."* Similarly, Mimi was moved into a UKBA hostel in her final month of pregnancy. Despite being two days away from her due date, she did not know which hospital she was to attend or where it was.

The UKBA press statement in response to the research claimed that they had made amendments to their policy in July 2012 to prevent pregnant women being dispersed during the final months of pregnancy. The Refugee Council and Maternity Action however state that the new guidelines does not address some of the continuing problems pregnant women face, including being moved multiple times during their pregnancies.

To join The **'Dignity in Pregnancy Campaign'** see:

<http://www.refugeecouncil.org.uk/dignityinpregnancy>

For full article see:

<http://www.guardian.co.uk/lifeandstyle/the-womens-blog-with-jane-martinson/2013/mar/11/asylum-seekers-maternity-care?INTCMP=SRCH>

Lesbian Asylum Seeker: Prove it?

Jerome Taylor of the Independent writes about Claire Bennett's recent research looking at how lesbian asylum seekers reflect upon their experience of seeking asylum in the UK (as covered in WAN issue 115). The article reveals the difficulties women faced with the requirement to 'evidence their sexuality' as part of their asylum claim, including the types of questions they were asked during their court appearances. The research illustrated that women were routinely subject to inappropriate and insensitive questioning from tribunal judges in their bid to ascertain whether the women were really gay and at genuine risk of persecution. For example, one woman was asked if she had *"ever read Oscar Wilde"* whilst another was quizzed on her use *"of sex toys."* As one participant in the study stated, decision-makers *"have in their mind this stereotypical lesbian woman with short hair and no make-up, they just expect you to conform to what they believe a lesbian woman should be like and how they behave"*. For Ms Bennett: *"whether you do or don't use sex toys tells you nothing about someone's sexual orientation so why is that a legitimate question? It is entirely inappropriate. For these women their sexuality wasn't about sex toys or a favourite gay nightclub."*

Currently there are no official statistics relating to the number of asylum claims submitted on the grounds of a person's sexual orientation in the UK and how many of these are granted protection or returned to their country of origin. In 2010, the UK Border Agency brought in guidelines to assist its

staff on dealing with such claims. There is no equivalent guidance for immigration judges, which means questions continue to be asked about the decision making process and whether lesbian asylum seekers are accessing the protection they need.

For full article see:

<http://www.independent.co.uk/news/uk/home-news/gay-prove-it-then--have-you-read-any-oscar-wilde-judges-accused-of-asking-lesbian-asylum-seekers-inappropriate-questions-8558599.html?origin=internalSearch>

The Diary of a Refugee Woman

The latest blog from 'Women for Refugee Women' highlights the appalling housing conditions experienced by women asylum seekers. This month, a woman writes of her rat infestation and the fears for her children's health. She talks of how her landlord did not respond to her requests to help and how her friends had to pay for a professional to come round. Once in her house, he told her that the rats had eaten the wires leading to her boiler, which also meant she had no heating. Despite it being reported as "one of the worst infestations" he had ever seen, the woman has still not got any help from the landlord. She is currently doing all her washing at a friend's house and her children have developed coughs.

For full article see:

<http://diaryofarefugeemother.wordpress.com/>

International News

Papua New Guinea: Women Accused of Sorcery

Amnesty International has raised concerns regarding the treatment and protection of a woman who was accused of sorcery in Bana District, Southern Bougainville. Together with her daughters, the woman was being held captive despite receiving critical injuries including laceration to her neck. Three other women who have been accused of sorcery and also need urgent medical treatment have been prevented from leaving the district. This comes a week after a woman was beheaded in a similar incident. Kate Schuetze, Amnesty International Pacific Researcher states: "*The regional police headquarters must direct all available resources to save this woman's life and ensure her and her daughters' safe release.... The government needs to provide the police with all the resources needed in order to protect this family and all others at risk of future attacks*". She adds: "*The police have a responsibility to protect the public from harm and maintain law and order. This latest incident shows they are falling short when it comes to 'sorcery' related attacks.*"

For full article see:

<http://www.amnesty.org/en/for-media/press-releases/papua-new-guinea-police-must-act-urgently-save-captured-women-accused-sorce>

Syrian Refugees: Rape and Sham Marriage

Jackie Long, Social Affairs Editor at Channel Four News, reports on the impact of war on Syrian refugees in Jordan. The article and associated ten minute film highlight the specific vulnerabilities women face at the Zaatari refugee camp in Jordan. Although seeking safety and shelter, the film highlights that women often receive anything but this. Many women speak of their on-going fears and how they are too afraid to even go to the toilet at night. Israa Mohammed says that: *"Three girls in our camp were kidnapped, they raped them. Then they brought them back to the camp. The Jordanian guys, they come to harass Syrian girls from the age of seven or six."*

As well as the assaults, a practice has emerged where men are being allowed into the camps as benefactors however they are looking to buy a wife. These marriages, referred to as 'pleasure marriages', are a means to exploit vulnerable women. Abu Sanad, the father of two daughters states: *"People from Jordan, from Saudi Arabia, from Qatar, they come and ask: 'Do you want to give your daughters for marriage?...What do they see us as? A market place for selling? Like selling sheep. They see we don't have money. They want to exploit us."*

Some women accept the marriage after being promised that they would "live like a princess." However in reality, the 'pleasure marriages' often means women are allowed out of the camp for few days or weeks but then they are left alone in Jordan, or return back to Zaatari, humiliated and abused.

For full article and film see:

<http://www.channel4.com/news/syria-women-rape-marriage-refugee-camp-jordan>

South Sudan: Gender Based Violence

Women in South Sudan continue to face gender based violence and discrimination in their daily life. According to the assessment of Gender Based Violence in South Sudan, 68% females and 63% of males believed that *"there are times when women deserve to be beaten"*. For Paleki Matthew, who runs the NGO South Sudan Women's Empowerment Network (SSWEN), *"You can't speak to people about going to the police if they don't even think it's wrong."*

Too many women are experiencing sexual violence. For Olive Makwira, a maternity ward nurse in Rumbek, capital of Lakes State reports of a nine year old girl who was recently admitted with vaginal bleeding, although her parents denied her injuries were the result of abuse. She states that: *"It becomes quite difficult for the women to say what happened to them"* adding, if abuse is suspected, *"the community casts them out"*.

The age of consent for marriage in South Sudan is 18, however the 2010 Sudan Household Health Survey indicates about 38 % of girls are married before that age; this figure rises to 54% for the poorest households. Customary laws also permit any menstruating woman as fit for marriage and as Izeduwa Derex-Briggs, South Sudan representative for UN Women noted, many communities are ignorant of statutory laws. In addition, members of the police and judiciary continue to practice early marriage, reinforcing traditional customs.

Abendego Mabior Nyinde, a nurse specializing in the treatment of GBV who runs an International Rescue Committee (IRC) clinic said that women rarely report incidents of sexual violence. For Paleki Matthew, despite the existence of police special protection units, women who report rape often get no results. *"Most of these officers are rotated, move or drop out, so you train a load of people and they're transferred. It's not consistent ... If you go in and report abuse, you will most likely just be sent back to that house."*

For full article see:

<http://www.irinnews.org/Report/97616/South-Sudan-s-gender-gap-still-too-wide>

China: Rise in Bride Trafficking

The UN has raised concerns regarding the widespread trafficking of brides from south Asian countries to China. In 2012, at least three suspected cases of marriage trafficking were reported from Cambodia, with hundreds more from the region. Most cases go unreported. Lisa Rende Taylor, chief technical adviser for the UN Inter-Agency Project on Human Trafficking (UNIAP) stated that: *"The numbers of identified cases are still small, but this number could rise given the social demographics in play."*

For full article see:

<http://www.irinnews.org/Report/97677/In-Brief-Bride-trafficking-to-China-could-rise>

India: Four -Year Old Girl Dies After Rape

A four year old girl who was raped in New Delhi, died from her injuries in hospital a few days after her attack. The girl was reportedly lured from her home by a man and was found by her parents the following day, bleeding profusely. Ashok Tank, a doctor who cared for her said that: *"It is very inhuman that such a young girl was subjected to sexual abuse."* The police in New Delhi also report that several very young girls have been raped in April alone, including a five year old girl who was abducted and sexually assaulted. The number of reported sexual assaults of girls under the age of 18 has climbed steadily in India since the 1990s, and reported rapes of girls under the age of 10 have more than doubled from 1990 to 2011.

For full article see:

<http://india.blogs.nytimes.com/2013/04/30/4-year-old-rape-victim-dies-in-india/>

Afghanistan: Woman Killed for 'Dishonouring Family'

Amnesty International report that the public killing of a woman in Afghanistan continues to illustrate the shocking levels of gender based violence women experience. The woman, believed to be about 18-20 years old, with two children, was shot dead by her father in front of a crowd of about 300 people in a village in north -west Afghanistan. The woman was killed after she was accused of running away with a male cousin, whilst her husband was in Iran.

Horia Mosadiq, Afghanistan researcher at Amnesty International stated that “*Violence against women continues to be endemic in Afghanistan and those responsible very rarely face justice... Not only do women face violence at the hands of family members for reasons of preserving so-called ‘honour’, but frequently women face human rights abuses resulting from verdicts issued by traditional, informal justice systems.*”

The Afghanistan Independent Human Rights Commission (AIHRC) documented more than 4,000 cases of violence against women from 21 March to 21 October 2012 – a rise of 28% compared with the same period in the previous year.

For full article see:

<http://www.amnestyusa.org/news/news-item/afghanistan-woman-killed-for-dishonouring-family>

Publications

Trafficking in Human Beings Eurostat, 2013

This is the first EU-level statistical report on trafficking in human beings. The report includes data for 2008-2010 from all 27 EU Member States, Croatia and the following EU Candidate and EFTA/EEA countries: Iceland, Montenegro, Norway, Serbia, Switzerland and Turkey. This report also includes statistics on the total number of *victims* disaggregated by gender, age and form of exploitation, and also contains statistics on victims' citizenship and type of assistance and protection received. The data has been collected from different authorities working in the field of trafficking in human beings, including civil society organisations. Moreover, the report also includes statistics on suspected, prosecuted and convicted *traffickers*. Although the report focuses on statistical data from the registration systems in the respective organisations, Member States were encouraged to also send in metadata from other sources.

The report has an extensive section on *identified and presumed victims*. This section reveals a range of statistics including statistics on child trafficking and confirms that the vast majority of children trafficked are female (80 %). This section also confirms that victims of sexual exploitation are predominantly female (96 % in 2010). Data disaggregated by gender and age over the three years show that women account for 68 %, men for 17 %, girls for 12 % and boys for 3 % of the total number of victims of trafficking in human beings.

For full reports see:

http://ec.europa.eu/anti-trafficking/entity.action;jsessionid=NGGyRG1KZyHJBT9Lfm47QGB7JcCZc4kD1rrdQxJw5h3gJqkvxHxh!-2112079233?path=EU+Policy%2FReport_DGHome_Eurostat

Sexual Orientation and Gender Identity and the Protection of Forced Migrants Forced Migration Review issue 42, 2013

Around the world, people face abuse, arbitrary arrest, extortion, violence, severe discrimination and lack of official protection because of their sexual orientation and/or gender identity. This latest issue of FMR includes 26 articles on the abuse of rights of forced migrants who identify as lesbian, gay, bisexual, transgender or intersex. Authors discuss both the challenges faced and examples of good practice in securing protection for LGBTI forced migrants. Specific articles include:

- **Sexual orientation and gender identity: developments in EU law:** www.fmreview.org/sogi/tsourdi
- **LGBT refugee protection in the UK: from discretion to belief?** : www.fmreview.org/sogi/gray-mcdowall
- **Seeking asylum in the UK: lesbian perspectives:** www.fmreview.org/sogi/bennett-thomas

This edition will be available online and in print in English, French, Spanish and Arabic. Please see: <http://www.fmreview.org/sogi>

A Question of Credibility: Why so Many Asylum Decisions are Overturned on Appeal in the UK – Amnesty International, UK , 2013

This report builds on Amnesty International's 2004 report *Get It Right: How Home Office decision making fails refugees*. It examines the refusal letters and appeal determinations of 50 cases from Syria, Sri Lanka, Iran and Zimbabwe, all of which have had high appeal overturn rates of the initial decision to refuse asylum. The cases analysed also include several applications from women asylum seekers. The research highlights the flawed decision-making process and the impact of other problems including the inappropriate conduct of interviews which seemingly contribute to the high level of asylum refusals.

This report is part of Still Human Still Here, a coalition of 58 organisations campaigning to end the destitution of refused asylum seekers in the UK. For the full report see: http://amnesty.org.uk/news_details.asp?NewsID=20736&utm_source=Social&utm_medium=Twitter&utm_campaign=Refugee&utm_content=UKBA_PR

Social Networks, Social Capital and Refugee Integration

**Dr Sin Yi Cheung, Cardiff University and Dr Jenny Phillimore, University of Birmingham
Research Report for the Nuffield Foundation, 2013**

Research conducted by the University of Birmingham and the University of Cardiff has highlighted gender disparities in the experiences of male and female refugees. By analysing data from the Home Office and findings from an e-survey with 233 respondents, the research has revealed that refugee women in the UK suffer more physical and emotional difficulties than their male counter-parts. The study, which focused on the integration needs of refugees in the UK, found that women refugees also struggled to find employment opportunities. Dr Jenny Phillimore, one of the co-authors of the report, said: "It's very worrying to find that women are faring so badly, particularly when many arrive

with high-level skills. It shows we need to make much more effort to ensure that women refugees integrate more successfully". She also suggested more focus should be paid to women's access to language lessons which many are prevented from accessing due to a lack of childcare provision.

For press release and a link to the full research report see:

<http://www.healthcanal.com/public-health-safety/38097-women-refugees-have-more-difficulty-finding-work-and-suffer-greater-health-problems-than-their-male-counterparts-new-research-shows.html>

UK Training and Events

Human Trafficking Conference – 6th June – British Library London

UK European Migration Network event and co-hosted by the Home Office

This free conference aims to explore the latest evidence and policy perspectives on the identification and investigation of human trafficking offences. This one day event will bring together key policy makers, academic researchers and non governmental organisations from the fields of asylum and migration to share and exchange their knowledge and experiences.

The conference will explore the following themes:

- research evidence on profiles of trafficking victims and traffickers
- identification and scale of victims of trafficking
- good practice in investigating trafficking offences
- different approaches to investigating trafficking offences
- improving conviction rates of traffickers

For further details and to register see:

<http://events.r20.constantcontact.com/register/event?oeidk=a07e7b8rw6d60e23c2e&llr=mzkmyxlab>

Zero Tolerance on Forced Marriage and 'Hounour' Based Violence: The Way Forward

19th June, London The Public Policy Exchange Symposium

Following a consultation in March 2012, the Government announced plans to criminalise forced marriage, with a new law expected in the autumn. Legislation alone, however, is not enough and the Government remains focused on prevention and increasing support and protection for victims and those at risk of becoming victims. This symposium provides an opportunity to:

- Understand current legal framework & impact of making forced marriage a criminal offence
- How to overcome sensitive cultural barriers and improve protection, support and services
- Discuss ways in which to engage with schools and the wider public to raise awareness of forced marriage and 'honour' based violence

For further details and registration please see: <http://publicpolicyexchange.co.uk/events/DF19-PPE.php>

Charter of rights of women seeking asylum



Endorsements: 337

Google group membership: 166

Destitution campaign in Scotland focuses on women and wins support of award-winning writers, Jackie Kay and Jane McKie.

Charter endorser Scottish Refugee Council and Edinburgh-based Refugee Survival Trust launched a public [campaign](#) last October calling for Scots to help stop refugee destitution.

A petition, research, short film, media coverage and events have since succeeded in raising awareness. Over 3,000 people – including MSPs, councillors, the Lord Provost of Edinburgh, faith leaders and arts figures – signed up to our call to put a stop to the policy that leaves refused asylum seekers homeless and hungry. 35 diverse organisations from Amnesty and Shelter to Women's Aid and Unison committed their support for a change to the law that forces refugees and asylum seekers into destitution.

In February, the campaign was re-launched with a focus on women. In a Scottish Parliament debate in December, Mary Fee MSP had spoken compellingly about the barriers facing women in the asylum process and the risk of violence and exploitation for those who are made destitute. The Minister, Humza Yousaf MSP, responded with a commitment to ensuring asylum seeking women are included in Scottish Government strategic work around violence against women.

Though campaigners met many women with heart-breaking stories of destitution, time and again they found women too afraid to share their testimonies publically. So instead, they looked for advocates to do this on their behalf.

We approached award-winning writers Jackie Kay and Jane McKie for their support. Both writers met with destitute women and wrote a series of poems inspired by them. Their work was premiered at Glasgow Women's Library on International Women's Day followed by a panel discussion with Mary Fee MSP and Nina Murray, Women's Policy Officer at Scottish Refugee Council. The poems were published by Spectrum magazine and promoted through social media. Jackie Kay's poems, Glasgow Snow (for S), Constant (for M), and Push the Week (for W) can be read [here](#); and Jane McKie's Rosine in Glasgow, [here](#).

This month Scottish Refugee Council and Refugee Survival Trust will deliver the petition to Immigration Minister Mark Harper along with a letter looking for a response to our call for a change in the law.

The public campaign may have ended, but the supporters and organisations remain committed to keeping this issue on the agenda. Jackie Kay will read her poems again at the Refugee Week Scotland Parliamentary Reception and Glasgow Film Theatre will show the short film commissioned to launch the campaign.

We'll continue to put pressure on UK politicians while ensuring the Scottish Government, which pledged to write to the UK Government on the issue, continues to play its part in putting an end to this injustice.

For more information on the Charter and the Missed Out campaign, please go to www.asylumaid.org.uk/charter

If your organisation would like to endorse the Charter, please send an email simply stating the name of your organisation to charter@asylumaid.org.uk

She was detained without charge

Nobody believed her story and no-one spoke up for her

Her family and friends didn't know where she was

Afraid...isolated...

She had no idea what would happen to her next

And that was after she sought asylum in the UK

Our asylum system is now so tough that, all too often, this is how people seeking help are treated. And that can't be right.

We believe the system should be fair and just and that every asylum seeker should have legal help to make their case - only then can we say in good conscience 'let the law take its course'.

Asylum Aid is an independent, national charity that secures protection for people seeking refuge in the UK from persecution in their home countries.

We provide expert legal representation to asylum seekers and campaign for a fair and just asylum system. Founded in 1990, we have since helped 30,000 people to get a fair hearing. In 2009 85% of our clients were granted leave to stay in the UK when decisions were made on their claims for protection.

Please support us

Your donation will safeguard our independence and enable us to stand up for fair asylum rights without fear or favour.

You can make a donation via our website:

www.asylumaid.org.uk/pages/give_now.html

OR send it to us by post with this form:

Name:

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Postcode:

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Email:

I want to make a one-off gift of £

(please make cheques payable to Asylum Aid)

Your Gift Aid declaration

If you are a UK taxpayer, the value of your donation can increase by at least 25% under the Gift Aid scheme -- at no additional cost to you! Please tick the box below to join the Gift Aid scheme.

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FOR OFFICIAL USE To: The Cooperative Bank, 60 Cornhill, London EC3N 3NU. Sort code: 08-00-20, Account number: 02081202

Please return this form in an envelope to: Freepost RRJ-J-BRGA-ZHAR, Asylum Aid, Club Union House, 253-254 Upper Street, London N1 1RU



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