



Your voice counts

The experiences of refugees
and asylum seekers living
in Sheffield

healthwatch
Sheffield

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Experiences of refugees and asylum seekers living in Sheffield

At Healthwatch Sheffield we speak to a wide range of people living in the city about their experiences of accessing health and social care, and what would help to improve their health and wellbeing.

We wanted to draw out some of the specific challenges faced by refugees and asylum seekers living in Sheffield, so have pulled together some of the conversations we've been having in various settings, including:

- Holiday Inn and Jasmine Court – accommodation where many new asylum seekers are placed
- Foodbanks – in Burngreave, Lowedges, and Winn Gardens
- Firth Park Job Shop
- Snowdrop Project – a charity supporting survivors of modern slavery and exploitation
- A craft session for New Beginnings families – a charity project supporting refugees and asylum seekers into employment, volunteering and education

In total, this briefing draws on the experiences of **41** refugees and asylum seekers who spoke to us about their care and support between May 2023 and March 2024.



People had come to Sheffield from a huge variety of countries, including: Iran, Somalia, Azerbaijan, Ukraine, Congo, Turkey, Kyrgyzstan, Botswana, China, Ethiopia, Albania, the Caribbean, South Africa, Cameroon, and Eritrea.



Around two thirds of the people we spoke to were women; one third were men.



We spoke to a nearly even split of people currently seeking asylum, and those who had been given refugee status.

Experiences of health services in Sheffield

GPs

We heard mixed experiences of people going to see their GP. When people said their GP was helpful and kind, it is clear that this had a very positive impact on them and their trust of professionals in the future:

“I was happy with my GP they listened to me and we spoke about my problems. They were with me for a long time. They did tests and treated me very nice. I was treated like I was a friend, and this makes me want to go back in the future and I won't be afraid”

“My GP is lovely and my physiotherapist is very kind; it is important that people take time to understand me”

Other people had difficulty accessing care from their GP. Some of the issues here are ones that we hear regularly across Sheffield – people being told there are no appointments available, long waits for appointments, and difficulties with the appointment system:

“I struggle to get appointments, that's the only problem”

“Can never get through to GP on phone”

“I would like prompt service when I need them for my family and myself, I need to be in GP practice in person at 7am to queue up for access for today's or later in week appointment. I can't get my children to school at the same time”

“Having to get there early is not good for everyone. You phone, it rings, there's no answer”

“Quicker appointment times to see my GP, sometimes I have had to wait a long time to see them, this is not good”

“It would be better if I could get appointment for tomorrow, not to ring every day”

We heard mixed views about the way people would prefer to speak to their GP, highlighting that choice is important to make appointment booking accessible to all. Many would prefer to see a GP face to face – this was especially preferred by people who said they faced a language barrier, and felt face to face communication was easier than over the telephone. Some wanted to see more online access to services, while others wanted less of this:

“More face to face appointments needed”

“Improve online access”

“Giving us appointments on a phone call rather than filling forms online”

Other problems we heard about stemmed from people feeling like GPs and other healthcare professionals were not listening to them or taking their concerns seriously. People told us they were often made to feel like they were treated in a rush, without in-depth examinations:

“I have many problems with my eyes, ears and have headaches but they don’t seem to investigate to find out what’s happening properly”

“Without even examining you, they always prescribe you paracetamol for all diseases”

“Feeling ignored”

“Back in [my home country] was diagnosed with myopia of average degree on both eyes, but in UK as appointment cannot be booked, no qualified profession can help to diagnose their problem, problem treated by nurses which did not check. Hope that they wouldn’t take their diagnose more seriously as they have papers with them proving the problem.”

Dentists

Most people said they hadn’t been able to see a dentist since arriving in Sheffield, even though some had been here for several years. Many were keen to get an NHS appointment but hadn’t been able to find anywhere accepting new patients, or didn’t know how to find one. Some expressed a wish that they had been helped to find a dentist when they first arrived, rather than being left to figure it out themselves:

“When giving details to register with a dental practice, appointment not til Sep. I’ve been here 6 months already. That will be 6 more months. More waiting. I wish I could have been registered for everything by them [home office] when I first got here. Then I wouldn’t have to wait until September”

Some people didn’t just need check-ups; they had problems with their teeth which they wanted help with:

“Problems with teeth, called 111 3-4 times but no reply for 3 days, child crying. Over 10 days of waiting ended up with being hung up on”

“I have trouble with my teeth. They need fixing, I’m in pain. I’m embarrassed [...] I don’t talk because I’m embarrassed”

There was particular concern for children’s access to dental care:

“Book appointment for dentists earlier specially for children”

Others had managed to find an NHS dentist, but waiting lists were long or it was difficult to get there:

“I had to travel far to the dentist, £8 in total”

Services working together

When people had difficulty accessing the support or treatment they needed, this was often to do with services not working well together. People told us about cancelled appointments, delayed or missed referrals, or issues with prescriptions which delayed their care. Several people told us they felt like they were being passed back and forth between services, or being ‘palmed off’, rather than getting the help they needed. Some were left with the impression that services did not want to support them:

“My friend was in pain with tooth ache, they said they would make appointment in 2 weeks, he has heard nothing. He called and they had cancelled the appointment. He had to go to the GP for medication and the GP has to send a letter to get a new appointment. He’s heard nothing at 3 weeks”

“Need to get GP appointment every month, I get prescription for 6 months, but cannot get medication every month automatically. I don’t mind to place the order myself but nobody offered”

“I need to make another test for hormones but nobody offered to make again (6 months passed)”

“If I go outside to buy pills I cannot get them without GP, cannot get for free. I am on benefit and if I want to get medicine in pharmacy, I need to go to GP to get a prescription, then I can get it for free without prescription”

Some people told us about other ways services work together that don’t always work for them. For instance, when GP practices offer appointments elsewhere, but don’t take into account people’s personal circumstances in being able to get there:

“[My surgery] and [another] share appointments so you sometimes have to travel and it’s hard to get there”

Barriers to accessing care

Knowledge and understanding

Most asylum seekers and refugees are unfamiliar with UK services and institutions when they first arrive, so they have to learn how the health system works. This was the biggest practical barrier to accessing healthcare and other support that we heard, with nearly everyone we spoke to talking about this to some degree.

New arrivals to the UK would like to have information that helps them navigate the systems here, and people that can assist them when they encounter unfamiliar or complex situations. There are additional administrative systems that asylum seekers need to understand too, like the HC1 and HC2 paperwork that needs to be kept updated for them to be able to access healthcare.

One person, who volunteered with City of Sanctuary for their drop-in advice service, told us about some of the challenges facing people who are newly arrived:

"People don't understand the system. I have to explain that even English people can't get a dentist. People don't know how to get a GP appointment, they don't know what a GP is, and they don't know what to say to the GP. I explain they have 10 minutes with a GP and they need to go through what is wrong one thing at a time. People go straight to A&E because they don't know about the minor injuries' clinic or the walk-in centre or to use 111. I tell them don't go to A&E it's for emergencies. They also don't know about the HC1 and HC2 forms for free prescriptions, taxis and trains. They have to fill them out perfectly or they don't get help. They also have to keep filling it in every 6 months. 111 is a tick box and if you don't ask the questions right, they don't get the help they need."

Other individuals told us about instances where they'd gone to the wrong service, or didn't understand how to access a service through the proper procedure. Some people didn't understand the process of registering with a GP, and didn't receive help or advice to do so when they tried to turn up to see a GP:

"When I moved to another place, I came to new GP, but he said the receptionist cannot help as I am not registered there. They didn't give me any options so I just left. My GP is too far away from place where I live now, so I cannot travel there"

"My child had temperature, they would not help, because I am not registered. To give me instructions on what to do, in my language, would be better. Maybe I'm doing something wrong".

"I came to see doctor waited 3 hours and left, nobody instructed me what to do"

Some people don't understand which service they should use, so they go to A&E:

"If I feel bad, I would go to the hospital and they should help me there"

There was a strong desire for more information so people could get the right help:

"I have no information what are my rights, and how is the process should look like. I would like to have a video with instruction"

"I cannot access service without support because I don't understand the processes. If people took time to explain things to me properly"

"Not explaining different prescription tick boxes"

"Knowing who to ask. Getting referral to the right services"

Language barriers

Language barriers are another major reason many refugees and asylum seekers feel uneasy seeking help from health services. They can feel like they can't describe their problems on the phone or in person clearly enough; this can cause misunderstandings between the patient and staff.

"Access to interpreters when making appointment, as difficult to understand due to language barrier"

"Poor English, hard to communicate, unable to understand"

People expressed a desire for there to be more information available in other languages – "languages on website for NHS" and for better access to interpreters when they book and attend appointments. Some said they were not offered interpreters, while others were unhappy with the interpreters that were provided and felt they didn't translate accurately:

"They didn't always say what I said"

There was also a desire from some for more support to learn English:

"We have English language classes once a week, it is not enough. We need to learn English or we will struggle. I am ok, I can speak English but a lot of people in here can't. We need to be able to settle in the UK. It is very expensive to go on the bus to go to English classes in the city centre we can't afford that. We do not get enough money to do that"

Financial barriers

People seeking asylum in the UK receive money on a payment card each week. This amount is currently £49.18 to cover food, clothing, and toiletries¹. If their accommodation provides their meals, this amount is just £8.86 per week. Asylum seekers are not allowed to seek employment so cannot earn any more money.

This means that even catching a bus uses up a large amount of a person's weekly budget. Some asylum seekers are able to get a taxi to their GP practice paid for. However going to other places that are important to health and wellbeing, or places they can get advice and support like charities, can be difficult:

"Cheaper bus fares - £2 is very expensive for me"

"We can't afford to go to places to keep us active and healthy as the travel fares are too much. It is too far to walk to the city centre where we are"

Limited budgets make other things that are helpful for health and wellbeing feel unattainable too:

"I paid for a gym membership for one month as fitness is important to me but this price was discounted and now the price for this month has doubled. I can't afford to pay for it"

"[If I had more money] I could buy fruits for my children"

¹ <https://www.gov.uk/asylum-support/what-youll-get>

What else is important to health and wellbeing for refugees and asylum seekers?

When we asked people what was important to them to stay healthy, they didn't just tell us about their access to NHS services. They talked about other aspects of their lives, and the things that help them stay well.

Mental health support

While we didn't hear from many people about accessing NHS mental health services, people did express a desire for more availability of this, alongside more holistic support from the voluntary sector. Many people described mental health challenges they were facing, that they had not accessed support for:

"I suffer with depression, feel stressed. Sometimes I freak like a panic attack. I have this problem about 10 years but I've never spoken to a psychologist"

"Alone, stressed, unhappy"

We also heard how going through the process of seeking asylum and feeling their life is on hold, along with the trauma that many have been through while leaving their home country, can be really harmful for people's mental health:

"I'm an asylum seeker, waiting for Home Office decision. We leave our family, country, friends, people we love. It's grieving, all these factors are breaking our mental health. In the UK there are too many [leave to remain] cases, we need to know what time they will make their decisions [...] I know people waiting 6-8 years. How can we with mental health? [...]"

Opportunities to socialise

Many people spoke about socialising – both with other asylum seekers and refugees, and longer-term residents of Sheffield. They felt this was important to their mental and emotional health, and helped them to build deeper connections in their new home:

"I don't meet people. It's very good to meet people"

"I have a few friends and good neighbours that I like to share with them"

"Having a social café in my community, to belong somewhere"

"Social groups with other men"

"The church has a social meal. The people there are nice. I was in the kitchen."

Access to education, volunteering and employment

People who were still in the process of seeking asylum told us about their hopes for the future, and the support they'd like in order to get there. Some people told us they wanted to go to college or university:

"I am not allowed to study in the UK right now but I want to go to college in the future [...] I don't know where to go to get information about study and college, I need someone to help me [...] It would be good if I could go to college now, I can write and speak good English. This would help me prepare for my future"

Access to training courses was also a big wish for people – to help them improve their English, further their education, or train and prepare for future employment:

"I need more education support, learning English will help with calls, job etc"

"Going without education – have children, so need more options"

"More learning courses available"

Others are currently volunteering or would like to be:

"Open classes for training and volunteering. That will help on the first level"

"I'm volunteering to speak with other people"

People were also keen to start working once they were allowed to:

"[I would like to work as] a support worker, social care, security. Something I can fit around my family"

"I would like to be working in the police or as air cabin crew or in business"

"[I would like] jobs and support to get employment"

Hobbies and exercise

Being able to spend free time exercising or doing other hobbies is really important to people, but many asylum seekers and refugees don't have access to the money or resources to pursue the pastimes they want to. We heard how hobbies were important not only for people's physical and mental health, but also to their sense of identity:

"I like the UK and I am happy here but because we are far away from the city centre there is nothing to do. It can be very boring and that is not good for my mental health it is depressing"

"Music, I was a drummer but I'm out of practice and I'd like to do it again. I was composing music. I have a band in [my home country] but it was broken when I

left there [...] What would help me get out of my depression would be an instrument, but I don't have one"

"I would like more things to do here, it would be better if there were more activities. I would like sewing classes, English and group things to do this will help us make friends more"

"Cooking would be good, we could cook foods from our countries and learn the different foods that people eat. I like learning new things and learning is very important to me"

"I like football. I play in Hillsborough park with friends"

"Would be good to see fitness classes here, there are no options for fitness [...] we have a big area where we sit and eat, they could do Zumba or aerobics or something like that. It would keep our minds and bodies healthy"

Healthy food

Access to fresh, healthy food is important to help people stay well. Some people said this was difficult – there were multiple reasons for this, compounding the challenge facing people who wanted to eat well:

- Having a limited budget makes it hard for people to buy the food they need for a healthy and varied diet
- Accommodation being far away from larger supermarkets means people have to spend some of their budget on transport, or rely on smaller local shops which don't have as much choice or are more expensive
- Many people relied on food banks for some or all of their food; this means their diet depends on what is available there and doesn't always include fresh fruits and vegetables
- Being in a new country means some food is unfamiliar and people are having to adjust to new diets or learn to cook new meals

"The foods here are a lot of pasta and potatoes which I don't feel is healthy. They offer salad which is good but it doesn't fill me up. It would be good if there were foods from my country as there would be better healthy options and more variety"

"[We need] veggies, fruits in foodbank"

"I can only get food as conserves from food bank, but we need vitamins"

How have we shared this information?



Throughout the time that we have been hearing this feedback, we have been taking a proactive approach to sharing feedback and collaborating with various stakeholders to improve health services for refugee and asylum seekers in Sheffield.

Where the feedback we heard related to particular services (for example a specific GP practice) we have shared it directly with them. Some of the broader themes have been highlighted in our regular [‘What have we been hearing?’ round ups](#) and shared with leaders and decision makers in the city, in order to influence change at a wider level.

We have also shared our information with the Sheffield Public Health Team to inform the Health Needs Assessment for Refugees and Asylum Seekers in Sheffield, which has been recently completed. Following this, we have joined the newly formed Health Workstream of the Refugee Asylum and Migration Strategic Partnership Group; this brings together people working in a range of organisations across the city, enabling us to work together in developing plans and actions to address the health needs within this community.

We continue to actively seek out opportunities to hear from and amplify the voices of those who are not always heard by services, and those who face poorer health outcomes than others, including refugees and asylum seekers living in Sheffield.