

The Mental Health of People Seeking Sanctuary

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UK Asylum Statistics (year ending September 2025)

Applications: 110,051 people (89,509 main applications)

Backlog (Awaiting Initial Decision): ~80,000 people

Backlog (Refused/Appealing): ~70,000 people

Top Origins: Pakistan, Eritrea, Iran, Afghanistan, Bangladesh

Small Boat Arrivals: 45,183 people (a 51% increase)

Prevalence of mental health problems in asylum seekers and refugees

- Latest systematic review and meta-analysis is from 2022 (Patane et al)
- 40 studies, 11,053 adult refugees and asylum seekers, across 18 countries (11 HICs, 7 LMICs)
- General population samples, not clinical samples

Depression: 32% (95% CI 26-39%, n=31)

PTSD: 31% (95% CI 25-38%, n=36)

Bipolar Disorder: 5% (95% CI 2-9%, n=5)

Psychosis: 1% (95% CI 1-2%, n=5)

Depression: 7 x higher

PTSD: 4 to 5 x higher

Bipolar Disorder and Psychosis: 2 x higher

Sanctuary seekers' vulnerability to mental illness

- Pre-migration

- Torture and inhuman/degrading treatment
- Human trafficking/modern slavery
- War violence

- Peri-migration

- Hazardous journey
- Vulnerability to further ill-treatment/exploitation

- Post-migration

- Separation from country and family
- Hostile environment
- Rejection and disbelief
- Increasingly prolonged uncertainty and 'limbo'
- Difficulty accessing
 - Medical care
 - Legal protection
- Lack of support network
- Deskilling
- Destitution
- Criminalization

The main commonalities in presentation that we see in survivors of extreme human cruelty

- Complex, repeated and prolonged trauma
- Cumulative effects of complex, repeated and prolonged trauma
- A clinical presentation including PTSD symptoms as well as
 - Issues of trust
 - Loss of 'agency'
 - Inability to imagine a personal future
 - Inappropriate risk-taking
 - Somatization
 - Dissociation
- Continuing vulnerability to relapse
- Sustained recovery may require prolonged support

Important overlap with ICD-11 Complex PTSD

- Core symptoms of PTSD
 - Re-experiencing
 - Avoidance/numbing
 - Hyper-arousal
- Disturbances in Self-Organisation (DSO)
 - Emotion regulation difficulties
 - Negative self-concept
 - Difficulties in forming/maintaining relationships

Principles of Trauma –Informed Care

- **Safety:** create a space where people feel culturally, emotionally and physically safe
- **Transparency and Trustworthiness:** provide full and accurate information about what's happening and will happen next
- **Choice:** honour the individual's dignity
- **Collaboration and Mutuality:** relationships and partnerships need shared decision making
- **Strength and Empowerment:** includes the recognition of an individual's strengths which can be validated and built on