Evaluation of ‘Action Access’, an Alternatives to Detention Pilot

Executive Summary

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Background and methods

Since 2015, the number of people being detained in the UK has gradually declined and several Immigration Removal Centres have closed. However, the UK still has one of the largest detention estates in comparison with European countries and, unlike EU countries, has no time limit on immigration detention. One of the recommendations of the Shaw Progress Report, published in 2018, was that the Home Office establish an Alternatives to Detention (ATD) project. The Detention Reform Program, started in 2018, set out a strategic direction for use of immigration detention in the UK and a wide range of reforms to underpin that including developing ATD pilots.

In response and after working closely with UNHCR, the UK government announced the Community Engagement Pilot (CEP) Series. The overall principle of the CEP Series is to test approaches to supporting people to resolve their immigration case in the community. UNHCR commissioned NatCen Social Research to undertake an independent evaluation of Action Access, the first pilot in the CEP series. Delivered by Action Foundation over two years from 2019 to 2021, Action Access aimed to support women with asylum-seeking status in a community-based, engagement-focused ATD through the provision of one-to-one support from a support worker, shared accommodation, and legal counselling from a qualified legal professional. Our evaluation included desk research, interviews with pilot participants (at two time points) and interviews with delivery and strategic stakeholders and key informants from civil society. The main findings and recommendations are summarised below.

The pilot model

The support offered through Action Access responded directly to the needs of the participant group. This included meeting basic subsistence needs for women who were at risk of destitution, providing legal and pastoral support and providing links to the community.

Participating in the pilot meant that women were in a better place emotionally and mentally to work with legal counsellors and support workers to achieve outcomes.

The pilot was adapted in the face of the COVID-19 pandemic and associated restrictions on movement and social contact. Action Access support workers also facilitated links to other support through signposting, referrals and supporting participants to self-refer.

The Action Access pilot did not reach its full capacity. This was attributed to the impact of the COVID-19 pandemic, lower than anticipated numbers of eligible participants, set-up of recruitment routes and the time necessary to build on cautious levels of trust and engagement with the pilot. Recruitment documents in a range of languages were developed during the pilot in response to feedback. Future ATD programmes would benefit from accessible recruitment information and opportunities for in-person discussions with potential participants from the outset.

Participants spent longer on the pilot than originally planned, with both delivery and cost implications for the pilot. The Home Office and Action Foundation worked together to identify and reduce delays. Variation in length of time on the pilot should be built into planning and budgeting of future pilots, and strategies developed to identify and reduce any potential delays. The importance of timely movement of participants through the pilot in terms of both participant wellbeing and expectations, and cost effectiveness, is an important learning point.

Costs

The cost of the pilot is less expensive per participant per night than holding an individual in detention. Reductions in rent on longer-term leases and running the project at capacity could mean that a future ATD programme could be less than half the cost of holding an individual in detention.

However, participants spent on average almost double the number of days on the pilot than was originally budgeted, increasing the cost per participant of the pilot and limiting the cost effectiveness of the pilot overall.

Legal counselling & more holistic outcomes

The pilot’s legal counselling model is an important example of promising practice in terms of providing pilot participants with the opportunity to have their case reviewed by an independent legal representative and to feel that they had been treated fairly. The legal counselling model provided pilot participants with three meetings with a legal representative and was designed to allow the pilot participants to fully explore their immigration options. This approach was seen to be more likely to result in case resolution.

The holistic support offered in parallel with the legal counselling was integral to the delivery of the legal counselling model. The pilot provided a more humane and less stressful environment for pilot participants to engage in the legal review and make decisions about their future, compared with immigration detention. Even when those decisions were difficult and participants had no legal case to remain in the UK, the pilot gave the participant space and time to engage with their immigration options.

Our evaluation found qualitative evidence that participants experienced more stability and better health and wellbeing outcomes whilst being supported in the community than they had received while in detention. Evidence from this pilot suggests that these outcomes were achievable without decreasing compliance with the immigration system.

More widespread use of ATD in partnership with NGOs to deliver timely legal reviews and case resolution has the potential to address any systemic issues in immigration such as the reliance on immigration detention and the damage done to mental and physical health by detention. Timely case resolution may also reduce the impact of uncertainty and instability regarding their immigration status on migrants and reduce the human cost of immigration.
However, there were challenges around managing expectations about what the pilot could and could not achieve within the wider immigration system and around supporting women who had had negative experiences of that system.

The legal counselling model changed over the lifetime of the pilot to better support active engagement and reliable information. This is the legal model that is being carried forward in the second pilot in the CEP series.

It is hoped that that Action Access pilot will be used as evidence that ATD can offer a more humane way to support people seeking case resolution, without reducing compliance with the requirements of the system.

Recommendations

For organisations designing and/or delivering ATD Programmes

Recommendation 1: Prioritise the recruitment of participants into ATD programmes, ensuring the involvement of participants at the earliest possible stage, clarifying the purpose and extent of the ATD Programme from the outset in a language that is understood.

Recommendation 2: Ensure that a structured design process is in place to account for possible delays.

Recommendation 3: Make the roles and purpose of casework support and legal counselling explicit, specifically in terms of supporting and developing links for participants in the community, effectively managing the participants expectations, and cooperating directly with local legal representatives.

For consideration by the Home Office in increasing effectiveness and efficiency of any future ATD Programmes or roll out of aspects that are proven to be effective

Recommendation 4: Ensure that future ATD programmes are informed by the outcomes from earlier ATD programmes, with clarity afforded to longitudinal tracking of participants and an understanding of how to define and measure engagement with the system.

Recommendation 5: Accelerate the introduction of effective aspects of the ATD programme into the Home Office’s ‘business as usual’ model.

Recommendation 6: Prioritize the sharing of financial information, ensuring that collection, analysing and sharing of data is possible.

For UNHCR and/or other civil society actors

Recommendation 7: Ensure that the roles being carried out by the Home Office and civil society, and the shared aims, are explicit and understood.

The Home Office and Action Foundation have both provided management responses to the findings of the Final Evaluation Report, specifically addressing these recommendations. We welcome these management responses, which are included as an appendix to and within the Final Evaluation Report.