The impact of migration in the Fenland area

A scoping report

31 October 2019
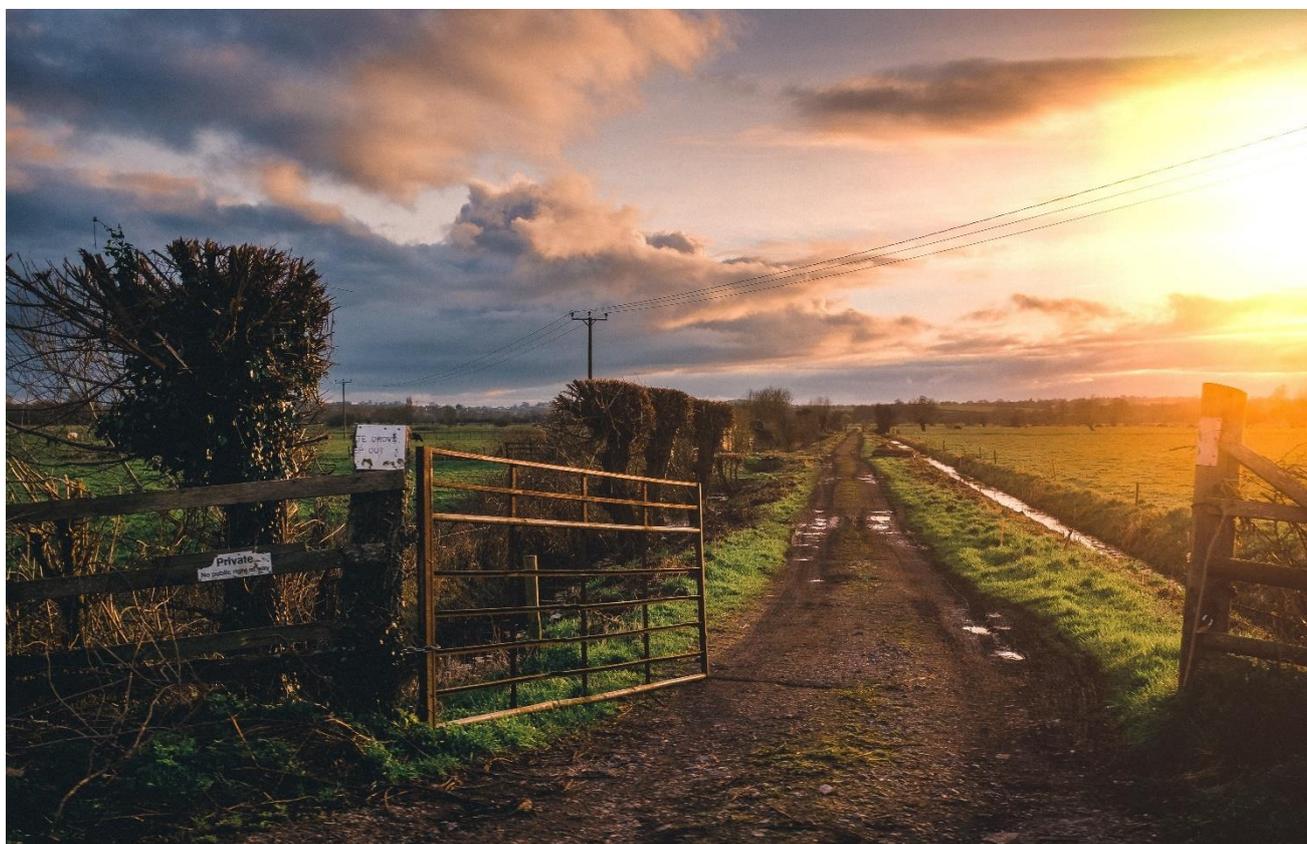

Photo: Chanita Sykes

Authors: Margaret Greenfields, David Smith, Eglė Dagilytė,
with Semra Ramadan and Jana Bright

Client: Rosmini Centre Wisbech, as part of the Migrant Workers' Mapping Project

List of Abbreviations/Glossary

CB – Child Benefit

CCGs – Clinical Commissioning Groups

CEE migrants – Central and East European migrants

CHESS – Cambridgeshire Human Rights and Equality Support Services

CMF – Controlling Migration Fund

CVS – Community and Voluntary Service

DHCLG – The Ministry of Housing, Communities &Local Government

DWP – The Department for Work and Pensions

EAL – English as an additional language; the use or study of the English language by non-native speakers in an English-speaking environment.

EEA – The European Economic Area

EELGA – The East of England Local Government Association

ESOL courses – English for Speakers of Other Languages courses

EU – European Union

FE – Further Education

GDP – Gross Domestic Product

HMO – House in Multiple Occupation

HR – Human Resource

IAG organisation – Information, Advice and Guidance organisation

IMD – Indices of Multiple Deprivation; Statistics on relative deprivation in small areas in England published by Ministry of Housing, Communities & Local Government

JC – Jobcentre Plus

JSNA – Joint Strategic Needs Assessment; a process by which local authorities and Clinical Commissioning Groups assess the current and future health, care and wellbeing needs of the local community to inform local decision making.

MAC – Migration Advisory Committee

MO – The Migration Observatory, based the University of Oxford

NCVO – National Council for Voluntary Organisations

NFU – The National Farmers Union

NGO – Non-Governmental Organisation

NHS – The National Health Service

NINO – National Insurance number

Pre-settled status – the migration status granted under the EU Settlement Scheme for those non-Irish EU citizens who have legally resided in the UK for less than five years

SAWS – Seasonal Agricultural Workers Scheme

Settled status – the migration status granted under the EU Settlement Scheme for those non-Irish EU citizens who have legally resided in in the UK for five years or longer

TFEU – The Treaty of the Functioning of the European Union

UC – Universal Credit

UK – The United Kingdom

UKIP – The UK Independence Party

VCSE organisation – Voluntary, Community and Social Enterprise organisation

Acknowledgements

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Executive Summary

Project aims

The Migrant Workers' Project was commissioned by the Rosmini Centre Wisbech in Autumn 2018. The project ran for one year, with the overall aim of contributing to the wider multi-agency suite of activities within the two-year Controlling Migration Fund (CMF) programme of activities led by the Fenland District Council and funded by the Ministry for Housing, Communities and Local Government. The overall programme was focused on understanding the impacts of migration across Fenland, in preparation for planning to meet post-Brexit challenges.

Research team and partners

The Migrant Workers' Project was led by Professor Margaret Greenfields (Buckinghamshire New University) in collaboration with Anglia Ruskin University academics, Dr David Smith and Dr Eglė Dagilytė, and with research assistance provided by Semra Ramadan and Jana Bright. Collectively, this group is the 'academic team'. The academic team worked in partnership by the commissioning agency (the Rosmini Centre). Rachel Heathcock, from the East of England Local Government Association (EELGA), was seconded to the Rosmini Centre to work on some elements of this project and supported initial data gathering on statutory and voluntary service providers, given the EELGAs existing networks with local agencies.

Research methods used

The co-designed project brief required the academic team to undertake analysis of two administrative data sets, qualitative data gathering from key informants and stakeholders and to review relevant literature, and media (social, print and broadcast) outputs pertaining to the impact of migration in the study area (Fenland). Full research ethics approval was

obtained from Buckinghamshire New University with careful attention paid to issues of informed consent for the collation of data and participation of migrant workers contacted through support agencies. Materials about the project (and that access to advice and support was not contingent upon participation) were emphasised in all publicity materials which were translated into a range of community languages to increase accessibility for migrant workers.

The first (quantitative) data set emerged from Rosmini's internally designed/administered pilot questionnaires utilised to record data on all new service users, which was trialled in the summer of 2018 and amended in August/September 2018 following guidance and advice from the research team. The finalised survey instrument was administered to migrant service users accessing the Rosmini Centre, and shared with other Information, Advice and Guidance (IAG) agencies in the locality for their use, between late September 2018 and late December 2018. Thus a snapshot of three months of new service user data was captured, to enable consideration of key migration trends, type of IAG enquiries dealt with by specialist agencies, and to enable the academic team to interrogate the anonymised data-set for key patterns in relation to accommodation, benefit claimant status, employment status, place and type of residence of migrant workers, whether they had co-resident dependents etc.

A second dataset consisted of analysis of survey responses (and associated materials) gathered by the EELGA seconded staff member between October 2018 and March 2019 and drew upon information gathered through contacts on the EELGA's database of stakeholders which includes direct employers of large numbers of migrant workers and agencies known to supply migrant workforce labour. As part of their prior activities in Fenland District under the auspices of the Controlling Migration Fund (CMF) activities the EELGA had also collated a database of statutory and voluntary service providers and organisations in regular contact with, (or likely to be in contact with) migrant workers. Contacts on these databases were then approached by Rachel Heathcock from the EELGA, in line with permitted data sharing protocols and legislation, to invite them to participate in the project reported upon here. EELGA contacts thus approached (over 300 in total including schools, health care providers, religious organisations, food banks, community groups etc) were invited to complete a short survey instrument detailing their

field of engagement with migrant workers – e.g. employer, statutory or voluntary sector agency, etc; to respond to core questions around demographics of migrant workers whom they supported, and were also asked to reflect upon key challenges and a range of themes which were to be refined upon and explored in follow-up qualitative data gathering exercises. Respondents were also invited to include qualitative comments and raise further points of interest in 'write-in' boxes included within the survey instrument administered to them. An option was provided to indicate willingness to participate in the qualitative data gathering phase of the study through participation in focus groups or individual interviews.

A sampling frame was prepared to enable cross-sectional representation of statutory and voluntary sector agencies, as well as employers (direct and agencies) and migrant workers within the follow-up qualitative phase of the study. Ultimately, meeting the sampling frame targets as initially designed proved to be impossible as a result of lack of engagement from anticipated respondents (including police and health services) although as detailed in Chapters 5 and 6 of the report, an amended sample of respondents was ultimately achieved.

Despite considerable, determined and repeated efforts to access statutory and voluntary sector agencies and key policy organisations such as the National Farmers Union, responses were in the main very low within this element of the study (both completion of the survey and subsequently the ability to access a broad sample of interviewees), particularly from statutory and voluntary sector agencies. Employers were in the main somewhat more responsive than some other categories of potential participants approached to take part in the research.

In total 220 survey responses (administered by the Rosmini Centre and other IAG agencies) were received between September and December 2018, which captured data from migrant workers (from 12 countries of origin).

Of the potential 320 plus respondents included in the EELGA database who were approached, it proved remarkably challenging to obtain responses and agreement to be sent out the survey instrument for completion. Contact was usually attempted on several occasions by email, telephone or even by directly visiting key employers' registered offices

or employment agency premises to establish personal contact and identify a named individual to be emailed with information about the study. Ultimately a total of seven responses were received from voluntary sector agencies (including support groups, foodbanks and churches) and nine responses from statutory services (e.g. schools, health commissioners and GP practices). In addition, information was provided by eight direct employers and recruitment agencies.

Further, literature and media coverage analysis was simultaneously undertaken, focusing on discourse around the impacts of migration, perceived community tensions, concerns over workforce disruption, etc. as well as Brexit related developments. This was reviewed was initially completed in the late Spring of 2019 and then refreshed up to date (as of 14th October 2019). The academic team also interrogated a mixture of routinely-gathered administrative statistics and data which are a matter of public record which are discussed in Section 3 of this report.

The second (qualitative) data set was gathered by the academic team through the process of undertaking thirteen qualitative interviews and one focus group carried out by different members of the research team and then collectively considered for thematic similarities, between April and October 2019. Interviews were undertaken with a range of stakeholders (including employers, employers organisations; statutory and voluntary services and IAG providers). The qualitative data set also included a limited number of migrant workers whose case notes from advice agencies were shortlisted after review of anonymised files, with selection made to include a range of genders, countries of origin, benefit claimant status, ages, reasons for contact with agencies or where particularly interesting or complex narratives were identified.

The findings from the interviews and focus groups were triangulated with the findings from the completed analysis of the first data set, to assist in the development of policy recommendations and guidance. The recommendations have been designed to support the work of the Rosmini Centre, local stakeholders and other agencies participating in all CMF projects undertaken across the Region.

Key findings

This analysis focuses on the issues highlighted by the literature/media analysis, administrative statistics and the quantitative data from migrant workers, service providers and employers. Key issues identified include concerns over housing access and quality of accommodation occupied by migrant workers, employment status, welfare benefits advice, help with destitution/use of food banks, engagement with voluntary sector support agencies, use of healthcare services, and anticipated impacts of Brexit etc. These findings are outlined below.

Finding 1: The literature and media review highlight national challenges which largely mirror those faced in Wisbech

Economic factors, such as demand for labour in the agriculture and catering/hospitality sectors are the key attraction for migration from Central and Eastern Europe. The literature disagrees on the overall effect of migrant labour on both national and local economies and on community cohesion, as this often depends upon whether migration is permanent, seasonal or cyclical, with greater social cohesion found to occur over time as migrants become more established in communities. Observance of workers' rights and vulnerability to exploitation seems to be an issue across both the literature and local (Wisbech area) media coverage, as are the topics of the quality and availability of public services. Local and broadcast media coverage highlights exploitation of migrant workers by rogue landlords and illegal gangmasters, expresses concerns over high density communal living and HMO licensing, rapid change of population mix, perceptions of increased crime rates, alcohol abuse and related antisocial behaviour, perceived welfare tourism, the need to enhance policing resources, and population pressures on schools and doctors' surgeries. Social media coverage indicates a range of disagreements and uncertainties about the future after Brexit, especially as in Fenland the pro-Brexit vote was prominent in the 2015 UK general election and the 2019 European Parliament election.

Finding 2: The legal context highlights concerns pertaining to a range of enforcement and administrative issues

There are several important legal aspects that underpin this project, including the Households in Multiple Occupation (HMO) compliance regulations, the Modern Slavery Act

2015, working conditions and pay of migrant workers, as well as changed legal rules on welfare entitlements and Universal Credit introduced by the Welfare Reform Act 2012 and the Universal Credit Regulations 2013. There are also procedural justice and legal issues surrounding these rights, such as difficulties in challenging administrative decisions taken by welfare state agencies or protecting rights in employment tribunals, since fees to use this service were introduced, albeit they were subsequently declared unlawful. Finally, the key legal theme at the heart of this project remains Brexit and the rights of EU/EEA citizens after the UK leaves the EU, which seems to present uncertainties and mixed reactions both from migrant workers, service providers and employers.

Finding 3: Administrative data supports the above trends

Local population trends (mapped from several data sets such as local Migrant Health surveys, School Census data, etc) show a greatly increased number of migrant residents in the locality between 2001-2011, even though (counter-intuitively) Fenland as a whole has a lower proportion of non-UK born residents compared to the UK average. This overall demographic shift is also reflected in school data. Compared to the UK average, Wisbech has a higher percentage of migrants who have been resident in the UK for five years or less and a lower proportion resident for over 10 years, indicative of rapid population changes. When it comes to the intention to stay, in 2016, 65.2% of respondents to the Migrant Health Survey (Cambridgeshire County Council and Cambridgeshire and Peterborough Clinical Commissioning Group, 2016) reported having been living in the UK for at least 5 years and 52.6% said they intended to reside in the UK permanently, although Brexit may have changed these plans for some. In terms of residence, the PE13 postcode (central to this study area) is where over 91% of the health survey respondents were living at the time of completion, this area being within the 10% most deprived neighbourhoods in the UK and in the 20% poorest neighbourhoods in terms of income.

Finding 4: Housing Concerns

These stood out as an important issue in relation to the review of all administrative data sets as well as emergent qualitative findings. When it comes to housing, a range of housing related issues were repeatedly highlighted, including overcrowding, unhygienic and unsafe living conditions, illegal evictions, sub-letting and high density of poor quality HMOs. Housing arrangements such as living in households with non-related adults was also seen

as having safeguarding issues impacting children co-resident with migrant workers (especially where living with a lone parent), while concentrations of migrants in certain neighbourhoods may inhibit social integration and lead to areas becoming stigmatised. The main housing related issues facing migrants who sought support from Fenland District Council included requiring help with applying for social housing; dealing with poor understanding of council tax or housing rights and council tax benefits; complaints about private sector accommodation and homelessness. The latter, which impacts on both the UK and migrant population and the subsequent rise in rough sleeping, has become a more visible and therefore prominent issue nationally and locally, and hence subject also to social and print media commentary and debate.

Finding 5: Employment data findings are comparable to elsewhere the UK, with exceptions pertaining to industry mix and increasing rates of new NINO registrations in Fenland

Many of the migrant workforce have historically been employed in horticulture, agriculture, food packing and processing which are among the lowest paid sectors of the economy. Existing literature evidences that such employees work longer than average hours. Overall employment rates amongst migrants are higher in Fenland when compared to the rest of East of England. Literature and existing data sets indicates that less than half of those working in agriculture receive paid holidays, less than a third receive paid sick leave and many do not have written contracts. It has been estimated that over 80% of EU nationals currently working in the charity/NGO sector would be ineligible to work in the UK post-Brexit under current migration proposals, rising to 87% in social and residential care jobs. This we anticipate may further reduce the language ability and cultural knowledge of retained staff required to assist migrant workers. Moreover, it is foreseeable that the emerging population of ageing Central and East European (CEE) migrants who have settled in the UK and are likely, in common with all populations, to experience increased rates of dementia in future years, may be particularly impacted by reduction in bilingual support staff in years, causing additional stretch on service providers. Employers and labour providers in Wisbech have already experienced some degree of difficulties in meeting labour demands due to a decline in migrant labour which predates the 2016 referendum and have further noted a decline in the language and skill levels of more recent arrivals. Labour shortages have forced employers to increase pay and conditions in some cases to retain staff. Views were mixed

on the likely impact of Brexit, with some larger employers investing more in automation, others considering relocation, while others yet seeing migrant labour as an economic necessity which the post-Brexit migration system should accommodate.

Finding 6: Healthcare access is variable and reliance on emergency hospital care exists

In relation to healthcare, understanding of how the National Health Service operates varies considerably between migrant workers from different nationalities. Such awareness, along with practical reasons (e.g. long working hours and complex shift patterns) and varying perceptions about own health issues and attitudes when seeking medical advice (for example, a common reluctance among migrants to acknowledge stigmatising mental health needs) appears to affect the level of registrations with GP practices and dentist services. In turn, this leaves migrant workers heavily reliant on hospital emergency care (as further indicated by the Joint Strategic Needs Assessment (Migrant Worker health study) carried out within the locality in 2016. In relation to healthcare experiences reported by workers and their families, several mothers said they found healthcare for themselves and the children to be of good quality. One mother of two teenage children mentioned that her landlady assisted them in registering them with a GP and also helped her to enrol her children into schools. Review of The Indices of Multiple Deprivation (2015) indicate that the PE13 postcode in Wisbech, where many of the migrant population reside, is in the bottom 10% of neighbourhoods in England for poor health. Comparative literature shows that the largest migrant populations – Lithuanians and Latvians – are statistically at higher risk of heart disease and associated conditions and higher levels of liver cirrhosis (alcohol consumption related) than the UK population. Lithuania and Latvia also have some of the highest rates of mortality in under 65s within the EU for cancer, respiratory diseases, transport accidents and suicide. Whilst we do not know if this international trend can be extrapolated to migrants within the study area, it may be relevant in terms of future service planning and interventions. It was noted in the qualitative findings, however, that there are low numbers of migrants receiving sickness/disability benefits, in comparison with the local UK population, reflecting the relatively youthful age profile of the migrant population in Fenland. There is evidence from our findings and comparative literature which suggests increased risk of poor mental health for migrant workers, often resulting from stress, isolation and poor living and working conditions. These issues present a complex picture of health-related

social risks that must be taken into account by local health professions, but also by social care and criminal justice systems when planning for the future.

Finding 7: Community cohesion findings demonstrate a mixed picture at the local level

Community Cohesion remains potentially problematic, especially as (at national level in particular) many migrants have been resident in the UK between 5-10 years. The EU referendum in 2016 has undoubtedly had a major impact on the perceptions of, and social relations between, migrants and the British majority population nationally. Our media analysis and qualitative findings indicate that Fenland is not immune to this national trend. The major concerns of the local population identified through literature and media analysis relate to the impact of EU migration on housing, neighbourhood cohesion, NHS access/waiting lists and availability of school places. Concerns from literature/media reviews indicate that fears exist that migrant communities live 'parallel lives', despite some examples of successful integration and friendships (also evidenced in qualitative findings, particularly in relation to contacts within school settings). In fact, within our data, views were mixed among local employers and service providers, with many stating that overall community relations were good and that the notion of community tensions are exaggerated by the media. The main factors identified by interview participants as preventing greater community integration were residential concentrations of the migrant population, HMOs which meant most socialising was undertaken with co-national housemates, long and unsocial working hours which prevents social activities, and a predominance of national and language-based community groupings. The Government's Integrated Communities Strategy was introduced in 2018 to begin addressing these issues by placing integration at the core of policy making across all Government departments; taking forward a review of housing policy to address residential segregation; involving libraries and other community hubs as spaces within which to promote social integration; promoting employment for minority populations; supporting inter-faith and inter-community dialogue and strengthening evaluation and evidence based practice. Accordingly, scope for engaging with these recommended practices exists at local level to enhance social cohesion.

Finding 8: Migrant demographics and service use

Primary statistical data on migrant worker service users (collected through the Rosmini/IAG agency service user survey collected in 2018) demonstrates that the three largest nationalities represented in the newly gathered data are Lithuanians (37.3%), Romanians (23.6%) and Bulgarians (20.9%). Although the number of self-identified Roma is small, based on the knowledge of Rosmini Centre staff (and supported by the researchers' own experience and review of literature), Romanian Roma migrants tend to declare themselves as Romanians (as is common elsewhere in the country). The migrant worker data set indicates more female than male migrants living in the Fenland area and accessing the Rosmini Centre and other IAG services. More female than male migrants report having dependent family members. There is a larger number of young (18-30) adult males (49%) than young adult females (27%) in contact with IAG services. Only ten out of the 220 respondents to the migrant worker survey declared a disability (the 'young, healthy migrant' effect). Over 70% of the total sample were employed (both males and females), with over half the sample employed by agencies rather than direct employers (both males and females). Only two out of the entire sample declared they were self-employed. Numbers in full-time and permanent employment were small, which may be indicative of fluctuating work patterns and heavy reliance on agency work. However, agency representatives interviewed stated that they were able to provide their workers with stable and continual work due to the demand for labour. The majority of those who are employed/have worked, have been in employment for a fairly short period (< 3 years) which is aligned with the evidence provided for date of arrival in the UK. Migrants who were out of work, and not studying full-time, did not in the main receive benefits (only one in five received any form of benefit), with most respondents – including those with dependent co-resident children – not receiving child benefit. Awareness of eligibility for benefits was poor amongst more than half of the total sample although interestingly the employers and employment agencies/work support specialists interviewed thought that benefit and entitlement knowledge was (in their experience) high.

In terms of intention to remain in the UK, the data indicated that half of the respondents in the Rosmini collated data set had arrived in the UK in 2018, and over three-quarters stated they intended to remain permanently in the UK. The majority of those who did not wish to reside in the UK permanently were intending to stay for less than one year (59%). Over

90% of respondents live in the PE13 postcode area of Fenland (Wisbech) which is unsurprising, given the data collection centres and reliance on Rosmini Centre services.

Finding 9: **Sources of access to Information, Advice and Guidance for migrant workers**

In relation to migrant workers' access to IAG advice, we found that relatively recently arrived migrant clients, particularly those most at risk of destitution, are accessing support and information from multiple places. The Rosmini Centre was the source of IAG advice for 85% of the sample, although over half also reported that they had sought advice on access to services, employment etc. from family and friends. Employers and service providers believed that migrant social networks were a major source of advice and assistance. Other local organisations the migrant community reported contacting for advice included the Children's Centre in Wisbech, Access at the Queen Mary Centre in Wisbech and The Ferry Project's Night Shelter. Interviews with migrant workers clearly demonstrate how much help they received from the Rosmini Centre. Mention was specifically made of assistance with National Insurance number applications, accessing English language lessons, assistance with Maternity Allowance applications, school applications for children, guidance on tax payments, assisting with finding accommodation and raising awareness about UK welfare benefits rights.

Concerns around limited opportunities to learn English were reflected in some migrant worker interviews (potentially also impacting on community cohesion, see above), with some respondents reporting having difficulties in finding time to undertake formal language courses due to work and other commitments, despite being aware of the classes offered by support agencies and a local recruitment agency. One male migrant worker respondent indicated that he has completed an English language course hosted by the employment agency which helped him a great deal in navigating through work and life post-migration.

Finding 10: Questionnaire responses from employers and their organisations

Responses to this aspect of the study were limited in number and scope of information provided. Out of the eight employers who participated, six are 'direct employers' of migrant workers (one farm and five food preparation facilities), and two were employment agencies specialising in finding work for migrant workers. An interview was also conducted with a

representative of an organisation that represents labour providers. The industries that respondents referred to within the survey, included food manufacturing (one respondent was a farmer/agriculture sector employer) as well as packing and preparation of food produced by the local agriculture sector. Most direct employers recruited workers by advertising vacancies through UK-based recruitment agencies, attracting staff from various locations (including internationally) – and potentially facilitating seasonal movement. In turn, employment agencies advertised vacancies locally, nationally and internationally through various sources, and on one occasion reference was made to use of a specialist Facebook page operated by an agency to advertise employment opportunities. Respondents (other than a direct employer with a waiting list/constant flow of enquiries for their permanent posts) reported that the most difficult months for recruitment were March, August, September and December (peak holiday seasons when migrants potentially returned home or were in high demand and could command higher wages as a result of demand nationally). Four out of eight employers/agencies provided both seasonal and permanent work, and only one employer (direct recruitment) indicated that staff were employed on a 'zero hours' contract basis.

Numbers of foreign national employees reported by respondents varied, with some agencies stating that they had 3000+ migrant workers on their books – both in the UK or abroad – and farmers and small packing businesses indicating that they might take on between 6-20 migrant workers during the peak season. Two out of eight employers stated that they experienced little personnel change, indicating that around 90% of employees remained with them for the whole period for which work is available. Unsurprisingly, in the workplace, English was the most commonly spoken language for general communication. Polish, Latvian, Russian and Lithuanian were also widely used. Services provided for employees by employers varied across employment sectors, with translation, help obtaining NINOs, benefits and maternity rights advice, and transportation to/from workplace being most common. More recently, some employers and agents had been assisting their workers with the EU Settlement Scheme. With regard to transportation, all but one employer stated that their workers travel predominantly from the local area – within a 10-mile radius of Wisbech/surrounding villages. Seven out of eight employers provided some induction for their employees, with half of respondents referring to delivering additional induction/training beyond site specific concerns. No employers reported providing accommodation. One

employer praised the work ethic of migrant workers ('show up on time, work hard'). Five explicitly referred to language barriers as the most difficult problem they encounter while employing migrant workers, and one reported alcohol abuse and hygiene problems, specifically in relation to more recently arrived migrants who were considered often to be lower-skilled than earlier waves of migrant workers to the area.

Finding 11: Responses from voluntary and statutory organisations

These were also limited in scope and number. The findings indicate that three agencies (two specifically providing services to older people - general IAG and support and a specialist mental health team; and a youth support service) worked exclusively with a single age category. It is worth reiterating that older people are a minority amongst migrants hence contacts with older CEE migrants are relatively low, although increasing. By far the greatest number of voluntary and statutory organisations provided services to migrant workers of any age. Two agencies that responded are explicitly faith-based organisations, but do not appear to offer services only for members of their religious denominations. According to questionnaire responses and preliminary qualitative data gathered from respondents, English (UK born) nationals were the groups most likely to access services provided by such voluntary, community and social enterprise (VCSE) organisations (this group of course forming by far the largest population in the area); followed by Lithuanians, Romanians and Polish. These latter groups predominantly accessed debt advice or general IAG. Gypsies/Travellers were only reported as a key group in one category of services access – that of IAG offered by a youth support agency and Roma were not perceived of as a core service use group.

The most commonly used languages by service users accessing VCSE provision was English (4/6 responses), followed by Lithuanian (2/6) and Polish (2/6), whilst Romanian, Urdu and Russian were cited by a smaller number of agencies as joint third overall most commonly used languages. The overall numbers of CEE nationals (from the three largest migrant communities) cited as accessing services is low across most of the organisations (5 out 6 VCSE agencies), with one community/voluntary service agency reporting 21 Romanians, 15 Lithuanians and 10 Russian service users. A faith-based organisation in contrast, reported 50-60 users of the services spread across the three main migrant nationality categories. Given that few East European/migrant young people were reported

to be using a specialist disability/mental health service, it is to be anticipated that the majority of those reporting disabilities and utilising these services were not migrants, however qualitative findings indicated some young migrants using the youth support service despite a high level of stigma associated with mental health issues. Data on types of issues encountered and frequency of service access was variable, but most VCSE respondents referred to the need for information in relation to benefits, health access/advice and employment rights, followed by English language courses, debt management and housing issues. Lack of English language skills (or appropriate translation services) can be identified as the main issue which needs to be addressed in relation to supporting migrants across the life-span. Within public sector services, the most commonly stated support needs pertained to clients requiring assistance with health, housing and benefits issues. Despite several respondents indicating that concerns pertain to safeguarding issues and perceptions amongst migrant workers from some countries that it is acceptable to leave children home alone, or with older siblings providing care, no respondent referred to enquiries around engagement with social services, child protection services.

Finding 12: Systemic challenges in accessing data from statutory and voluntary sector respondents

It has proved particularly difficult to obtain information/responses from statutory and voluntary sectors. Despite persistent efforts to engage public sector service providers and indeed VCSE agencies, responses to the call for data were received from the nine statutory services providers; seven voluntary sector (including church organisations) and eight 'employers' (including agencies). A noticeable gap existed in relation to accessing information from key statutory services and very limited responses were received from health professionals. Data-mining, contact-seeking and outreach was undertaken by Rachel Heathcock (EELGA/Parallel Lives Project), and despite pre-existing networks of contacts held by the EELGA, only a low number of responses occurred despite reaching out to over 320 individual contacts. This potentially suggests either the political sensitivity of this issue or high levels of work stress/lack of capacity. Hence, during the administrative data collation stage (Phase One of the project), degrees of contact and engagement have varied significantly by sector and agency. It is noticeably the case that Brexit concerns and uncertainty as well as rapid staff turnover in some agencies we have sought to contact, have meant that levels of information obtained have not been consistent. In relation to

migrant workers' data collection, the Rosmini Centre connected with other local advice agencies and targeted contact points where information from migrant workers was accessed, including Information Advice and Guidance sessions, ESOL classes, lunchtime provision for Homeless People, BREXIT information evenings as well as some general surveying of people using other facilities such as the drop-in Rosmini Centre Café. Despite the huge efforts involved in proactive engagement from the academic team, EELGA and Rosmini Centre staff, the numbers of participants in follow-up interviews/focus groups were even lower: ultimately interviews with seven statutory services providers, one voluntary service provider, five employers, and nine migrant workers were achieved.

Policy Recommendations

Recommendation 1: Improved Data Collection and Sharing

There is a critical need for longitudinal data generating, mapping of information and sharing of intelligence, to enable anticipation of resources (health, education, etc.) in one, three and five-year time-frames. Appropriate forward-planning and resource allocation to statutory sector agencies must be of high priority, given the diverse migrant population and ranges of languages spoken in the study area.

Recommendation 2: Intelligence Sharing via Inter-agency Forums and Data-Sharing Protocols

To aid sharing of data and intelligence, there is a need for regular inter-agency forums to engage key stakeholders. These should include regular attendance from health services (Primary and Secondary Care, CCGs, Public Health agencies etc), police, social service, education, DWP/Job Centre, local authority housing and community cohesion officers as well as IAG agencies.

An appropriate data-sharing protocol should be devised to ensure agencies are aware of which clients are seen in multiple IAG locations, and which information/support they accessed. Such a protocol would help avoid duplication of recorded information, resources and staff time, by ensuring agencies are aware of which clients are seen in multiple IAG locations and which information/support they access.

On-going longitudinal 'real-time' data mapping would ensure that service providers are aware of changes in demographics and can plan for them, i.e. changing language use; growing populations of older people with specific needs; planning for new cohorts of children entering education from the countries of origin etc.

Recommendation 3: Preparing for the EU Settlement Scheme

Given the large number of survey respondents who indicated a desire to settle permanent in the UK , there is a clear need for stakeholders to continue to advise and educate EEA (specifically Central and East European) migrant workers and their families about the importance of preparing for Brexit by obtaining the required evidence to enable them to stay

in the UK under the EU Settlement Scheme.[1] Most importantly, a clear message should be passed on that EU citizens who have not obtained a record adequate for settled or pre-settled status by the required deadline (31 December 2020 for no-deal Brexit; 30 June 2021 if a deal is agreed) are at risk of becoming illegally resident and are in danger of deportation. In addition, high priority support for settled status applications is required to be provided by multiple public organisations, IAG agencies and employers, given the high and increasing demand for information and advice (see footnote 1 below).

Recommendation 4: Better Access to Information

Information on the EU Settlement scheme as well as on housing issues (rights to apply for social housing, requirements on landlords in relation to health and safety, decent homes, etc), access to employment related benefits, health registration and the availability of preventative screening, etc should be prepared and disseminated, using a variety of methods, e.g. leaflets, emails, text messages, and via downloadable phone apps. The latter would enable migrants who may be working long hours to access important information or updates about service provision. For example, downloadable up to date messages could be sent in relation to specialist pop-up women's health clinics, or to alert workers to public health concerns such as measles outbreaks etc, as well as to remind workers of imminent deadlines for registering for the EU Settlement scheme. Such information could also be disseminated in stakeholder offices and at public events organised by recruitment agencies, voluntary organisations, churches, healthcare centres, schools etc. These materials should be provided in the most commonly used community languages. Intelligence sharing (see Recommendation 2, above) would enable stakeholders to be alert to newly emergent communities, and the potential need to upgrade languages used in disseminating information to include additional languages to meet the needs of new migrant populations.

Recommendation 5: Increasing UK local labour force participation

Tailored targeted efforts should be made to encourage UK-born local workers to train for and take up available employment in the study area. Indeed, this may become a necessity given the possibility of labour shortages post-Brexit and the necessity of securing

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[1] As of 23rd October 2019, the Rosmini Centre alone had received 586 requests for help from migrant workers with Settled Status applications, of which 90% full applications had been completed by the IAG team since summer 2019, whilst others were in process.

alternative sources of labour. This may be linked to amendments/changes in Universal Credit which it has been suggested may make flexible employment options more accessible for individuals who may require a regular income to meet housing costs on rented flats or family homes etc. Further benefits of upskilling local UK labour sources are the enhanced contact between both UK-born populations and migrant workers in the workplace, a process anticipated to defuse of any potential tensions between migrant and non-migrant populations which have been identified within social media commentary.

Recommendation 6: Tailored Individual Support

In addition to the provision of advice leaflets and information disseminated via phone apps noted above (see Recommendation 4), there is a clear need to deliver tailored individual support (e.g. in health centres, education settings and local authority contexts) using community languages for members of CEE communities. Greater levels of support are needed for the increasing numbers of older CEE migrants whose English language proficiency has been identified as being low, and who therefore find it difficult to access services in the local area. This group may in time – if long-term settlement occurs – also require greater levels of support from voluntary service providers (e.g. Age UK, the Rosmini Centre) and from a wider range of health and social care agencies to meet their needs.

Recommendation 7: **Innovative English Language Learning and Education**

Inter-agency discussions and collaborative planning should consider diverse formats (e.g. via provision of podcasts in some common community languages) to educate CEE migrant communities about potential learning opportunities, including flexibly timed or remote teaching (on-line) delivered English language classes, strategically delivered by agencies working together to pool their resources. For example, strategies to engage and inform could include the provision of bite-size learning opportunities delivered via apps in some common community languages. Further cost-sharing and added value opportunities could be achieved, for example, by utilising multilingual staff employed in voluntary and community service organisations (such as the Rosmini Centre) to support local interpreters used in health care settings, or when migrants are in contact with local authority staff or police services.

Recommendation 8: Accessible data on local labour market trends

Employers and labour providers demonstrated a high degree of uncertainty, and varying views regarding the impact of Brexit on their business and on their future ability to meet labour force demands. While there is evidence that labour shortages are driving wage increases in the agricultural and food processing industries better labour market data collection and forecasting could help to mitigate some of the potential issues created by Brexit – for example by exploring value of wages paid against sector averages or against other location-specific employers. This is especially pertinent if UK born locals are required to fill any potential labour gaps though the perception of such work as unappealing and low-status by many UK locals will also need addressing. Better and more accessible information on local labour market trends would also enable consideration of whether these variables provide some explanation for work-flow challenges encountered on occasion.

Recommendation 9: Future Research to Address Gaps in Knowledge

Due to the limited number and range of public and voluntary service providers who participated in this research, there is an urgent need to undertake further research beyond this pilot study, to build a more nuanced picture of the healthcare, housing and educational needs of CEE migrant communities as well as experiences of contact with criminal justice agencies.

Follow-up research and community engagement activities should be undertaken to obtain a better understanding of the various social and public service needs of migrant worker communities including in relation to safeguarding concerns and potential unmet mental health needs as identified in a number of interviews.   In particular it is recommended that more in-depth health focused research (supported by the inclusion of additional coding to indicate recent migrant status or break down 'White Other' categories further within health datasets) and building upon the 2016 JSNA and findings from this study is required to aid with service planning.