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DISABLING MIGRATION CONTROLS

**SHARED LEARNING, SOLIDARITY,
AND COLLECTIVE RESISTANCE**

Rebecca Yeo



This is a must-read book for anyone with any interest in social justice. It is also a call to arms for activists in both the disability and immigration sectors to learn from each other, to unite, and to build solidarity in the fight for a better future for us all.

Ellen Clifford, *Disabled activist, member of the national Steering Group of Disabled People Against Cuts and author of The War on Disabled People published by Zed Books which won the 2021 Bread and Roses award*

We've needed this book for a long time! Immigration activists have much to learn from the disabled people's movement, and particularly from disabled asylum seekers. Rebecca Yeo is a committed, inspiring and comprehensive guide to this important emerging field.

Professor Bridget Anderson, *Director Migration Mobilities Bristol, University of Bristol*

In this thoroughly well-argued book, Rebecca Yeo shows both how asylum systems produce injustice for disabled people, and that migration studies has much to learn from disability studies. This is a treasure trove not just for migration studies, but also for activists fighting for justice.

Willem Schinkel, *Professor of Social Theory, Erasmus University Rotterdam*

This book and Rebecca Yeo's work more generally is essential for anyone trying to make sense of the current state of oppression and its intersectional nature. Crucially, it also provides a template to explore ways out of it.

Dr Aurelien Mondon, *Senior lecturer, Department of Politics, Languages and International Studies. University of Bath*

This book offers compelling insights into the potential to bring together disabled citizens with people in the asylum system, refugees and allies in a much-needed movement of solidarity to resist and reimagine the current systems that debilitate, disable and devalue vast swathes of people – and planet – in the narrow pursuit of profit.

Dr Sarah Bell, *Senior Lecturer, Disability & Climate. University of Exeter*



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Disabling Migration Controls

When people are prevented from meeting their needs, the impact is disabling, whether in the immigration system or in the wider population. Drawing on many years of research and activism, this book argues that insights from the disabled people's movement, particularly the original Social Model of Disability, can be usefully extended to focus resistance on the disabling restrictions imposed on people subject to asylum and immigration controls.

While acknowledging the pain and discomfort of many impairments and of forced displacement, the book focuses on injustices that can be changed. It does not catalogue the hostility of the 'hostile environment'. Nor does it promote inclusive asylum restrictions. An unjust system is not transformed by including disabled people. Policies designed to deprive people of essential needs and to stoke hatred among the wider population are core elements of the rise of fascism. In this context, bringing together movements for disability and migrant justice could help build urgently needed solidarity and resistance with which to develop a society based on equity and common humanity.

Quotations and images are used to convey the messages and priorities of disabled people seeking asylum, ensuring that the book is both engaging and grounded in the insights of lived experience. This book will interest people seeking to improve social justice, including scholars of disability, migration, sociology and politics.

Rebecca Yeo is an activist and academic specialising in issues of disability and migrant justice. She worked on issues of disability and international poverty for many years before turning to focus more on the UK context. Her doctoral and postdoctoral work included bringing people in the asylum system and the disabled people's movement into conversation with each other. She explores the relevance of insights and achievements of the disabled people's movement for wider social justice movements.

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Disabling Migration Controls

Shared Learning, Solidarity, and
Collective Resistance

Rebecca Yeo



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*This book is dedicated to all those who struggle and resist
injustice in its many forms.*



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Preface

In honour of Kamil Ahmad and Bijan Ebrahimi, both disabled refugees who were murdered in Bristol – Speech given at an event in Bristol on 29 June 2018.

I met Kamil in 2012, soon after he had arrived in Bristol. I was bringing together a group of disabled people in the asylum system for a research project. We were using painted murals to bring the messages of disabled people to public spaces.

When I first asked Kamil if he wanted to be involved, he said no. He said he knew what would happen, I would ask lots of questions, then go away and forget he exists. He would gain nothing.

When he decided to be involved, then he really got involved. He helped design, paint and install a mural showing the messages of disabled people in the asylum system. He spoke of how he had left Iraq to find peace and safety, but he talked of how in Britain the sun shines for some people but not for others. He was among a group of disabled people from across the country who took the murals and their messages to the Houses of Parliament in 2013.

Kamil was wrong. I did not, and will not, forget him. Today is about ensuring that Bristol has a lasting memorial of him, and that we build some positive change in honour of him, Bijan and other disabled refugees who have been failed by the system.

Responding to a system which is disabling by design

At a time of so much sadness and anger, today I also feel a sense of hope.

Hope, not because we can undo the injustice that has been done, but because if we can bring together disabled citizens, people in the asylum system, refugees and allies into a movement of real solidarity, then we could fundamentally change the system.

We have a long way to go but at least we've started.

After working with Kamil, I started doing a PhD. This has involved interviewing people in the immigration sector and the disability movement, including several people in this room. I have listened to disabled people in the asylum system and refugees, people working in asylum support organisations

or Disabled People's Organisations, campaigners, legal representatives, Home Office and politicians.

Based on this work, I'm going to outline what I've learned about the injustice that disabled people in the asylum system are facing. Then I will talk about what I see as the causes. I will explain why I believe some current initiatives reinforce the core problem. And I'll tell you what I believe really needs to change.

Background

When I met Kamil in 2012, I was trying to find out about the needs of disabled people in the asylum system. My first hurdle was finding people. I contacted Disabled People's Organisations but found none that were aware of people in the asylum system among their members. I rang a major charity working with refugees and was told 'disabled asylum seekers ... don't really exist'.

I had been involved in the disability movement for many years. I was prepared for the everyday barriers and routine disregard for the needs of disabled people.

I'm the daughter of a refugee and grew up with stories of the trauma of losing one's home. I had been volunteering in the asylum sector for some time. I was prepared for the injustice and hostility of asylum policy.

I was not prepared for the casual denial of people's very existence, even within organisations designed to provide support.

It's important to be clear that the injustices Kamil experienced started long before the periods covered in the murder enquiries.

When I met Kamil, his asylum application had been refused. He drew a picture of what he wanted people to understand. He explained: 'This is my heart that has been stabbed with a dagger. The Home Office did this. I am bleeding and no-one can stop it'.

This was four years before Kamil was murdered. He was not predicting what he thought was going to happen, he was describing what he felt was *already* happening.

I am referring mostly to Kamil's experiences because I knew him, but there are many parallels with Bijan's experiences, although Bijan had more secure migration status and so, in theory, had greater rights.

There have been official enquiries into the circumstances leading to both murders. Of course, lessons should be learned from this time, but the harsh reality is that many of the ways in which Kamil was failed are neither unusual nor the result of oversights. The 'hostile environment' is designed to be hostile.

The suffering that Kamil had been through was not enough to persuade the Home Office that he deserved sanctuary. This is not unusual. That year, in 2017, 66% of asylum applications were initially refused.

Kamil's mental health conditions, including post-traumatic stress disorder made it difficult for him to remember and provide necessary evidence of the

minute details of his experiences. This is not unusual. Severe mental distress is common among people in the asylum system. And there are obvious barriers to gathering evidence, when a person has fled their home, often without packing a bag.

When I met Kamil, he had no secure place to live, no source of income, no knowing where, or when, he would get his next meal. This is not unusual. This is deliberate policy for refused people in the asylum system.

At a time like this, our anger and loss make us impatient for change. We should be angry, we should be impatient, but unless we think through what the problem really is, we risk putting all our energy into reducing some immediate symptoms of disadvantage for some individuals but leaving the causes untouched.

What is the problem?

When I listen to disabled people speak of their experiences in the asylum system, I wonder how we have come to a point where people can be treated so badly.

The denial of rights to people in the asylum system, whether disabled or not, is not new. Since the 1951 Convention on the Status of Refugees, there have been more than 20 acts of legislation in the United Kingdom, each reducing the rights of immigrants yet further. These laws combine with what appears to be widespread acceptance that some people deserve human rights, but others do not.

If our commitment to universal human rights is broken, it is an easy step for rights to be removed from ever more people.

Recent laws show how the denial of rights has been extended from one group to another.

In 1999, the Immigration and Asylum Act removed the rights of people in the asylum system to access mainstream benefits. There was no longer any acknowledgement of the costs of being disabled. People also lost the right to choose where to live and may be forced to move to areas of cheap housing, away from family, friends and networks of support.

There was no organised resistance from the disability movement.

In 2012, the Welfare Reform Act drastically cut support available to disabled citizens. It introduced the bedroom tax, forcing people to move to areas of cheap housing.

Together with wider cuts to services and support, this led a UN investigation to report the UK government's approach as 'grave and systematic violations of the rights' of disabled people.

There have been many protests. Yet even now, similarities with immigration policies more than a decade earlier are rarely mentioned.

Even in the disabled people's movement, different standards seem to be accepted for citizens compared with for people in the asylum system.

I suggest that the removal of rights from disabled citizens is the price we are paying for the lack of resistance when the rights of people in the asylum system were removed.

But today we're coming together to change that.

Before I carry on, I want to address a common myth.

Some people tell me the problems faced by disabled people in the asylum system come from the stigma of disability in their countries of origin.

Of course, there are places where disabled people are treated worse than in Britain, and places where people are treated better.

But ranking degrees of shame is an unhelpful distraction.

The key problem we need to deal with is in Britain, because that's where we are and because, although some aspects of the injustice faced by people in the asylum system are caused by oversight (which is bad enough), other aspects are caused by deliberate policy.

The asylum system itself is disabling.

Some people arrive in the United Kingdom as disabled people, but others become disabled when here. Disabled people in the asylum system often describe the system as psychological torture. If someone is tortured, then symptoms are inevitable. The despair one person felt led him to jump off a bridge. This caused physical impairment to compound the ongoing mental distress. Another person developed serious back problems after being made destitute and having to sleep on park benches.

Take a moment right now to imagine that that's your experience, or the experience of your son or daughter, your parent...

And if it *is* your experience, then, I'm really sorry.

And remember that destitution of refused people in the asylum system is not an oversight, it is deliberate government policy.

When Kamil was murdered, he was also being threatened with eviction from the hostel where he was living. According to Social Services, his mental health had improved, and he no longer needed support.

As disabled people – citizens or immigrants – know too well, if support is provided and barriers are removed then our conditions may improve; if support is removed, then conditions may deteriorate.

If Kamil had been evicted, he would have been street homeless with no income whatsoever. With the help of mental health services, legal support and friends, Kamil lobbied to get the eviction reversed. The decision was reversed – the morning *after* Kamil was murdered.

One of the big problems faced by disabled people in the asylum system is that it is often unclear how official decisions are made.

- Some people are provided with care, while others, with seemingly similar needs, are not.
- Some people get bus passes, others do not.
- Some people get refugee status, others do not.

Decisions sometimes appear based on arbitrary views of who is deserving and who is not. People in the asylum system fear speaking out against injustice in case it affects wider decisions.

So what action is already taking place?

I've said that I feel some hope today. I am also very critical of current approaches – by the Home Office and other institutions, but also by many wider campaigns. Perhaps doing something is better than doing nothing, but today is a chance for us to focus on what really needs to change. I suggest some action distracts us from the fundamental causes of the problem, sometimes even reinforcing divisions.

Safeguarding vulnerable people

In the Home Office and other institutions, there is increasing focus on the need to identify 'vulnerable' people, who are then eligible for 'safeguarding'. Of course, support should be provided to people in crisis. And, of course, this is better than ignoring people's existence. But if I could make one instant change to institutional responses, it would be to delete the word 'vulnerable' from the vocabulary.

Labelling disabled people as 'vulnerable' takes us back to before the disabled people's movement began. All humans are vulnerable. Disabled people have the same needs as anyone else. The issue is whether people face barriers getting those needs met. Any human subjected to Kamil or Bijan's experiences would have met similarly horrendous fates. They died not because they were more 'vulnerable' than anyone else, but because their needs and rights were not met. The people intent on killing them were not prevented from doing so.

Focusing on safeguarding 'vulnerable' people risks labelling the person as the problem, distracts from the barriers faced and reinforces ideas that some people are more deserving than others, which, I suggest, is the core of the problem.

Deserving and undeserving

The negative effect of labelling someone as undeserving may be obvious. But labelling certain people as particularly deserving also implies that others are not.

- If Syrian families selected for resettlement are particularly deserving, does that mean people in the asylum system are not?
- If the children of Calais are particularly deserving, does that mean single adult men are not?
- And if someone deserves support because they are labelled as 'vulnerable', does that mean that others do not?

Of course, sometimes we must use any means necessary to save the lives of those affected, but the basis of our campaigning must be about solidarity and equal rights, not anyone's exceptional status.

The issues faced by people in the asylum system also challenge wider campaigning goals

Inclusion

Sometimes it is assumed that the solution to the *exclusion* of disabled people must be *inclusion*. But inclusion in an oppressive system is no solution – we don't want ramps in detention centres, we want *rid* of detention centres. Or, as one disabled activist put it, campaigning for *inclusion* in the asylum system is like campaigning for British Sign Language interpreters at the gallows.

Counting people

I'm often told we need to know how many disabled people are in the asylum system. I ask why? And how? I've met many people who don't define themselves as disabled but who do experience barriers based on physical, psychological, or sensory impairments. Do we count people as disabled who say they are not? If the problem is the barriers, then why not focus on addressing the barriers? Surely, injustice is injustice however many people are affected.

More worrying is that assumed definitions of disability appear to be different for people in the asylum system than for citizens. People tell me that not many people in the asylum system are disabled, but then tell me it is normal for people in the asylum system to experience serious mental distress. It is not new, or radical, to include mental health in definitions of disability. And the idea that if something is 'normal' then it is not disabling, is particularly problematic.

What does need to be done?

If we accept that the problem is systemic then we need to change the system, not choose who is deserving within it, include people in it, or count people in it.

I'm not suggesting that reducing immediate suffering is unimportant, but focussing only on symptoms is like pulling drowning bodies out of a river without stopping the person throwing them in.

We can, and should, blame the government for many things – but until now the government has known that removing rights from people in the asylum system, and particularly disabled people in the asylum system, will not cause protests. That is our collective responsibility and that is in our power to change.

To conclude

The Home Office label people in Kamil's position as failed asylum seekers. Kamil did not fail. Kamil *was* failed, in the country in which he had hoped to find peace and safety.

But today, I also referred to hope.

Disabled people in the asylum system still experience systematic and inhumane denial of basic rights. The hostile environment is still designed to be hostile.

What has changed is that there is now wider awareness of the existence of disabled asylum seekers.

Small progress perhaps. But today there is determination among disabled citizens, people in the asylum system, refugees and allies, to work together.

If we had had a movement strong enough to resist the removal of rights from disabled people in the asylum system, then perhaps those policies would not have been extended to a wider population. Today, we must recognise that 'united we stand, divided we fall'.

At a time of such horrendous injustice, *that* is what gives me hope.

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This book stems from many years of research and activism. I am grateful to so many people for different forms of input. I thank my mother whose experiences of war and forced migration became her determination and commitment to challenge injustice in its many forms. This shaped my upbringing and continues to shape my perspectives.

I thank the many people who cannot be named but who, despite enduring acute injustice themselves, have contributed ideas, insights and energy to sharing their experiences and thinking about what needs to change. Many people also contributed to events bringing together people in the asylum system, the disabled people's movement and allies.

In particular, the insights and experiences of my friend Manjeet Kaur shaped my thinking on issues of disability and migration. She endured so much injustice and died far too young. I will be forever grateful for her friendship, including the many interesting and fun discussions.

I will never forget Kamil Ahmad who was murdered in July 2017. This was the last of an ongoing litany of injustices that he experienced. His relentless struggles against a disabling asylum system, never squashed his belief in justice. His ideas continue to shape my thinking, including his insistence that he would only be involved in research which is useful and respectful to those contributing.

The research on which this book is based would not have happened without academic input and support from many people. Specifically, I thank Aurelien Mondon for his solidarity, commitment and analysis which were core to getting through many gruelling times during my PhD research. This was combined with input from Naomi Millner, whose methodical questioning and attention were invaluable. The clarity of thinking and encouragement from Bridget Anderson was then essential to turning my research into this book. In addition, Willem Schinkel provided pertinent and thought provoking perspectives at the start and in the final stages of this work which significantly improved the end result.

In addition to those working in academic settings, my thinking has developed in collaboration with the perspectives, commitment and organising skills of many friends and activists in the disabled people's movement and beyond. I am so grateful to Ellen, Rhetta, Mike, Alison, Caroline, Sarah, Alex, Nito and so many others. You know who you are and I thank you all.

My most enduring thanks goes to all those people who believe in, and work for, a just and sustainable world. At the time of writing, it feels like our only hope is our solidarity.

Glossary of abbreviations

DPO	Disabled People's Organisation
NGO	Non-governmental organisation
NHS	National Health Service
UN	United Nations
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
UNCSR	United Nations Convention on the Status of Refugees, commonly known as the '1951 Refugee Convention'.
UNHCR	United Nations High Commission for Refugees
VPRS	Vulnerable Person's Relocation Scheme

Key terminology

Disability

I use the term 'Disabled people' as the preferred terminology of the Disabled people's movement in the United Kingdom (see, e.g., Reclaiming our Futures Alliance Reclaiming our Futures Alliance (ROFA), 2019). This includes people with physical, cognitive and sensory impairments, people with learning difficulties; people who are neuro-diverse; Deaf people, deafened, hard of hearing people, mental health system survivors/people who experience mental distress and people with long-term health conditions. Taking a social model perspective, it is argued that it is the economic, social, cultural, physical and attitudinal barriers operating in society that disable and exclude people with impairments. Therefore, people *are* Disabled, rather than *having* disabilities. This choice of language is not, however, to exaggerate distinctions from campaigners in other countries who use the term 'people with disabilities', which is also the terminology used in the UN Convention on the Rights of Persons with Disability.

Migration status

People with different forms of migration status are referenced in this study according to categories of legal entitlement, as outlined by the Refugee Council (2019).

Refugees

People seeking asylum get refugee status if they are judged to meet the definition in the United Nations Convention Relating to the Status of Refugees (1951):

A person who, owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it.

People with refugee status in the United Kingdom are given five years' leave to remain and are eligible to access the welfare state and health system during this time. After this period, they must apply again for indefinite leave to remain or return to their country of origin.

People in the asylum system

People seeking asylum in the United Kingdom have formally applied for protection under the 1951 Refugee Convention and are waiting for a decision. During this period, which may go on for years, people are subject to immigration controls, including possible detention for unlimited periods.

People selected for a resettlement scheme, such as the Homes for Ukraine or the earlier Vulnerable Person's Relocation Scheme (VPRS, 2014) do not need to claim asylum. Under the Illegal Migration Act (2023), people may be detained and potentially removed to a third country before even claiming asylum.

Refused asylum seekers

If a claim for asylum is refused, then people may lose entitlement to housing, financial support and secondary healthcare. They also become at greater risk of detention or deportation. If people are judged as unable to return to their country of origin, then they may be entitled to limited support under section 4 (2) of the Immigration and Asylum Act (Immigration and Asylum Act, 1999). However, people assessed as eligible for community care, under the Care Act (The Care Act, 2014), may maintain eligibility if to remove them would be a breach of human rights (No Recourse to Public Funds (NRPF) network).

People who are forced to flee their country of origin but do not seek asylum are commonly referred to as 'undocumented', 'irregular' or 'illegal' migrants. In this study, unless distinctions of entitlement are relevant, I make generic reference to immigration controls.

Introduction

‘It makes no sense’, lamented Nushi, a middle aged, disabled man repeatedly. His asylum claim had been refused. He waved his arms, moving with exasperated jolts as he described threats that he was about to be evicted and made street homeless. Speaking anonymously in a short film made for local councillors, he recalled the toll his previous period of homelessness had taken on his physical and mental health: ‘they push you to be crazy ... They want me to become dirty, nasty and crazy’ (Yeo and Spencer, 2018). When hearing this conversation, Francisco, an activist from the disabled people’s movement grimaced in despair. He was well aware of the ever-increasing restrictions and injustices imposed on disabled people in the United Kingdom in an era of austerity. He observed that removing entitlement to housing because a person’s mental health has improved is like ‘having a sight assessment with glasses on, being found to have good vision and losing entitlement to the glasses’. He repeated Nushi’s words: ‘it makes no sense’. Yet, as this book will show, such practices are not an irrational oversight, but the direct result of deliberate policy and practice.

Many examples of gross injustice associated with disability and immigration controls are discussed in this book. Sociologist, John Holloway (2002, p. 1) writes:

When we write or when we read, it is easy to forget that the beginning is not the word, but the scream. Faced with the mutilation of human lives by capitalism, the scream of sadness, a scream of horror, a scream of anger, a scream of refusal.

He goes on to complain that ‘there is no room for the scream in academic discourse’ (2002, p. 3), nonetheless, the ‘scream’ is central to this book. The knowledge and insights that stem from lived experiences of disability and immigration controls have a central place in developing solutions to injustice. Nobody has better understanding of the need for change than those who experience the impact. This book therefore focuses primarily on the experiences of disabled people in the UK asylum system. The purpose is not to ‘prove’ or quantify the existence of injustice, but to contribute to

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2 Introduction

understanding the causes of current injustice, to enable greater solidarity, and more effective resistance targeted at developing more just ways of organising society. Before continuing, it is important to set out the contested meanings of disability, immigration, and their intersection. As detailed in the glossary, the book adopts the definition of disability from the UK disabled people's movement. This includes people with physical, cognitive, sensory impairments, Deaf people, people with learning difficulties, mental distress or chronic health conditions. It should be noted that not everyone with an impairment identifies as disabled. While 'non-disability' is presented 'as a proper way of being-in-the-world' (Hughes, 2019, p. 842) disability may be associated with stigma (Hunt, 1966). Therefore, as sociologists Tom Shakespeare and Nick Watson (2001, p. 20) argue, many people 'downplay the significance of their impairments', with the quest to access a 'mainstream identity'. For people with the precarity of insecure immigration status, there may be extra reluctance to adopt an additional label perceived as stigmatising. An individual's choice of identity may shape how they understand their situation, the options open to them and the alliances they seek. Without questioning the legitimacy of anyone's chosen identity, it is misleading to imagine that avoiding a label might result in avoiding the impact of restrictions that reduce access to necessary services and support. The focus of this book is on the impact of restrictions rather than the individual impairments, whether these developed before, or after, arrival in the UK.

There are different legal categories applied to people who arrive in the United Kingdom having fled violence, persecution or other oppressions in their country of origin: including 'asylum seeker', 'refused asylum seeker', 'humanitarian protection' and 'refugee'. Different legal categories are associated with different forms of 'state regulated relations of governance and difference' (Walia, 2021, p. 2). It is important to stress that legal distinctions of migration status and entitlement to support are not determined by need. As barrister Jon Holbrook explains:

The man fleeing a war-torn country is a lawful migrant; the man fleeing grinding poverty isn't. The lesbian fleeing a homophobic state is a lawful migrant; the woman fleeing in search of the medicine that would save her life isn't. (Holbrook, 2016, online)

Beyond legal categories, there is some controversy as to the best ways to refer to migration status. Vickers (2012, p. 1) uses the term 'refugee', 'to encompass all those who have come to Britain seeking refuge, whatever the status currently accorded them by the British state'. This is agreed in principle, but to avoid reference to distinctions would not remove differences in entitlement and the barriers that are faced. This book focuses primarily on the experiences of people in the asylum system, including people whose

asylum claim has been refused. People in this situation are often described as ‘asylum seekers’, a term that entered the Oxford English Dictionary in 2001, to distinguish between those awaiting a legal decision and those granted humanitarian protection or refugee status. At the time of writing, people in the asylum system were among those at the sharp end of immigration controls, however, the legal category of asylum may be becoming increasingly defunct. The Illegal Migration Act (2023) introduces increased threat to detain and remove people from the United Kingdom before claiming asylum. Ever greater restrictions may cause greater numbers of people to seek to live clandestinely, which also entails avoiding health and social care services. The restrictions of the asylum system already reduce people’s lives to struggles for immediate survival. The new restrictions will intensify these struggles, particularly for people with existing impairments. In this context, it may appear outdated to focus on the experiences of people in the asylum system. There are undoubtedly huge differences in the levels of injustice faced by people with different forms of migration status, just as there are between people with different impairments. The levels of injustice are also exacerbated by inequalities between and within nation-states. But to focus on this would distract from the structural inequalities that prevent people from meeting their needs whatever their impairment or migration status. This book calls for a collaborative approach, with action focused on the causes, rather than categorising levels of injustice.

It is essential to recognise that there is little reference to disability in the asylum or wider immigration system. Euphemistic labels, such as being ‘vulnerable’ (Home Office, 2014; Shaw, 2016; Shaw, 2018; Home Office, 2019; Home Office, 2021), ‘at risk’ (Home Office, 2021; Neal, 2021; Neal, 2022) or facing ‘exceptional’ circumstances (Immigration and Asylum Act, 1999), are more commonly used. Such labels do not refer exclusively to disabled people, but more broadly to exceptions to the assumed normality of young, healthy, adult men. There is greater discussion of mental distress in relation to the asylum and immigration system (see, e.g., Bhui et al., 2003; Turner et al., 2003; Warfa et al., 2006; Lawlor, Sher and Stateva, 2015; Giuntella et al., 2018; Maloney, Nelki and Summers, 2022). This is widely presented as if distinct from disability (Yeo, 2015b), yet, it is not new, or radical, to include mental health in understandings of disability. The UK Disability Discrimination Act (1995) defines disability as a ‘physical or *mental* impairment’. The UN Convention on the Rights of Persons with Disabilities (UNCRPD, 2006) includes those with ‘physical, *mental*, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others’. Given the prevalence of mental distress among people seeking asylum, its exclusion from ideas of disability reinforces perceptions of disability as a minority concern in the asylum and immigration system.

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Addressing a disabling system

If people are prevented from accessing the services and support necessary to meet human needs, the result is to create new impairments as well as to further disable people with existing impairments. The disabling impact of restrictions is not dependent on migration status or impairment. Lessons from the disabled people's movement, particularly the social model of disability, might therefore be usefully adapted and extended to improve understanding, focus resistance and contribute to building greater solidarity with people in the asylum and immigration system.

Social model

The social model of disability was developed by disabled people to explain and resist injustice and inequalities. The original conception of the social model builds on the insights of the Union of the Physically Impaired Against Segregation (UPIAS, 1976, p. 4) that people with impairments are 'unnecessarily isolated and excluded' by the ways in which society is organised. This approach was developed and promoted by disabled sociologist and activist Michael Oliver (1981) among others. They challenged conceptions that disability is an individual tragedy to be solved by charitable relief ('the charity model'), or by individual change ('the medical or individual model') and called for collective responsibility to remove systemic restrictions and inequalities. The social model does not deny that many impairments are inherently unpleasant, restrictive and painful, or that many disabled people rely on high levels of medical intervention. Former anti-apartheid activist and leading member of the UPIAS, Vic Finkelstein (2001) wrote that: 'although it may be a tragedy to have an impairment, it is oppression that characterises the way our society is organised'.

Restrictions and inequalities which prevent people from meeting human needs are therefore understood as disabling.

Effective resistance to the oppression experienced by disabled people requires analysis of the causes of injustice. The social model was originally explicitly anti-capitalist, arguing that the inequalities faced by disabled people are intrinsic to the prioritisation of profit. In capitalist societies, the needs of economically productive, non-disabled individuals are prioritised and assumed to be 'normal' (Oliver and Barnes, 2012, p. 88). However, since the original conception of the social model, it has been revised, co-opted and distorted in many different ways, most obviously to remove the capitalist critique and instead to focus on more effective inclusion of disabled people in the capitalist economy. This book argues that the original, or what Finkelstein (2001) refers to as the 'radical social model', can be extended and applied to promote wider change to 'the way society is constructed', particularly regarding the restrictions and inequalities faced by people in the asylum system.

The deliberate restrictions of asylum and immigration controls

The restrictions imposed on people subject to asylum controls are overtly designed to create hardship and to blame people seeking sanctuary for wider societal struggles. In 2012, then home secretary, Theresa May, encapsulated the purpose of restrictions with her stated goal to build a sufficiently 'hostile environment' (Kirkup, 2012) to deter 'illegal migrants' from coming to the United Kingdom and to encourage people already in the country, to leave. This goal encompassed wide-ranging new restrictions on people's entitlements to services and support, including housing, employment, banking and travel. The terminology may have changed since then, but subsequent governments have only increased expressions of hostility and the restrictions imposed on people migrating to the United Kingdom. The Vote Leave campaign of the Brexit referendum explicitly promoted fear of migration, with a poster entitled 'breaking point' showing a long queue of refugees. The poster was reported to the police for inciting racial hatred (Stewart and Mason, 2016). Nonetheless, xenophobia continued to form a major part of the campaign to leave the European Union. In 2023, the UK government prioritised new measures to 'stop the boats' (Sunak, 2023) of people seeking to reach the United Kingdom. Ever-increasing hostility is used, including detention and threats to send people to Rwanda before an asylum claim has been registered.

This is not the first study of disability and migration in the United Kingdom. Some focus has been given to the experiences of disabled EU migrants in the post-Brexit context (Duda-Mikulín and Głowacka, 2023). Valuable as this work is, these experiences are of a different magnitude from the struggles for basic survival that are systematically imposed on people in the asylum system. There is a somewhat larger body of work focussed on experiences of disability in the context of asylum restrictions. A seminal study by Jennifer Harris and Keri Roberts (2001) brought academic attention to the existence and injustices faced by disabled people seeking asylum. This was followed by research focussed on different elements of the injustices experienced (Ward, Amas and Lagnado, 2008; Yeo, 2015a; 2017; Burns, 2017). There are frequent references to the need for statistics to address the lack of existing knowledge regarding disability and migration (Crock, Ernst and Ao, 2012; Burns, 2017). The need for statistical data assumes that the numbers of people affected shapes the nature of the problem or the solution. In contrast, this book argues that the problem is not the number of people but the disabling impact of immigration restrictions. Clara Straimer (2011, p. 538) argues that the invisibility of disabled people in the asylum system is 'due to the discrimination' people face. This invisibility may have changed somewhat during the past decade, with several initiatives that acknowledge people's existence, albeit with the use of euphemisms that avoid reference to disability. However, the disabling impact of immigration restrictions has only increased.

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Analysis in this book shows how restrictions imposed in asylum and immigration policy are gradually extended to the wider population of disabled people. Once it becomes acceptable to remove essential support from certain people in certain circumstances, then similar policies are easily extended to other sectors of the population. A social model approach to asylum could promote similar exchange of insights and experiences to build more effective resistance. Given that current inequalities are socially constructed, the issue is not *whether* change is possible but *how* it can be achieved. Borrowing from the rallying cry of the World Social Forum of activists building alternatives to hegemonic neoliberalism in the early years of the 21st century, current injustices are not inevitable: ‘another world is possible’. This book argues that the insights and experiences of the disabled people’s movement could help build solidarity and resistance in order to create a society in which services and support are provided on the basis of need and common humanity.

Contingency

The ways in which the current situation is understood shape perceptions of possibility. Political theorist Carol Bacchi (2009) argues that the way a problem is represented shapes the solutions and collaborations that appear appropriate. If the struggles experienced by disabled people in the asylum system are framed as if stemming from individual ‘vulnerability’, then it may appear as if nobody is at fault, and that any efforts to identify individuals are better than none. In contrast, if the problem is understood to be the disabling impact of preventing people from accessing support, then it is the restrictions which need to change. This book is focussed on bringing together insights from people in the asylum system and the disabled people’s movement, to develop more effective resistance and alternatives to current inequalities.

The Italian philosopher Antonio Gramsci (1971) argues that, without intervention, the interests of the ruling class become ‘hegemonic’, shaping ‘common-sense’ perceptions of the existing social order and possibilities for change. The power of hegemony lies not only in promoting the values of the ruling class as if they were common-sense but, as Ralph Miliband (1994, p. 11) asserts, also contesting the idea that ‘there is no alternative’. According to him, ‘Hegemony depends not so much on consent as on resignation’. The distinction between consent and resignation may be blurred when current inequalities are framed as if inevitable. In the context of contemporary capitalism, the prioritisation of profit is hegemonically framed as if inevitable. Those who contribute to that goal are those who are valued and considered successful. If people are valued according to their economic contribution, then the overlapping populations of people with impairments which limit economic productivity (Russell and Malhotra, 2002; Oliver and Barnes, 2012; Clifford, 2020) and people who travel in search of sanctuary, rather than with significant

financial investment (Vickers, 2012; Walia, 2021), will always be framed as a burden or the intrinsically problematic ‘other’.

When the capitalist basis of society is hegemonically framed as if so normal as to be unquestioned, then the access barriers experienced by disabled people become assumed to result from an individual’s ‘special needs’, rather than from ableist structures (Campbell, 2012) or the prioritisation of profit. It also becomes assumed that the free movement of capital is to be valued whereas the free movement of people, must be restricted. The prioritisation of the needs of economically productive, non-disabled people and the restrictions imposed as part of immigration controls are the result of what Mouffe (2007, p. 2) refers to as ‘sedimented hegemonic practices’. If people are to be valued for their common humanity, rather than for their economic contribution, then alternatives are needed.

It is essential to understand the contingency (Laclau and Mouffe, 1985) of the social order if effective change is to be achieved. This book draws on the distinction, made by French philosopher Jacques Rancière (1999, p. 123), between what he refers to as ‘policing’ and a ‘moment of politics’. Initiatives that adjust or improve the efficiency of policy implementation are a means of ‘policing’ which uphold the power relations of the social order. In contrast, when current inequalities are disrupted by ‘the part of those who have no part’ (ibid.) this creates ‘a moment of politics’ in the quest for equality. Awareness of these distinctions and the contingency of any social order can help focus on the scope for change. As Mouffe also explains: ‘Things could always be otherwise and therefore every order is predicated on the exclusion of other possibilities’ (2005, p. 17).

When one way of framing a problem and possible responses becomes hegemonic, it indicates that alternatives are marginalised, not that they do not exist. This book therefore explores how current injustice has developed and how the analysis of frequently separated movements for justice might be brought together to develop more effective forms of resistance.

Background and motivation

This book is grounded in and motivated by what I have learned from disabled people subject to asylum controls in the United Kingdom. My perspective is also shaped by almost 30 years involvement in the disabled people’s movement. In addition, I am the daughter of a refugee and grew up with stories of the associated struggles, injustices and need for resistance. I began voluntary work in a national charity in the UK asylum sector shortly after the enactment of the New Labour government’s Immigration and Asylum Act (1999). Having already been involved in the disabled people’s movement for several years, I was shocked at the lack of awareness or consideration of the needs of Deaf and disabled people within the asylum sector. Meetings were held in upstairs rooms without apparent thought to the resultant barriers for people with mobility impairments. The new legislation removed the right of

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people in the asylum system to access the welfare state or to choose where to live. Both these new restrictions impact disproportionately on the lives of disabled people. There would no longer be any financial acknowledgement of the added costs associated with being disabled. In addition, forcing people to move away from friends, relatives and networks of support can be detrimental to anyone, but particularly for people who rely on others to navigate access barriers. I was further struck by the low expectations of the charity in which I was volunteering. My role included playing with children, while their parents were told that they would be forcibly dispersed to another part of the country. Despite the known disruptive impact, children would be taken from their schools and friendship groups. The objective of the charity's work appeared to be to support people to navigate the system and to maximise potential for individuals to be framed as an exception. When I questioned the justification for this work, I was told that it was better that this role was carried out by the charity rather than a security company. There was little if any focus on resisting the policies or contesting the assumption that *some* humans are unworthy of support. The charity relied on funding to implement, not resist this government policy.

The gulf between the disabled people's movement and people in the asylum system motivated my work to include disabled people seeking asylum in a research project with UK Disabled People's Council. The research investigated the needs and priorities of disabled people living in a wide range of different circumstances in the United Kingdom. Drawing particularly on the use of art for political mobilisation and education in Latin America, I worked with artist Andrew Bolton, using painted murals to convey people's key messages (Yeo and Bolton, 2013). This proved to be a powerful means of bringing people together, discussing individual and collective experiences, enabling people to use the art to claim a public space, as well as to raise wider awareness of the lives of marginalised people within a community.

The insights from people involved in this project and the routine injustices that they experienced became the motivation for my doctoral research in which I learned from the perspectives of disabled people in the asylum system, activists, staff of asylum voluntary sector organisations and Disabled People's Organisations, legal representatives, Home Office staff and politicians. More recently, I worked with the overlapping population of people who are Deaf, Disabled, and in the asylum system, to convey people's messages through another painted mural led by artist Andrew Bolton, this time in the context of the COVID-19 pandemic (Yeo, 2022). I also worked with others to organise several public events, bringing together the disabled people's movement, the immigration sector, academics, local authority employees and others. Some people contributed to my research in the form of a relatively short interview, others were more heavily involved in organising and contributing to public events or the creation of the painted murals. Sometimes I refer to what I learned from people during informal discussions as well as the more formal interview context. Therefore, some people are cited

significantly more often than others. Particularly in the context of the Illegal Migration Act (2023), it may be considered a limitation that contributors to this book are largely people in the asylum system. However, the key arguments can be extended beyond asylum to the impact of broader immigration controls.

Anonymity is important for the safety of many of the contributors to this book. In the interests of their safety and fairness, I have adopted pseudonyms for everyone who is cited, apart from citations from people who chose to speak in public meetings. There is no perfect solution to this issue, but I have chosen to adopt names from the list of most popular first names (<https://forebears.io/earth/forenames>). The names chosen are not necessarily from the same part of the world as the person cited.

Outline of book

The book is made up of six chapters each interspersed with an image from painted murals which brought the key messages of disabled people to public spaces (Yeo and Bolton, 2013; Yeo, 2022). The intention is that recommendations for action are grounded in the knowledge and urgency for change that stems from those with lived experience of the impact of the current system.

Chapter 1: Struggles for survival and resistance

The book starts with the experiences of disabled people subject to asylum controls in the United Kingdom. The purpose is not to catalogue, quantify or prove the existence of injustice. To prove the hostile impact of the ‘hostile environment’ simply proves that the policy goal has been achieved. Instead, the insights that stem from lived experience are provided to ground the book in the knowledge of the disabling impact of current restrictions. The physical and emotional impact of restrictions is explored, considering access to food, housing, social care and health care. When people are prevented from accessing essential services and support the result is to further disable people with existing impairments and to create new impairments, most notably mental distress. In this situation, people turn to different sources of support, sometimes from people from the same countries of origin or from voluntary organisations. The solidarity and resistance provided by people experiencing similar injustice and their allies is essential to survival. Without denying the pain and discomfort inherent in many impairments or the traumatic circumstances which cause people to flee their homes, this book focuses on the injustice that is socially and politically created, and therefore changeable.

Chapter 2: From universal rights to individual responsibility

To understand the roots of current injustice, one has to understand how it has developed. Analysis starts with brief consideration of the post-Second World War era of national and international efforts to avert

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future conflict. In the United Kingdom, the establishment of the welfare state and the NHS adopted rhetoric of universal rights. The inequalities and exceptions in these initiatives have been gradually exacerbated particularly in relation to disability and migration policy. The Immigration and Asylum Act (1999) removed access to the welfare state from people subject to immigration controls. The needs and costs of being disabled would no longer be acknowledged if a person was claiming asylum. The same year, then Prime Minister Tony Blair set out his vision for welfare reform. Without reference to the restrictions imposed on people in the asylum system, his call to break with Bevan's notions of universal provision introduced similar conditions on access to support. Before his vision could be implemented, there was a need to shift from hegemonic assumptions of collective responsibility. The exceptions to universal rights, the promotion of individual responsibility and the justification for the reduction of state services became core to the restrictions that would follow.

Chapter 3: Austerity, the hostile environment and individual blame

This chapter explores how calls for individual responsibility led to a focus on individual blame. The era of austerity following the financial crisis of 2008. Welfare Reforms (2009, 2012) bear similarities to both Blair's vision presented in his Beveridge lecture and the restrictions imposed on people in the asylum system in 1999. The UN Committee on the Rights of Disabled People (2016) reported that the extent of cuts to services and support amounted to 'grave and systematic violations of the rights' of disabled people. Meanwhile, the restrictions imposed on people seeking asylum markedly increased with Home Secretary Theresa May's explicit goals to create a 'hostile environment' (2012). Expressions of hostility have, however, always been complemented with expressions of compassion towards people considered to be deserving. This distinction is explored, arguing that compassion towards some, reinforces the apparent legitimacy of hostility towards others. Therefore, the two apparently distinct approaches are complementary. The restrictions imposed on the wider population of disabled people also continue to increase, with conditionality of access to the welfare state causing many lives to be lost, such as to prompt journalist Frances Ryan (2018) to refer to disabled people as also living in a 'hostile environment'.

Chapter 4: Implementing or resisting government policy

This chapter explores different roles in the implementation, reform or resistance to asylum and immigration policy. Restrictions are deliberately imposed as part of asylum and immigration policy as well as welfare reforms, but the implementation of these restrictions cannot be attributed entirely to malicious intent. There is an increasingly blurred distinction between those who provide support and those who implement restrictions, with the outsourcing of government responsibilities. Essential, often lifesaving, support

is provided by many voluntary sector organisations, legal representatives, informal solidarity and local community initiatives. Organisations seeking to provide immediate relief may adopt the language of the Home Office and focus on the apparently pragmatic and technical task of identifying people with attributes associated with entitlement to support. It is perhaps indicative of a perceived association between power and knowledge if awareness of intersectional injustice results in reinforcing Home Office distinctions of entitlement, rather than seeking to build solidarity and learn from the insights of wider movements of people with lived experience. It is stressed that there may be different elements of anybody's contributions and that distinctions between people in different sectors are not, and never have been, absolute.

Chapter 5: Failure to learn from the disabled people's movement

The achievements and basic tenets of the disabled people's movement are rarely applied to the asylum system. The result is to reinvent the meaning of disability and to frame the context of asylum as if distinct from elsewhere. Assumptions that mental distress is normal for people seeking asylum are used to reinforce notions that disability is an insignificant minority concern. This chapter particularly focuses on three forms of initiatives which risk undermining the achievements and struggles of the disabled people's movement:

- a attempts to improve access to social care without building on existing achievements, such as the UNCRPD.
- b the promotion of integration as a solution to societal divisions despite the disabled people's movement successful rejection of this agenda last century.
- c campaigns that promote the 'right to work' without considering the lives being lost through welfare reforms that oblige disabled people to find paid work irrespective of the barriers.

It is argued that bringing together the insights and experiences of the disabled people's movement, people subject to asylum controls and allies of both sectors could help create a broad-based movement of solidarity. If alternative ways of organising society are sought, then new collaborative approaches are required.

Chapter 6: Extending the social model to build collective resistance

This chapter explores how the social model of disability could help focus collaborative resistance to injustices imposed on people in the asylum and immigration system. Three core elements of this approach are considered:

- a Addressing access needs is essential but insufficient.
- b All humans are innately vulnerable.
- c Human worth is not dependent on contribution to a capitalist economy.

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Attention must be paid to the ways that the social model has been widely co-opted and distorted to focus exclusively on removing access barriers. A social model approach would not remove the impact of trauma and loss but would focus resistance on the inequalities in the way that society is organised and seek to build a system in which entitlement to services is based on need. The value of knowledge and insights developed through lived experience is explored, but when people are struggling for survival the solidarity of allies is essential. All individuals and organisations have limited capacity. A core function of the social model would be to create a movement of solidarity in which roles can be shared according to skills and capacity, enabling people to contribute when and how they are able, without exacerbating the precarity of people's struggles.

Concluding comments: Building a movement for justice

Transformations in understanding of disability over recent decades show the possibility of change in both progressive and regressive directions. The disabling impact of the asylum system cannot be addressed by identifying exceptions considered worthy of compassion. In both sectors and their intersection, people are framed as if a burden on the wider population. Many lives have already been lost as a consequence of the removal of safe routes for people to enter the United Kingdom and the increasing restrictions on arrival. Meanwhile, welfare reforms have also cost lives. Policies that are deliberately designed to deprive people of essential needs, to cause lives to be lost and to stoke hatred among the wider population are beyond the situation when the social model was originally designed. Such policies are also beyond the needs of capitalism, they are, however, essential to the rise of fascism. The scale of change that is needed may appear too ambitious, but as Clifford (2020, p. 300) writes: 'We have no choice. The stakes have become too high'.

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Figure 1 Mural created in Bristol 2012, conveying key messages from disabled people in the UK asylum system.

1 Struggles for survival and resistance

Over the last decade, I got to know several disabled people in the asylum system who are no longer with us. Among the people who have lost their lives, Kamil Ahmad was murdered after repeatedly, but unsuccessfully, seeking police protection (Yeo, 2017). Some elements of the injustices he faced are described in the preface to this book. Manjeet Kaur (Yeo, 2020) died of cancer after years of struggling to meet daily needs in the face of asylum restrictions. The precarity caused by the restrictions imposed on people in the asylum system limits capacity to lead healthy lives, seek timely medical support or find safe housing. The struggles that people face are life-limiting even when not fatal. It is often hard to know for certain what has happened to people. Luis, a blind person, was deported away from family and support network to a country he left as a child. Adam has not been traced after he was excluded from multiple support organisations for disruptive behaviour related to his mental distress. The lives that have been lost cannot be brought back but this book seeks to find ways to develop more effective resistance to the ongoing injustice.

This chapter explores lived experiences and responses to the restrictions faced by people in the asylum system. People who experience intersectional restrictions express levels of despair or exasperation which are distinct from the responses of people with other roles and responsibilities quoted in this book.

The restrictions imposed on people subject to asylum controls

Support provided to people claiming asylum was separated from mainstream welfare support under the Immigration and Asylum Act (1999). From then on, the minimum needs of people seeking asylum were officially presented as if lower than those of other people. According to UK Visas and Immigration (UKVI, 2020), people with active asylum claims are usually provided with sufficient money to help pay for things ‘like food, clothing and toiletries’. If people’s accommodation provides meals, then support is reduced. There is no additional support provided to cover costs associated with disability. For

many people in the asylum system, life becomes reduced to struggles for immediate survival.

Everyone claiming asylum faces restrictions but people who are disabled may be particularly affected by the deliberately imposed additional barriers. According to Nesrine Malik (2018), who has experience of punitive immigration controls, the system is based on ‘arbitrary cruelty’, with an ‘ever-shifting obstacle course with hidden trapdoors’. The impact of these obstacles and trapdoors prevents people from meeting essential needs, disabling people with existing impairments and creating new impairments, particularly causing mental distress.

Food

It is widely recognised that healthy food is essential for well-being and to resist disease. In contrast to ‘healthy eating’ drives like that promoted by celebrity chef Jamie Oliver, people in the asylum system are routinely provided with little more than the essential calories for survival. According to Ana, a middle-aged woman with reduced mobility, in an initial accommodation centre, ‘the food is only one diet. Chips, chips, chips and ... it’s only chips and this bread that you eat’. Lack of access to healthy food continues beyond initial accommodation. The support provided to people in the asylum system is insufficient for people to meet public health recommendations. Irina, a highly educated, wheelchair user in the asylum system, explained how fresh food is rarely an option:

eating healthy is something for people who are already settled in their lives ... for £2 that I would buy strawberries I know it’s healthy but if I buy bread or if I buy biscuits that will make me fuller for longer.

The issue is not simply financial. She recalls a local organisation seeking to support healthy eating by providing volunteers with fresh fruit rather than cheaper biscuits. For Irina, however, food choices stem from immediate needs for energy and satisfaction, rather than health and future well-being. Diet may be particularly significant for people with existing health conditions.

Not everyone is entitled to even the minimal support. People whose asylum claims are refused or who avoid official migration routes may receive nothing. As one person in this circumstance explained:

people are suffering, they are really suffering ... they are on the streets, begging, doing things they shouldn’t ... because there is no other way. People are eating from dustbin, picking food from dustbin, eating it. (Yeo and Bolton, 2013, p. 71)

Housing

Homelessness may be framed as the result of policy failures in the wider population, however, for people whose asylum claim is refused, destitution is

a tool of overt policy, designed to punish people for being in the country (Crawley, Hemmings and Price, 2011). In this context, expectations become so low that any form of accommodation becomes framed as better than nothing, with access considerations framed as beyond reasonable expectations. Ana recalls her social worker explaining that the inaccessible bathroom cannot be changed:

due to my status of asylum seeker ... The only thing they can do, they can help me with that walking frame and like that seat ... If I get the status, I can go back to them.

Inaccessible accommodation does not only affect people in the asylum system (Ahmed, 2013). An EHRC (2018) report on housing for the wider population of disabled people, found people waiting over two years for accessible accommodation. Barriers accessing local authority housing and social care are exacerbated by lack of stability in the location of people in the asylum system. Irina, spent months negotiating with one local authority to find accessible housing only to be told she would be dispersed to a different area.

People whose asylum claims are successful may be entitled to bring family members to join them in the United Kingdom, but asylum claims often take years to be resolved and even if successful, bringing family members relies on having sufficient income to fund the costs. Family reunion does not entitle people to larger accommodation. Mohammed and Joseph are from different countries but are now in similar situations in the United Kingdom. They have both come through the asylum system and got refugee status which entitles them to family reunion if they have the funds to support their children. They both described having to choose which of their children would join them in their one-bedroom apartments and decided to bring their disabled child who was least able to live without parental support. The two different families now experience similar problems with the lack of space for their now adult disabled son and daughter. Joseph's daughter cannot be left alone and cannot leave their flat. Without support to resolve these struggles, he describes feeling like a candle, burning to give light to others, while being destroyed until there will be nothing left.

Social care

Some restrictions in the asylum system affect everyone but may have most severe impact on people who are already disabled. Access to social care specifically impacts disabled people. The wider policy context of social care provision will be discussed further in Chapter 5.

As clarified by the No Recourse to Public Funds (NRPF) network guidance (2023) anyone with the 'appearance of care needs' is entitled to request a care assessment, regardless of immigration status:

A formal diagnosis of a medical condition is not required to demonstrate that a person has an appearance of need. A person who has been subjected to domestic abuse, trafficking, or modern slavery may experience health or mental health problems that have not been diagnosed, so in many cases medical evidence may not be readily available. (2023, p. 50)

Nonetheless, people in the asylum system describe long struggles to get access to an assessment and to receive care services. The barriers to receiving either an assessment or subsequent care resulted in lobbying from the asylum voluntary sector for specific Home Office guidance (2018). This confirms that people seeking asylum are ineligible if their social care needs have arisen solely because of the impact of destitution (The Care Act, 2014, paragraph 2). Furthermore, if a person's asylum claim has been refused, then they are ineligible for care, unless an assessment indicates that this would breach Human Rights (Nationality Immigration and Asylum Act, 2002, schedule 3). Irrespective of legal rights, capacity to access social care appears to depend in large part on people's capacity, or access to support, to assert these rights.

The Care Act (2014) stipulates that if someone has 'substantial difficulty' in a social care assessment and nobody independent from care services is willing and able to support them, then local authorities have a legal duty to engage independent advocacy services. Alongside difficulties associated with an impairment or health related issue, people who have recently arrived in the United Kingdom are likely to need an advocate to support understanding of the assessment process, awareness of rights and how to challenge decisions. An independent advocate must work alongside and learn from people in the asylum system, disabled people, refugee rights groups, human rights organisations and social work unions. The first legal challenge under The Care Act (2014) was won on behalf of a person who had not been provided with advocacy ((SG) *by her litigation friend the Official Solicitor v London Borough of Haringey*, 2015). The defendant explained that advocacy services had been unavailable to them in the asylum system. The judge ruled that the local authority has a duty to provide independent advocacy. The care assessment was therefore quashed and had to be repeated.

Sometimes it is unclear whether the barriers imposed on people in the asylum system when seeking access to social care are the result of malice or confusion on the part of social workers. Irina recalled being told by one local authority that her migration status meant that she was ineligible for help until her asylum claim was resolved and that if she needed help, she should contact the embassy of her country of origin. This advice is clearly entirely inappropriate. If people lack sufficient knowledge or advocacy support, such breaches of people's rights remain uncontested.

Healthcare

For disabled people in the asylum system, the impact of restricted access to healthcare can be particularly punitive (Bhatia and Wallace, 2007;

Stevens, 2010). Ana recalls being in hospital waiting for surgery: ‘they gave me gown, they gave me stockings ... when I was almost to go to theatre, there was a lady who came and say she want to see my papers’.

She was informed that her asylum claim had been refused. As stipulated by the Immigration Act (2016) her eligibility for secondary healthcare was therefore removed. According to Ana, the doctor ‘came out and he said there’s something that is going wrong somewhere, but he doesn’t care. He will do the operation if there is time’.

This attempt to overcome the punitive impact of the system with an individual act of decency was unsuccessful. He was obliged to prioritise other patients, ran out of time, and the operation was cancelled. Medical professionals, trained to treat illness, have become implementers of immigration policy. Without this operation, Ana was unable to walk to a food bank or an asylum support organisation and became entirely reliant on the kindness of friends.

Lack of medical intervention may cause impairments, exacerbate existing conditions, and is inherently disabling. Robert is a young man with haemophilia, a blood condition which requires regular medication to prevent uncontrolled bleeding. He was detained on arrival in Britain and was denied medication. After he became weak from several days of bleeding, he was transferred to hospital in chains. Intervention from the Haemophilia Association was needed to persuade immigration authorities to remove the chains. However, his asylum claim was refused, therefore he was only eligible for emergency treatment of uncontrolled bleeding, rather than medication to prevent bleeding occurring. He is billed for the medication on which his life may depend. Without income, the bills are unpayable, and he becomes dependent on voluntary sector advocates to contest the mounting debt.

Detention

Robert is not alone in facing particularly disabling restrictions while detained. In principle, the purpose of ‘immigration removal centres’ is, as the official name suggests, to facilitate removal from the United Kingdom. However, the more commonly used name ‘detention centres’ highlights the punitive impact of incarceration which is common to both immigration detention and to prisons. Nonetheless, there are distinctions. Those advocating for the abolition of prisons (see, e.g., Loach and Becker, 2019; Kaba 2021) argue that incarcerating people neither addresses the causes of crime nor achieves rehabilitation. But when detaining people in immigration removal centres, there is no semblance of a rehabilitation agenda. The purpose is not so much to punish detainees for having *done* something, but for *being* in the United Kingdom. This more existential objective may explain why, according to Luis (a blind man, with experience of both), detention is more punitive. He explains: ‘in prison there’s a lot of order ... there is a

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protocol which most people follow ... you know that you're gonna be released on this day, so you don't wanna mess it up'.

In immigration removal centres there is no known date for release and no associated motivation for 'good behaviour'. There is only anger and fear. As Luis continued: 'people don't want to be deported ... it's a very volatile environment'. In his perception, detention staff 'don't care about what you do, as long as you don't escape'. In prison, he recalls efforts to address his access needs, but in detention, he relied on other detainees to help him with daily needs. Such reliance on discretionary acts of kindness is inherently precarious and unequal.

The punitive impact of detention was perceived by Luis as irrational. He recalled being taken from detention to a medical appointment:

you'll be in handcuffs ... they've got a longer chain ... one of the sides of the chain is on you, one is on the officer, one of the officers. And for someone like me, really, I was relying on them to get to wherever I was going ... There was no way that I would escape from them when I'm ... relying on them.

The use of chains is symbolic of the disregard for an individual's well-being, but the impotence experienced by Luis is real and systemic. Like the physical display of power at border crossings (Andersson, 2014), chains emphasise the power differential, overtly asserting control over each individual.

In the detention system, the combination of punitive and irrational approaches compounds people's sense of powerlessness. Having informed staff of a medical appointment to investigate his failing vision, Luis recalled a Kafkaesque explanation as to why he could not attend:

the officers told me, 'Because we knew about the appointment date ... you might have some people attack us on the way to hospital'. I said, 'Ok, if it was like that, then why didn't you change it? ... I had to tell you about the appointment so that you would know and organise people to take me there. So, if I didn't tell you, you were going to say, "you're not going because you didn't tell us"'.¹

When he was released from detention, Luis was taken by taxi to accommodation in a city where he knew no one. He was left on a street corner: 'I had stayed without eating for a long time and I was on medication, I was beginning to be sick, I was feeling dizzy. So, in the end, I had to go in an ambulance to hospital'.

After months of struggle without provision for disability access needs, it was eventually agreed that he could stay with his partner on condition that he regularly attend an Immigration Reporting Centre, which required several hours travel. No transport was provided and 'no one was organised for me to be escorted there'. He relied on his partner accompanying him at a cost of

£150 each time. A further condition of his accommodation was to wear an electronic tag with a curfew between 8 pm and 8 am. Yet, as he explained, he was unable to leave the house:

I've stayed two weeks without going outside ... I can't abscond anyway ... They used to call me ... they said, 'Okay, we're just checking because we're worried that something has happened to you, because we can see that you haven't gone out'.

The use of electronic tagging and chains on a blind man appears to lack purpose beyond the display of punitive sanction.

The physical and emotional impact of asylum restrictions

When capacity to meet human needs is restricted, the impact is both physical and emotional. The emotional impact is exacerbated by the lack of predictability. People with seemingly similar needs and migration status are treated differently. Research by Gill et al. (2015, p. 52) found that 'factors such as the gender of the judge and of the appellant, and where the appellant lives, are influencing asylum appeal adjudication'. This is not only about the final outcomes of claims. There are multiple examples of people with seemingly similar needs but different levels of support. Ana spoke of other people in her accommodation getting migration status, while she remained: 'they were taken out and I was left and it's a terrible thing, and some other people were being brought. Then they were also given ... they left me ... going, coming, going, coming ... it has been terrible'.

Lack of clear explanation as to what people are entitled to, encourages speculation as to the basis of what appear to be irrational decisions. Ana suggests that perhaps the problem is that she is not young: 'the Home Office they ... don't consider you as a human being because you are not young. You do not benefit anything to the country'.

Her theory is contested in a discussion group by the presence of Ali, a young man whose asylum claim had also been rejected. Ana speculates further that the problem is that 'they know that you are not well, you'll be a burden to the nation'. The lack of clarity within the asylum system can also encourage notions of individual responsibility. Ying's asylum claim was successful after many years of struggle and proof that she had been trafficked and enslaved in the United Kingdom. She speaks highly of the support that she has received from many people in the United Kingdom. According to her, the support she has been given is because she is 'respectful, works hard, brave'. She criticises people who 'find it hard to get needs met if they are lazy'. Her opportunities to 'work hard' are in the form of jobs for fellow churchgoers who also frequently provide physical and emotional support.

The system appears based on irrational punishment. As Ana put it, 'what reason, they don't even know'. This gives rise to a sense of exasperation:

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they took me to the detention six weeks, and after that, I'm out. Why was I in detention? ... Now since 2013, I'm here. They never talk about again ... we don't know how the Home Office work. We don't know ...

She spoke of her distress as she was moved around in a new country, without friends, money, mobility aids or anyone to explain how the system works. She recalled her confusion at being told to go to East Croydon:

Nobody's taking you ... It was not easy but ... I went to Croydon, and I seek asylum there ... they take your fingerprints and everything, and they interview you ... I finish with them around nine at night, and ... people were being sent somewhere ... after a week we were given a letter that we are going to Wales.

After a few weeks, she was moved again, with little notice and no choice. This unpredictability prevents people from making plans and compounds the sense of desperation and mental distress. Maria is significantly older than Ana and does not speak English. She recalls the distress at being moved three times between cities. She was not provided with interpreters and therefore had very little understanding of what was happening. Her support worker explained: 'Three times ... they bring her here and they send her back, bring her here ... She doesn't know why. She went and they send her back ... she was crying ... cry a lot'.

The apparently unpredictable nature of decision-making and support provision extends beyond the Home Office. Maria was only referred to Social Services after a chance meeting with a care worker visiting her neighbour. The barriers that she experiences may be exacerbated by language barriers; however, Irina faces no such barriers dealing with officials in the United Kingdom, yet described similar struggles navigating the system:

they were fighting amongst themselves, these Social Services Departments ... I was shouting and screaming ... I need help. Who is the right person that I should go to? ... They were like, 'I'm not the one. I don't know who that one is'.

Lack of information or explanation causes further distress and is further disabling.

The relentless nature of struggles frequently leads to despair. As outlined in the introduction, Nushi lamented that the threatened eviction and homelessness 'push you to be crazy'. For some people, the despair is such that the litany of injustices no longer causes outrage. Juan, a man experiencing significant mental distress, simply shrugged with resignation as he described his constant struggle to find food, somewhere to sleep and to be safe after his asylum claim was refused.

The restrictions of the asylum system are likened by several people to physical and emotional torture. Ana asserted, 'If they are torturing someone, they can't expect someone to be okay'. The restrictions cause people to become 'disproportionately vulnerable to harm and premature death' (El-Enany, 2020, p. 35). A mural created in 2022 includes three images showing the experiences of John, a man who spent several years seeking asylum.

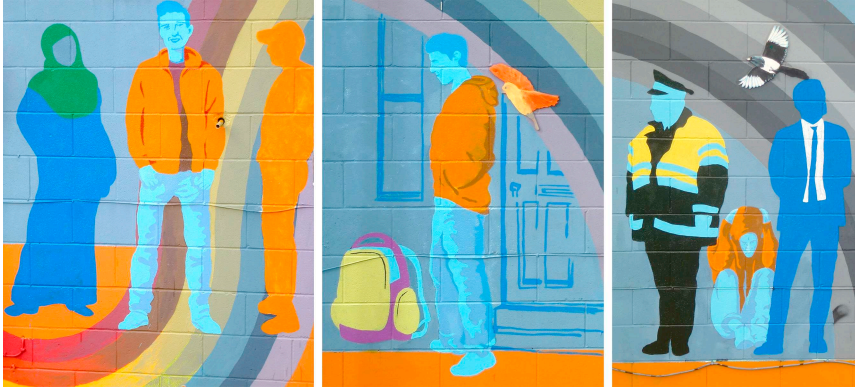


Figure 2 The creation of homelessness.

The first image shows John when his needs were met and he was happy and sociable. The second shows him after his asylum claim was refused and he was made homeless. The third image shows him looking vulnerable, crouched in bushes between a police officer and a politician. He explained:

I live in the street ... when they send you out on the street, they don't care about you ... without nothing ... you get mental health problems ... you gonna lose your mind. The politician man ... they know everything about you, but they don't care. The officer ... he doesn't care about people on the street.

Denial of access to the services and support required to meet human needs causes physical and emotional impairments. Many studies of mental distress (Bhui et al., 2003; Turner et al., 2003; Warfa et al., 2006; Lawlor, Sher and Stateva, 2015; Giuntella et al., 2018; Maloney, Nelki and Summers, 2022) among people subject to asylum and immigration controls suggest that it is so prevalent as to be widely considered normal. As Ana continues:

this mental you know ... it has been brought by the problems ... I'm taking medication for mental but ... there is another thing that can control your things. If the things are better, I think all can be well.

Maria cried repeatedly as she spoke of separation from her family. Even if her asylum claim is resolved she would not have the funds to be entitled to

bring family members to join her. The grief at the seemingly permanent separation inevitably takes a toll on her mental health.

The Home Office makes occasional acknowledgement of the impact of emotional and mental distress but does not address the causal factors. When her asylum claim was refused, Ana received a letter from the Home Office advising her that if this news was upsetting then she should speak to a friend or to the Samaritans. As she put it, the Home Office ‘pretend they are doing good things, but they want to destroy your soul and your body’. She is scornful of the Home Office idea that the emotional impact of restrictions meeting human needs could be addressed by talking to the Samaritans.

Inequalities and necropolitics in the asylum system

Differences in people’s experiences extend beyond a person’s impairment. Michael, a blind man who arrived in Britain with refugee status on a resettlement scheme, described how, in his experience, people ‘try to help anyone with visual impairment’. He attributed any barriers he faced as being due to oversights. In sharp contrast, Luis, also blind, but with a criminal record and without refugee status, recounted how Home Office staff denied that he was blind. He was asked, ‘How come you’re looking at me? How come you’re blinking?’. The impact of lack of provision for his visual impairment may be caused by the malice directed at people with criminal records, represented as ‘folk devils’ (Bowling and Westetra, 2018).

The inequalities and restrictions faced by disabled people in the asylum and immigration system extend beyond formal restrictions. Kamil Ahmad (Yeo, 2017) and Bijan Ebrahimi (Younge, 2017), both disabled refugees, were murdered in Bristol, after repeatedly asking for police help. In an official local authority report, failure to meet Kamil’s needs was referred to as, in part, caused by ‘unconscious bias’ (Bristol safeguarding adults board, 2018). Whether the bias is labelled as unconscious or so systematic as to be routine, the ultimate impact of restricted access to services and support is that lives are lost.

People seeking asylum have often fled from life-threatening situations. As poet Warsan Shire (2015) writes: ‘no one puts their children in a boat unless the water is safer than the land’. The impact of restrictions and inequalities in the United Kingdom results in ongoing threats to life. The concept of ‘necropolitics’ discussed by political theorist Achille Mbembe (2019) involves the deliberate creation of ‘horrors and intense cruelty’ (2019, p. 21) with the ‘power and capacity to dictate who may live and who must die’ (2019, p. 11). This can be applied to UK asylum policy. The threatened removal of people in the asylum system to Rwanda in 2022 is a stark example of such necropolitics and the disabling impact of government policies. The *Independent* (Bulman and Trew, 2022) newspaper reported that Zoran, a 25-year-old Kurdish man from Iran had arrived in Britain by boat 40 days before being put on the aeroplane to Rwanda. He recounts

thinking he was going to die as he was handcuffed, tied down, with his head forced to the floor of the plane. A series of last-minute legal challenges led to the flight being cancelled just minutes before it was due to take off. However, new flight details were sent out, leaving people again living in fear of this fate. The impact of the immediate violence used by border staff is compounded by the ‘slow violence’ (Nixon, 2013) of ongoing threats and restrictions, to create a system in which death and disability, or necropolitics, are tools of government policy.

Sources of support

In the context of official restrictions, people’s capacity for survival may depend on informal sources of support. The people to whom someone turns in crisis can reveal where the trust and identification lies, rather than who has the material resources (Niven, 2013). Some people may, for example, turn to fellow nationals of their country of origin, religious groups or voluntary sector organisations. It may be easier for people to access support for which there is official entitlement rather than that which is provided as an act of discretionary kindness. Ana explains if ‘you have to ask for it ... you get upset’. She recalls sharing a bedroom with the children of a fellow national for more than a year when she would otherwise have been street homeless. Such support may be essential to survival, but as both Ana and Irina explain, reliance on support from friends creates an imbalance.

Access to help from informal sources may depend in part on people’s character. People who are extrovert or have cheerful dispositions may have greater social contacts and consequently have their needs more readily met. People who are depressed or angry may have more urgent needs but, as argued by Mackenzie et al. (2015), they may find it harder to access discretionary support. If support relies, or is perceived to rely, on discretionary decisions, rather than rights, then performed appreciation becomes necessary. This ‘gratitude imperative’ (Schwartz, 1967, p. 1) may explain why Charlotte, a disabled woman seeking asylum constantly expresses thanks: ‘Good GP, good ... good and church. xx people very good, very help and thank you very much, people. And you and xx, thank you very much’.

On overhearing this, Ana commented to me, ‘you have to understand she is not ok’. Whether or not Charlotte is less ‘ok’ than anyone else, successfully navigating the asylum system may depend on being perceived as appreciative. If support is perceived as discretionary, then beneficiaries must respond as they would to a bearer of gifts.

Perceptions of generosity may also shape people’s actions towards voluntary sector organisations. If generosity is not reciprocated it can cause resentment. According to Ana:

We keep on telling our stories ... sometimes we don’t benefit, it’s the charity that benefits ... I tell people about our problem, you write a

cheque and send to the charity ... sometimes you are tired of doing things because if you keep on doing things and nothing is changing in your life, why should you continue?

If people perceive themselves as giving their time and energy to an organisation, then appreciation is to be expected. In addition, when people rely on discretionary support, voluntary help to a charitable organisation may be seen as a means of increasing the prospect of individual support.

Where people choose to invest their time and energy is shaped by what they perceive to be the cause of their problems and how it could be addressed. An event was organised to bring together disabled people irrespective of migration status, to share experiences, build peer support and develop greater solidarity. Maria was highly critical of the event. She had already attended a big meeting with City Council leaders and had been disappointed that there had been no chance for her to speak to them individually. In desperation, she clung to the hope that if a person with power could hear about her struggles, things might change. She considered meetings to be pointless without the presence of people who can change things. She asked, how a stronger disabled people's movement could help her find out if her son is dead or alive? Or how a stronger movement could get her identity documents back from the Home Office. Similarly, Joseph asked whether a stronger movement would stop him and his wife having to share a bedroom with their adult daughter. Irrespective of whether a stronger movement could potentially facilitate such changes, the perceived solution to problems was firmly focused on individual pleading with decision-makers, or with those that Ana refers to as the 'giants', rather than building a movement for systemic change.

Irrespective of the perceived purpose of building peer support or a movement of resistance, capacity to interact and build connections in the wider population is limited when people are struggling for basic survival. Nobody involved in a focus group of disabled people in the asylum system was aware of the possibility of involvement in a local Disabled People's Organisation. One person explained that even if they had been told about it: 'you feel you are not fit to be there ... you feel you are out of place'. Meeting new people can be particularly daunting if there are language barriers, if a welcome is uncertain or if, as for Ali, emotional distress impedes group interaction. As Ana complained: 'we are here fighting for yourself on your own ... Nobody is concerned with your life. Nobody'. Peer support can reduce the sense of isolation. A drop-in centre organised by an asylum support organisation provides important functions. As Ali explained:

when I come here, I don't feel scared. I see people laughing, I see people smiling, I see people talking to each other. I see people helping other people, so it's nice and this makes me happy. I'm not scared here.

Similarly, Maria described her reliance on these spaces for social contact. She is only able to leave her flat with the help of her carer who comes for seven hours per week. During a group discussion, it emerged that she and Ana lived in the same building as each other but had not realised.

On the rare occasions when people in the asylum system join Disabled People's Organisations, differences in entitlements and experiences reduce the commonalities with disabled citizens. As Manjeet explains:

'I'm disabled ... we are in the same boat, kind of ... they tell me things to do as a disabled person, you can go here, do this, do that ... But at the end of the day, I'm an asylum seeker, it changes everything'. (cited in: Yeo and Bolton, 2013, p. 49).

When asylum claims are successful and people gain refugee status, then the official entitlements are similar to those of the wider population. Nonetheless, Michael, who has refugee status, explained: 'since I arrived in the UK ... there was no chance for me to meet other people with disability, I didn't have that chance'. If people in the asylum system are not involved in Disabled People's Organisations, then the perception that people with intersectional needs are minorities is compounded.

Labels of identity and oppression

When seeking solutions to such serious injustices that lives are being lost, it might seem a distraction to discuss terminology. But the choice of words may reflect how problems are understood, and therefore the solutions and alliances that seem appropriate. Labels are used by states as an indicator of entitlement to services and support. It is important to acknowledge that labels of disability or migration status are not neutral. As discussed in the introduction, people may avoid labels that are perceived as stigmatising. People in the asylum system may particularly avoid additional labels if perceived as stigmatising. Labels can be seen as negative. Holloway (2002, p. 74) argues that the use of labels that distinguish one person from another implies that 'the other is not part of us and we are not part of the other'. This assumes that the 'other' is a disempowering identity with which 'we' do not identify. Similarly, Roger Zetter (1985, p. 101) argues that labels of migration status impose 'differentiation, perhaps even stigma'. However, labels can also be a means of acknowledging shared experience, building solidarity and organising resistance. Miriam Ticktin's (2011, p. 166) anthropological work is centred on the 'sans-papiers' movement in France, a group she describes as heterogeneous, brought together through 'a label they claimed as a means to emancipation'. Shared experience and identities are core to emancipatory movements, as outlined in the aptly titled article by Fran Branfield: 'What Are You Doing Here? "Non-disabled" People and

the Disability Movement' (1998). According to Branfield (1999, p. 299), 'to claim "I am disabled" is a political statement. It is to align oneself with other disabled people in a struggle for equality'. The disabled people's movement has brought together people with different impairments and experiences of injustice to build solidarity and improve resistance. This book explores how these experiences and insights can be extended to improve resistance to the impact of asylum and immigration controls.

The knowledge that stems from intersectional oppression

The intersectional restrictions faced by disabled people in the asylum and immigration system are distinct from those faced by the broader community of either disabled citizens or migrants. As argued by Kimberlé Crenshaw (1989) and Patricia Hill Collins (1990) focusing on the experiences of black women, intersectional experiences are beyond two forms of disadvantage. Lived experiences may enable collective organisation and help to assert people's existence within a wider movement. Hill Collins argues that people with shared minority identity need safe spaces in which to organise, define themselves and 'resist objectification as the Other' (1990, p. 101). The need for safe spaces may be even greater for people without secure migration status facing ever-present threats of detention and deportation. Barriers to intersectional support hinder opportunities, but not the need for disabled people in the asylum system to find out about each other, to build peer support and to develop collective resistance.

Intersectional lived experience of disability and immigration controls provide people with important insights or 'cripistemologies' (Johnson and McRuer, 2014) to contribute to building greater justice. However, the greater the restrictions that people experience, the less capacity people have to assert their needs or existence. As Manjeet explained in a public meeting, to organise effective resistance, you must overcome the feeling that: 'you are fighting for something you don't deserve. You have to feel it should not be like that. Then you can make a difference'.

The energy and capacity to resist is particularly difficult in the context of relentless struggles and pervasive mental distress, yet the knowledge and insights of intersectional oppression may be critical to building greater justice.

Visibility and capacity for resistance

The deliberate denial of services and support for people seeking asylum creates a system which is actively and deliberately disabling. The lives and experiences of disabled people in the asylum system rarely reach public discourse, irrespective of whether they became disabled before or after arriving in the United Kingdom. As Ana puts it: 'They want us to be garbage and be forgotten'. There are some exceptions to this invisibility. Nujeen Mustafa (Mustafa and Lamb, 2016) writes of her experiences as a wheelchair user, fleeing conflict in Syria and arriving in Germany. Her struggles and achievements in the face of multiple

barriers are important. She is also now an important voice in the international arena. But the valuable accounts of exceptional people are less useful in raising awareness of systemic restrictions and injustice.

Writing with regard to the wider population, Butler (2015) refers to distinctions as to whose lives are 'grievable'. The struggles faced by Kamil Ahmad were not acknowledged in the media when his asylum claim was refused, when he was made homeless or when he was experiencing severe mental distress. At those times, like many of the experiences described in this book, his life was of no public interest. He was among the people Rancière refers to as 'beings of no account' (1999, p. 24). If he had died unsupported on the street, like the estimated 726 homeless people who died in 2018 (Office for National Statistics, 2019), his life would not have been publicly 'grievable'. There has not been media coverage and public outrage at each of these deaths. His death only received public attention when the obscene violence of his murder could be attributed to an act of individual villainy rather than to the relentless, systematic, state-sanctioned, denial of support.

Critical moments of change have occurred through collective determination based on the solidarity of organised action. As Rancière explains:

politics exists wherever the count of parts and parties of society is disturbed by the inscription of the part of those who have no part. It begins when the equality of anyone and everyone is inscribed in the liberty of the people. (1999, p. 123)

According to Rancière the capacity to assert political change relies on breaking 'the tangible configuration' of the existing social order whereby the speech of some people is 'understood as discourse and another as noise' (Rancière, 1999, p. 29). It is when those 'without a part assert their part' that a transformative 'moment of politics' can occur (*ibid.*). If disabled people subject to migration controls were to assert 'their part' it could theoretically achieve a moment of politics. However, the deprivation, isolation and precarity of intersectional restrictions make this unrealistic without strong solidarity. As Ana explained, 'You struggle on your own, and when the day comes to an end ... you say thank God, the day's gone'. Struggles for justice must be grounded in the experiences of people living with current restrictions but must also be focused on causes rather than relentless symptoms of injustice. Solidarity from people living in less precarious circumstances is essential to the development of alternatives.

Conclusion

This chapter has discussed lived experiences of the disabling restrictions systematically imposed on people subject to asylum and immigration controls. These restrictions cannot be understood in isolation. It is not new to argue that the creation of 'wasted lives' (Bauman, 2004) or 'disposable' lives (Giroux,

2008) is intrinsic to a capitalist economy, structured to prioritise profit, rather than on the basis of common humanity. While there are many similarities in the ways that different people are devalued by capitalism, the notion of disposability suggests that people are used and then discarded. Many disabled people are never framed as if useful, therefore, the term dispensable may be a more accurate way to describe how people's lives are devalued.

The insights and knowledge of people who are hegemonically framed as dispensable may be crucial to developing new solutions. With the 'scream' of injustice (Holloway, 2002), people may assert their common humanity and the need for urgent change. However, in the absence of solidarity or effective means of developing and asserting alternatives, the energy of this 'scream' easily becomes despair. If securing migration status is perceived to be discretionary then people may need to avoid being considered ungrateful or as causing trouble. People struggling to meet basic needs and whose lives depend on the apparently unpredictable nature of immigration decision-making may be unable to take leading roles in a movement for justice. Alliances and solidarity are needed, but for resistance to be effective, it is necessary to consider how current intersectional injustices have developed. Chapters 2 and 3 will turn to examine how current immigration and disability policies are shaped by post-Second World War developments.

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Figure 3 'The wheelchair is chained ... I feel restricted by the UK Border Agency. I am not free to do anything'. Pugh and Yeo (2012).

2 From universal rights to individual responsibility

It is important to understand the roots of the current situation if effective alternatives are to be developed. Maya Goodfellow (2019, p. 46) argues: ‘the shameful present ... is often compared to an imagined past, as activists and outraged politicians indignantly ask: what has this country become? The problem is, this is the kind of place it has long been’.

To argue that current restrictions are rooted in what went before is not to suggest a linear development or that there is an end point of policy or resistance. Policy and practice are always contingent and in flux.

This book does not replicate previous analysis of the historical roots of inequalities associated with migration (see, e.g., Spencer, 2002; Anderson, 2013; Goodfellow, 2019; El-Enany, 2020) or disability (Borsay, 2005; Hampton, 2016; Clifford, 2020). Instead, attention is focussed on how developments in one sector relate to the other, and how these have shaped intersectional entitlements. For this purpose, this chapter briefly considers the post-Second World War context, before looking in more detail at significant developments in the New Labour era. The next chapter turns to explore how these developments set the scene for the increasing convergence of disability and immigration restrictions in the years of austerity and beyond.

The post-Second World War context

There have always been exceptions to those considered to be worthy of services, support and human rights. The aftermath of crisis may be characterised by greater demand and capacity for imagining and developing alternative ways of organising society. The inherent change associated with soldiers returning from the Second World War was combined with commitment to avoiding future conflict, awareness of the fragility of national borders and possible fear among the ruling class that the rejection of capitalism taking place in the Soviet Union could gain popularity in the United Kingdom. At the national level, the post-war reforms may have been designed to maintain what Pat

Thane (2013, p. 3) refers to as ‘questions of political and social order’ and prevent more fundamental change.

Whatever the motivation for these changes, the political hegemony following the Second World War is often referred to as a consensus. This era resulted in multiple international agreements, including the United Nations Charter (1945), Universal Declaration of Human Rights (UDHR, 1948) and the Refugee Convention (1951). At the national level, in the United Kingdom, the welfare state (1948) and the National Health Service (Bevan, 1952) were established. Healthcare was to be paid for by taxation and free at the point of delivery irrespective of migration status, with the stated aim that such provision should be ‘in place of fear’ (Bevan, 1952) associated with the misfortune of illness. As Bevan (1952, p. 177) explained: ‘concern for individual life is the most significant quality of a civilised human being. It is not achieved when limited to people of a certain colour, race, religion, nation, or class’.

This is not, however, to suggest a halcyon era of equality and justice. There has never been any semblance of equality in the factors that create poor health. The human rights promoted in post-Second World War international agreements were never available to all humans and never addressed the harms of economic inequality (Moyn, 2014). Analysis from Gurminder Bhambra (2022) exposes the essential role of resources and taxation extracted from the colonies in the construction of the post-war welfare state, designed to benefit what China Mills (2023) refers to as a ‘tightly defined group of British citizens’. Similarly, Pat Thane (2013, p. 3) argues that to attempt to explain the introduction of the welfare state: ‘as a manifestation of altruism, of a desire to remove poverty ... renders mysterious the fact that much poverty remains, that those in greatest need have often gained least’.

Inequality was integral to the post-war consensus at the national and international level. In their historical analysis of the relationship of Black women to the welfare state, Bryan, Dadzie and Scafe (2018, p. 111) contend that ‘welfare is designed to make us believe in the myth that we are living in a society that is fundamentally humane’. What Mills (2023) refers to as a ‘cover story’, enables those people vested with the power to determine eligibility to the welfare state to also have the power ‘to control, disrupt and intervene in our lives’ (Bryan, Dadzie and Scafe, 2018, p. 109). In the years to come, the power inequalities and the exceptions to notions of ‘universal’ services would be easily extended from overlapping issues of disability, migration status, race and gender to affect ever wider sectors of the population.

Post-war context for disabled people

The targeting of disabled people was central to Nazi ideology, yet subsequent efforts to promote human rights and prevent conflict from recurring did not extend to promoting equality for disabled people. There was no

equivalent to the UN Convention on the Status of Refugees (1951) for disabled people in the post-war era. The ‘universal’ nature of the Declaration of Human Rights (1948) includes cursory reference to ‘security in the event of unemployment, sickness, disability’ (article 25, 1948) but does not expand on the barriers faced by disabled people. It was not until 1975 that there was a UN Declaration on the Rights of Disabled Persons (1975). The UN Convention on the Rights of Persons with Disabilities (UNCRPD, 2006) would eventually be passed more than 60 years after the end of the Second World War.

More specifically regarding the national context, Clifford (2020, p. 47) argues that prevailing attitudes towards disabled people ‘altered relatively little after the Second World War’ and that the welfare state ‘failed to guarantee against the poverty and financial exclusion of disabled people’. Continued barriers to paid employment reduce National Insurance contributions, which also reduce eligibility for support and result in ‘comparative exclusion from the welfare state’ (Hampton, 2016, p. 53). These inequalities were mirrored in wider legislation. The 1944 Education Act did not bring any semblance of equality for disabled children. Instead, the numbers of children in segregated educational institutions increased from 38,499 in 1945 to 106,367 in 1972 (Borsay, 2012, p. 1). The existence and needs of disabled people continued to be largely ignored or framed as if dispensable. The continuing restrictions and inequalities imposed on disabled people would not spark national or international unrest and were therefore insignificant to the post-war determination to avoid future conflict.

As further analysis will show, national and international policies regarding disability developed alongside struggles to assert the meaning of disability itself. But first it is necessary to consider the parallel development of immigration policy.

Post-war immigration policy

The role of the welfare state cannot be understood without considering immigration policy. As Michael Richmond and Alex Charnley (2022, p. 113) argue: ‘immigration controls acted then, and act now, as the ultimate exclusion from national welfare, by preventing entrance and exercising deportation powers against “aliens” within’.

Between the 1951 Refugee Convention and 2023, the United Kingdom passed more than 20 acts of parliament reducing the rights of immigrants. These policies shape what Nandita Sharma refers to as the ‘Postcolonial New World Order of nation-states’ (2020, p. 20). National borders to control and restrict the movement of people have been combined with stricter measures to ensure the free movement of capital across borders. Neoliberal quests to prioritise the movement of capital are shown by Kojo Koram (2022) to mirror the systems imposed on former colonies as a condition of ending direct colonial rule.

Asylum and immigration policy has always been designed to distinguish between people who are deserving of support and those who are not; those who may remain in the United Kingdom and those who may not. Analysis now turns more specifically to legislation shaping current entitlements associated with disability and migration.

The New Labour approach to immigration

At the beginning of the New Labour government led by Prime Minister Tony Blair, people seeking asylum lost entitlement to access the welfare state.

The Immigration and Asylum Act (1999)

The UK government's White Paper, '*Fairer, faster and firmer*' (1998) sets out the rationale for the Immigration and Asylum Act (1999). This legislation was introduced over a decade before Theresa May explicitly called for a 'hostile environment', but contributes to what Goodfellow (2019, p. 7) refers to as 'decades of exclusionary politics'. People subject to asylum controls would receive support from the National Asylum Support Service (NASS) rather than the welfare state:

people who have not established their right to be in the UK should not have access to welfare provision on the same basis as those whose citizenship or status here gives them an entitlement to benefits when in need. (Great Britain. The Home Office, 1998, p. 35, paragraph 8.18)

The level of support was set at lower than the minimum provided by the welfare state. The goal was to provide sufficient support to avoid destitution and 'minimise the attractions of the UK' (1998, p. 3). This approach marked a decisive shift from the provisions of the 1951 Convention and the founding of the NHS. The policy can be seen instead as moral regression towards Hobbesian sufficientarianism (see, e.g., Frankfurt, 1987; Gosseries, 2011) whereby the goal is to provide sufficient to avoid causing imminent death, rather than to meet people's needs, enable equality or acknowledge common humanity. In addition to the inequalities of financial support, people lost the right to choose where to live, and would instead be dispersed to low-cost accommodation, potentially away from friends, family and support networks. These new restrictions would have particularly severe implications for disabled people. Not only was there no longer acknowledgement of the additional costs associated with disability, but people could be forced to move from established sources of support to address access barriers. Despite espousing the need for migrants to integrate in wider society (1998, p. 17, paragraph 2.16) the legislation would make this increasingly difficult. The validity of Bevan's (1952, p. 177) warning almost 50 years earlier is clear: if 'emotional concern' is limited to certain people, it facilitates 'monstrous cruelty or at best indifference to others'. The

deliberate and explicit entrenchment of inequalities through this legislation would become more extreme in the years to come.

The power inequalities inherent in distinctions of entitlement are affirmed in the White Paper by a proposed covenant with rules to be obeyed. These rules include ‘tell the truth’ and ‘obey the law’ (1998, p. 33), presented as if distinct from the norms of other countries and therefore indicative of ‘integration into British society’ (1998, p. 41, paragraph 10.1). When integration is presented as an issue of individual responsibility it obscures the systematic removal of choice from the lives of people subject to migration controls. Focusing on the Netherlands but nonetheless relevant to the United Kingdom, social theorist Willem Schinkel (2013) argues that normative goals of integration assume the existence of a monolithic and accessible social order. The restrictions that are imposed on people in the asylum system prevent integration in the society of assumed worth. Yet, blame for the failure to integrate is hegemonically targeted at individuals rather than the restrictions.

In a similar manner to reference to integration as a matter of individual choice, the White Paper includes reference to the goal of ‘*encouraging citizenship*’ (emphasis added, 1998, p. 17, paragraph 2.16). The focus on individual responsibility is amplified by asserting commitment to race equality (1998, p. 16, paragraph 2.13) and ‘improving access to public services for ethnic minorities’ (1998, p. 17, paragraph 2.15). It is as if the racist impact of removing support from migrants (a disproportionate number of whom come from ethnic minorities) could be countered by stating that the intention is not racist. As Mondon and Winter (2020, p. 61) argue, overt rejection of illiberal racism serves to perpetuate the acceptability of a system ‘built on discrimination and privilege’ (2020, p. 6). Similarly, the White Paper makes 14 references to the value of human rights, while also making seven references to people without rights. The purpose of asylum and immigration policy is implicitly presented as to distinguish between people who are deserving of human rights and those who are not. This formalises Arendt’s (1951) sense that as a refugee she lost the ‘right to have rights’. Entitlement to human rights becomes dependent on factors beyond being human.

Distinctions between those *seeking* and those *granted* refugee status are asserted in the 1998 White Paper, with 40 references to ‘genuine’ travellers, counterposed by reference to ‘abusive’ travellers, such as those moving for ‘economic betterment’ (1998, p. 23). The difference between being a ‘genuine’ or an ‘abusive’ traveller, appears to be defined by whether a person has sufficient wealth to travel for leisure. The White Paper seeks to avoid disruption to ‘people travelling abroad for *legitimate* purposes including business, study and holidays’ (emphasis added, 1998, p. 9). Furthermore, a bond scheme is proposed, whereby a ‘sponsor would be asked to deposit a financial security’ (1998, p. 24). The implication is that people with money have ‘genuine’ reasons to travel, whereas people escaping

poverty travel for ‘abusive’ reasons. Migrants who bring significant amounts of capital into the United Kingdom are not framed as a threat by such legislation, despite having greater capacity to influence life for the majority. Instead, as Appadurai (2006, p. 48) explains, fear is directed at ‘the weak’ minority. The apparent threat is not migration per se, but, as Vickers (2012) asserts, migration for reasons external to capitalist prioritisation of profit.

The legislation is presented as if modernising, rather than contesting the Refugee Convention (1951). In the 1998 White Paper, then home secretary, Jack Straw, refers to the scale of migration having risen beyond that anticipated by the 1951 Refugee Convention. The paper includes 38 references to the need to modernise, while upholding an apparent ‘tradition’ (1998, p. 33) of generosity. Without reference to neoliberal shifts to reduce state responsibilities (Bebbington, Hickey and Mitlin, 2008), this need to modernise is presented as the justification for an increased role for the voluntary sector (1998, p. 33, paragraph 8.3). The increased reliance on charitable support would build precarity and inequity into the system, yet by labelling the policy as modernising, the result is to frame critics as if outdated. Migrants would become increasingly reliant on charitable generosity rather than entitled to statutory support. This shift is core to understanding the development of restrictions associated with both immigration and disability.

The Nationality, Immigration and Asylum Act (2002)

The ‘modernising’ goals of the New Labour government continued beyond this legislation at the start of their period of office. The focus extended from the restrictions imposed on people seeking asylum, to arguing that certain forms of migration may be useful to the economy and should therefore be encouraged. The Nationality, Immigration and Asylum Act (2002) therefore promoted the need to ‘manage’ migration. Article 8 of this legislation asserts the need to ensure that people ‘who seek to enter or remain in the United Kingdom are financially independent’ and are not a ‘burden’ on the taxpayer. New Labour’s ‘modernised’ immigration policy was shaped by assessing people’s ‘effectiveness as participants in the new economy’ (Flynn, 2003, p. 13). The purpose of internal border controls on who has access to resources (Bertram, 2014) and physical border controls which mark a country’s territory (Andersson, 2014) are therefore not to prevent entry but to filter *who* may enter (De Genova, 2016). If human worth is defined by economic contribution in a capitalist economy, then the cost of services for people whose impairments limit productivity, who face disabling barriers, who migrate to escape persecution, or any combination of these factors is framed as if a burden to be reduced.

The impact of New Labour migration policies on disabled people

New Labour immigration policies had disproportionately negative impact on disabled people, whether in relation to removing access to the welfare state

(1999) or focussing on economically beneficial migration (2002). Yet the existence of disabled people is unmentioned in the immigration policies. It is as if the impact is insignificant to the goal of reducing the apparent burden of ‘uncontrolled’ migration on the wider population. The 1998 White Paper does state that local authorities would no longer be responsible for providing support to ‘*healthy and able-bodied*’ people in the asylum system (paragraph 8.23), thereby implicitly framing disabled people as the unmentioned ‘other’. The 1999 legislation does also include provision for additional support if ‘the Secretary of State considers that the circumstances of a particular case are exceptional’ (Section 96, paragraph 2). Almost two decades later, complaints that the criteria for this additional support were unclear and therefore rarely used, prompted a specific briefing document (2017) which clarified that eligibility depends on a person’s needs being beyond the responsibility of wider service providers. The following year, a Freedom of Information (reference 52045, 2019) revealed that out of 345 applications submitted in 2018, support was provided to just ten people. The purpose of such rarely used provision therefore appears not to be to provide for ‘exceptional’ needs but to legitimise the restrictions imposed on those who are ‘healthy and able-bodied’. The use of such euphemistic references which implicitly include disabled people, will be discussed in the next chapter, but first attention turns to more explicit policy and practice towards disabled people during the New Labour government.

The New Labour approach to disability and welfare reform

The focus on limiting the resources available to migrants framed as a burden would have parallels with the restrictions to be imposed on the wider population of disabled people. The same year that people in the asylum system lost access to the welfare state (Immigration and Asylum Act, 1999), Blair set out his plans for welfare reform in the Beveridge lecture (1999). This speech had no direct legislative impact; however, his vision would become the basis of subsequent policy reforms (Gregg, 2008). Central to his proposed reforms was the goal to end ‘dependency’ and instead to promote individual responsibility with a ‘hand-up, not a hand-out’. Blair made no direct reference to the legislation preventing people in the asylum system accessing the welfare state. Instead, he asserted that ‘any citizen of our society should be able to meet their needs’. It is unclear whether he sought to distinguish citizens from non-citizens, or whether ‘citizen’ is used as a euphemism for a responsible person, drawing on what Maria Pisani (2012) refers to as the ‘citizenship assumption’. Either way, just as disabled people are invisible in the immigration legislation, non-citizens are the unmentioned ‘other’, those who require no direct reference in Blair’s vision for welfare reform.

Lack of reference to the new immigration policy is particularly noteworthy given the multiple similarities with his proposed welfare reforms. Just as the White Paper, *Fairer, faster, firmer* (1998) had framed migrants as

a threat, Blair portrayed people dependent on the welfare state as a burden on the wider population. He presented 'fraud and abuse' as a key problem, with the quest to distinguish people who are worthy of support from those who are not. Like the earlier immigration White Paper (1998), Blair called for the voluntary sector to play a greater role in the delivery of welfare services. This outsourcing of responsibility marked a further shift from entitlements based on rights, to reliance on discretionary generosity. In principle, the government's shift to reliance on the voluntary sector could have included a greater role for Disabled People's Organisations. However, as Oliver and Barnes (2012) explain, Disabled People's Organisations lacked experience of engaging with political systems, leaving big charities 'only too willing to step in and fill the void' (2012, p. 155). In so doing, the ideas of the disabled people's movement were 'adapted and adopted' (ibid.), as part of a shift from disability activism to 'disabling corporatism' (Oliver, 2018). The goal became incorporation, rather than transformation of the mainstream political agenda. Capacity for dissent is reduced if organisations become service providers reliant on government contracts. The impact of shifting responsibility to the voluntary sector would continue to hinder and divide future resistance as will be discussed in Chapter 5.

Neoliberal agenda

The reforms proposed in Blair's Beveridge lecture are indicative of the shift from the era of apparent consensus for 'universal rights' to instead promote a neoliberal agenda of increased individual responsibility, reduced state expenditure and an unrestricted free market (Harvey, 2007). This had been developed by Milton Friedman (1962) and adopted in the United Kingdom by Conservative Party Prime Minister Margaret Thatcher. According to psychologist Jeff Sugarman, this agenda privileges people who are 'independent, self-sufficient, enterprising, competitive, flexible, adaptable, risk-seeking, less reliant on government support, and oriented toward pursuing self-interest' (2015, p. 109).

Blair spoke of neoliberal values of individual meritocracy: 'social justice is about merit'. He stated that life chances should depend on 'talent and effort', and that 'if you work hard, you will not be in poverty' (1999). If 'hard work' is the cure for poverty, then the implication is that people in poverty have not worked hard enough, are themselves to blame and are therefore undeserving of support. The conditionality of support proposed by Blair is directly contrary to the basis on which Bevan (1952) established the NHS, whereby healthcare would be free at the point of delivery to anyone in need. The association between paid work and individual merit would become further entrenched as neoliberalism developed in the years to come.

Policy change is inevitably relative to what has gone before. Just as the White Paper, *Fairer, faster, firmer* (1998) presented the removal of entitlement from people in the asylum system as modernising the 1951 Convention in the context of increased numbers of migrants, Blair presented his proposed welfare reforms as modernising, rather than replacing, Beveridge's (1942)

concept of the welfare state. He called for a ‘modern welfare state fit for the modern world’, emphasising increased demand since its origins. His agenda was presented as a ‘third way’ (Giddens, 1998) between ‘old Labour’s’ rights-based approach and Conservative Party attempts to cut welfare costs. Despite the reformist narrative, radical change was needed before Blair’s (1999) proposed restrictions on access to the welfare state could be extended from people in the asylum system to a wider population.

Blair repeatedly expressed support for disabled people. Under his government, the New Deal for Disabled People and the Disability Rights Commission were established. Nonetheless, the individual responsibility of the proposed neoliberal welfare agenda was incompatible with the collective responsibility of the social model (UPIAS, 1976; Oliver, 1983) which had become the basis of the disabled people’s movement.

Co-opting and distorting the demands of the disabled people’s movement

The White Paper ‘Our health, our care, our say: a new direction for community services’ (2006) formed the basis of the Health and Social Care Act (2008). As alluded to in its name, responsibility for decisions regarding support services would shift from the state to the individual and was therefore a significant step in the direction of Blair’s vision for welfare reform. Within this agenda, the reduction of state services (UK, 2006, p. 28) was presented as an inconsequential element of fulfilling longstanding demands from the disabled people’s movement to end the automatic expectation that everyone would attend day centres. People would have ‘choice and control’ over personalised services from an array of voluntary sector providers (UK, 2006, p. 24). The personalisation of social care would reduce public expenditure, but unlike immigration policy, this was presented as providing individual opportunities.

A key reason for the lack of wider resistance to Blair’s welfare reforms can be seen as the co-option of demands, particularly in relation to social care. The shift from reliance on state services to individual responsibility was not presented as a threat, but as providing people with greater ‘choice and control’, a long-sought demand of the disabled people’s movement. Many campaigners had high hopes from a Labour government, particularly one in which disabled people were being invited to the table. The allure of a government that adopted the terminology of the disabled people’s movement was sufficient to prevent widespread recognition of the distortion of the original demands. Among the few who spoke out against what was taking place, Finkelstein (2007, p. 5) warned that the focus of New Labour was on ‘identifying characteristics of the individual, rather than the nature of society, and then making selected “concessions” to those so defined’.

He warned that the precarity of people’s existence is exacerbated when provision of support depends on being perceived as worthy of discretionary

acts of concession and that the shift to individual responsibility was a ‘capitalist dream come true’ (Finkelstein, 2007, p. 13). Disabled activist and author Jenny Morris (2011, p. 3) later observed that ‘we have ... unintentionally, contributed towards a steady undermining of collective responsibility’. In a retrospective analysis, Karen West (2012) observed that the ‘ideological grip’ of ‘choice and control’ masked the reduction of state services. In effect, policies promoting ‘choice and control’ served to shift the focus to neoliberal agenda of individual responsibility and reduced state services. This shift was essential for the Welfare Reforms that Blair had spoken of in his Beveridge lecture, but which would be implemented by later governments.

Diametrically opposed goals for ‘control’

It is important to note that at this stage in the development of welfare reforms, there were stark distinctions from the framing of immigration policy. The two policy areas make heavy reference to goals for ‘control’, but the meaning may appear diametrically opposed. The 1998 White Paper ‘*Fairer, faster, firmer*’ included 186 references to ‘control’ or ‘controlling’ in the 55-page document. The focus was on the state’s need to assert *disciplinary* control *over* migrants to avert the assumed threat. In contrast, the 2006 White Paper ‘*Our Health, our care, our say*’ uses the same words 141 times, but this time it refers to ‘opportunities’ or ‘choice and control’. Despite these initially contrasting uses of the same word, the ‘control’ offered to services users in the 2006 White Paper resulted in a reduction of state services and would be followed by the disciplinary ‘control’ of Welfare Reforms (2009, 2012) as will be discussed in Chapter 3. In both sectors, the task would become focused on controlling access to resources, while identifying individual exceptions who are worthy of support. Reference to control can therefore be considered to have ‘floating’ (Butler, Laclau and Žižek, 2000, p. 305) meaning which contributed to creating greater convergence between the two sectors.

Concurrent support for the rights of disabled people

In 2009, while the drastic reduction of state services was taking place, the New Labour government ratified the UNCRPD (2006). Unlike the Refugee Convention (1951) that was developed by national leaders, rather than refugees, the UNCRPD (2006) was developed by disabled people themselves. It might therefore be considered a moment in which those with no part asserted a part (Ranci re, 1999). According to Crock, Ernst and McCallum (2012, p. 737) it represented an international ‘paradigm shift in the understanding of persons with disabilities as rights-bearers’. On ratifying the Convention, the UK government became obliged to comply with the enshrined rights-based approach. However, as German disability studies scholar and activist Theresia Degener (2017, p. 3) argues, ‘state parties do not understand the profound change in disability policy and law that is

embedded in the CRPD'. This may be the case, but the Convention can also be seen as part of the struggle for hegemonic control of understanding of disability. It was a means for the UK government to assert commitment to the rights of disabled people without effective means of enforcement, as will be discussed in the next chapter.

The UNCRPD (2006) calls for governments to provide services and support that enable 'full and effective participation and inclusion' of disabled people. In relation to UK response to issues of migration, the UNCRPD is most significant in its omission. The UK government inserted several reservations, before ratifying the Convention. One reservation would exempt immigration policy from the Convention's obligations. Barrister Stephanie Motz questions the reservation's legal compatibility with the object and purpose of UNCRPD. Whether or not the UK reservation is compatible with UN principles, the experiences outlined in Chapter 1 show that, in practice, people in the asylum system are denied any semblance of the Convention's rights. Furthermore, the CRPD committee recommended the mainstreaming of disability in immigration policies (2 October 2015, cited by Motz, 2016), thereby confirming the view that government obligations under the Convention are not limited to national citizens. Yet, there was no organised protest at the insertion of this reservation to exclude immigration policy or this element of the inequalities in UK response to the Convention. The needs of migrants appear to have been considered a minor concern in relation to the groundbreaking achievement of the wider Convention.

Individual responsibility and the biopsychosocial model

Despite ratification of the UNCRPD and assertions of commitment to collaboration with Disabled People's Organisations, Blair's vision for welfare reform required fundamental changes to hegemonic understanding of disability. As Oliver and Barnes argue:

the immediate post-war consensus on the need to ensure access to legal, civil, and social rights for all ... has gradually given way to the monetarist doctrines of the neoconservatives or New Right ... [S]tate-sponsored welfare systems are said to have discouraged individualism, self-reliance, voluntary action and private initiatives. (2012, p. 122)

During the final months of the New Labour government, the biopsychosocial model was developed by academics (Gordon Waddell and Mansell Aylward (2009)). They explain: 'People with common health problems ... bear personal responsibility for their actions: they must answer to whether their health condition is such that it would be unreasonable to expect them to seek or be available for work' (Waddell and Aylward, 2009, p. 6).

This statement bears resemblance to the vision that Blair set out in his lecture in 1999. Funding for Waddell and Aylward's work at the Centre for

Psychosocial and Disability Research at Cardiff University, was provided by Unum, a US insurance company which would play a key role in the forthcoming Welfare Reforms (Jolly, 2012) as will be discussed in the next chapter.

Conclusion

This chapter has discussed how the exceptions to the universal rights in the post-war consensus were extended and increased, particularly impacting disabled people in the asylum and immigration system. The New Labour government introduced new restrictions on people in the UK asylum and immigration system, with the overt focus not on ensuring universal rights but on distinguishing between people considered to be 'genuine' refugees and those considered to be 'abusive'. Prime Minister Tony Blair also set out his vision for welfare reform which would make entitlement to state support dependent on individual responsibility. This was promoted as if modernising, rather than breaking with the original principles of the welfare state and the NHS. Hegemonic changes were needed before his vision would become enshrined in legislation. Despite originating from the disabled people's movement, government adoption of goals for 'choice and control' and the subsequent reduction of state services formed part of an increasingly neoliberal focus on individual responsibility.

It would be unfair to suggest that either the post-war consensus or the New Labour government are responsible for subsequent disability or immigration policies. However, as the analysis in this chapter has argued, the maintenance of exceptions to universal rights, the promotion of individual responsibility and the justification for the reduction of state services are all core elements of the greater restrictions and inequalities that were to come.

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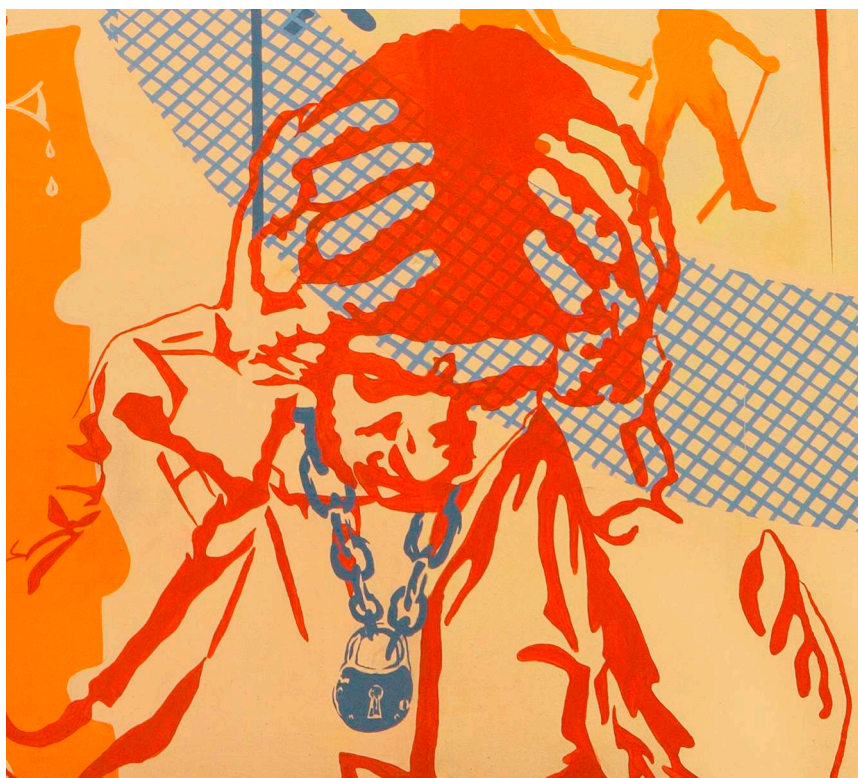


Figure 4 Four years before Kamil was fatally stabbed, he explained: 'my heart has been stabbed with a dagger. The Home Office did this. I am bleeding and no-one can stop it'. He was not making a prediction, he was describing what he felt was already happening.

3 Austerity, the hostile environment and individual blame

Attention now turns to explore how calls for individual responsibility promoted in the New Labour years laid the groundwork for the focus on individual blame which shaped subsequent governments. Increasingly punitive policies and practices were imposed on people in the asylum system and the wider population of disabled people during the coalition and Conservative Party governments.

The UN Convention on the Rights of Persons with Disabilities (2006) included highly laudable objectives: ‘The purpose of the present Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity’ (Article 1, 2006). Yet, the Welfare Reforms (2009, 2012) initiated in the final stage of the New Labour government, and developed by the Liberal Democrat and Conservative coalition, became central to the agenda of austerity. The reforms were such as to prompt an enquiry by the UN Committee under article 6 of the Optional Protocol to the Convention. The Committee concluded that ‘there is reliable evidence that the threshold of grave or systematic violations of the rights of persons with disabilities has been crossed’ (UN Committee on the Rights of Persons with Disabilities, 2016, p. 18).

In a manner reminiscent of the 1999 Immigration and Asylum Act as well as Blair’s vision for welfare reform set out in his Beveridge lecture (1999) the Welfare Reforms promoted efforts to distinguish those considered to be deserving from those who are not. Meanwhile, immigration legislation introduced by Home Secretary Theresa May as part of her goal to create a ‘hostile environment’, was complemented by expressions of ‘compassion’ towards selected people considered deserving. Analysis shows increasing convergence between the two policy areas, with little distinction between the main political parties in these respects.

Austerity politics to reduce the apparent burden on state services

The coalition government led by David Cameron (Conservative party) and Nick Clegg (Liberal Democrat) extended the focus on individual responsibility which had become increasingly dominant in the New Labour years. The 2008 financial crash towards the end of the New Labour period of office, could be considered

the ‘shock’ (Klein, 2007) that enabled the later coalition government to impose ‘neoliberal marketisation’ and ‘steep spending cuts’ (Glynos, Speed and West, 2014, p. 6). Austerity politics entrenched the break between human need and entitlement to support, along with the shift from collective to individual responsibility. Users of state services were presented as a burden on the wider population. Punitive measures and the conditionality of basic support were designed to reduce this apparent burden. The transfer of responsibility from the state to the individual was no longer presented as facilitating individual ‘choice and control’, but explicitly designed to reduce public expenditure.

White Paper ‘Universal Credit: welfare that works’ (2010)

The White Paper ‘Universal Credit: welfare that works’ (2010) which formed the basis for the Welfare Reform Act (2012) was introduced, as part of austerity measures (see, e.g., O’Hara, 2014). In a similar manner to the welfare vision set out in Blair’s Beveridge lecture (1999), the new White Paper presented the key problem as ‘welfare dependency’, with the solution being greater ‘personal responsibility’ (2010, p. 6). During a parliamentary debate regarding this legislation, Lord Boswell of Aynho warned of the detrimental impact of framing someone as an ‘architect of their own distress’ or as ‘morally unworthy’ (2012). In response, Lord Freud (2012) stressed that ‘we are trying to direct scarce resources, at a very difficult time, to the people who need them most’. He referenced the biopsychosocial model of disability (Waddell and Aylward, 2009), asserting the need for ‘personal effort’ to ‘overcome’ (sic) disability. There was a notable absence of the principles of collective responsibility on which the original social model had been based, or the notion that services should be provided ‘in place of fear’ (Bevan, 1952). The purpose of Welfare Reforms was explicitly not to address the disabling impact of preventing people from accessing services and support. Instead, the purpose was to reduce the apparent burden on state spending.

Repeated government reference to financial crisis directed public resentment at users of state support. Disabled people were presented as a burden, or, taking a Lacanian psychoanalytic perspective, as stealing the ‘enjoyment’ (Stavrakakis, 2005; Glynos and Stavrakakis, 2008) of the legitimate majority. Public outrage and notions of injustice were focused on the idea that users of state services might be enjoying themselves ‘at our expense’ (Glynos, Klimecki and Willmott, 2012, p. 306). Nonetheless, the focus was not entirely punitive. A core rationale for Welfare Reform was to distinguish between those who are worthy of charitable support and those who should take individual responsibility. Prime Minister Cameron (2015a) promised that the reforms would ‘protect the most vulnerable – including the most disabled who cannot work, because that’s the sign of the compassionate country I believe in’.

The focus on ‘compassion’ for some, became counterposed by labelling others as ‘scroungers’, or a burden on the state (Garthwaite, 2011; Patrick, 2016). Negative constructions of dependency were evoked to legitimise the end of a

‘something for nothing culture’ (Patrick, 2012, p. 309). The loss of disabled people’s lives resulting from these reforms (Ryan, 2019) might have been dismissed were it not for resistance from Disabled People’s Organisations.

Investigation by the UN Committee for the Rights of Persons with Disabilities 2016

The removal of services and support took place despite UK obligations enshrined in the UN Convention on the Rights of Persons with Disabilities (UNCRPD). Complaints by Disabled People’s Organisations, particularly regarding the disproportionate impact of Welfare Reforms and austerity policy resulted in an enquiry by the UN Committee on the Rights of Persons with Disabilities (2016). The committee reported that the extent of cuts to services and support created ‘grave and systematic’ abuse of disabled people’s rights.

It may have appeared in the past, that at least some of the barriers faced by disabled people in the United Kingdom result from disregard or oversight rather than from deliberate malice. Nonetheless, as the UN Committee (2016, paragraph 83) concluded, the disproportionate impact of welfare reforms on disabled people was deliberate. The government response referred to being ‘proud of its record’ (2017, p. 3) regarding provision for disabled people. Reference to pride may have been intended as a defence, but pride is associated with generosity and charitable gifts, rather than fulfilling the obligations enshrined in the Convention. Furthermore, the lack of policy change after the UN enquiry is indicative of both lack of concern from the UK government and lack of enforcement capacity from the United Nations.

Despite the increasing restrictions of the asylum and immigration system, the UN enquiry made no reference to the impact of restrictions preventing disabled people in the asylum system from accessing services and support. The omission may be caused by the government’s reservation excluding immigration policy from its obligations under the UNCRPD. The government report to the United Nations does state that it ‘wants all *citizens* ... to have more control’ (2017, paragraph 24). The implication of this statement may be that *non-citizens* (disabled or not) are the ‘*other*’, whose existence is not worth consideration or who do not deserve control. Either way, this statement reinforces New Labour distinctions in the use of ‘control’ exerted *over* some people and *offered* to other people, as discussed in the previous chapter.

The absence of reference to immigration policy by the UN is particularly noteworthy considering that the enquiry took place at a time of new immigration policies (Immigration Act, 2014; 2016), which introduced ever greater restrictions on access to services and support. The impact of these would be increasingly disabling.

Creating a ‘hostile environment’

Restricted access to services and support has long been a central tool of asylum and immigration policy. The Immigration Acts 2014 and 2016 introduced new

restrictions on access to essential services, including housing, employment and banking. The Home Secretary Theresa May stated that the purpose was to build a sufficiently 'hostile environment' (Kirkup, 2012) as to deter 'illegal migrants' from coming to the United Kingdom and to encourage the departure of migrants already in the country. The restrictions would be enforced by making employers and service providers liable for ensuring that people without migration status would be denied their services. The result was to stitch: 'immigration checks into every element of people's lives ... a whole host of professionals ... were turned into border guards' (Goodfellow, 2019, p. 2).

These measures extended beyond people in the asylum system. The result was to create an environment in which suspicion must be focused on anyone perceived to potentially lack legal migration status (see, e.g., Steele et al., 2014; Hiam, Steele and McKee, 2018; Liberty, 2018). The racist consequences of this have been highlighted by many activists and scholars (Goodfellow, 2019; Social Scientists Against the Hostile Environment, 2020). In addition, as has been explained, preventing people from accessing services and support is actively disabling.

The hostile impact of the legislation is rationalised by being combined with initiatives to support selected people framed as worthy of compassion. The same year that Cameron (2015c) had justified the punitive impact of Welfare Reform with references to compassion and 'promises to protect the most vulnerable – including the most disabled', Theresa May (2015) stated similar commitment to combine 'work to control immigration' with support for 'the most vulnerable'. At the Conservative Party conference, she expressed a rallying cry: 'Let Britain stand up for the displaced, the persecuted and the oppressed. For the people who need our help and protection the most'. According to her, the immigration system is too often 'geared towards helping those most able to access it ... those who are young enough, fit enough, and have the resources to get to Britain. But that means support is too often denied to the most vulnerable'.

Initiatives that are targeted at those considered deserving are therefore presented as complementary, rather than alternatives, to the hostility of wider immigration policies. Alongside legislation designed to bring the 'hostile environment' into practice, were initiatives for people considered to be 'vulnerable' or 'at risk', the definitions of which include disabled people.

Euphemistic labels replace reference to disability

Instead of referring to people as disabled, or policy restrictions as disabling, the asylum and immigration sector adopts euphemistic references such as 'vulnerable' (Home Office, 2014; Shaw, 2016; Shaw, 2018; Home Office, 2019a, 2021a, b), facing 'exceptional' circumstances (Immigration and Asylum Act, 1999), being 'at risk' (Immigration Act, 2016; Guidance on adults at risk, 2018b; Neal, 2022) or having 'care needs' (Asylum seekers with care needs, 2018a). These euphemisms frame the problem as if located with individuals,

who are presented as if a distinct and insignificant minority. A disabled citizen who had a leading role in developing the UNCRPD, asked why the immigration sector invents new terms when the word ‘disabled’ already exists. The use of euphemisms obscures the relevance of the insights, achievements and potential solidarity from the disabled people’s movement. Neither the UNCRPD (2006) nor the UK Equality Act (2010) refers to people as ‘vulnerable’ or ‘at risk’. Such labels adopt what Amy Shuman and Carol Bohmer (2016, p. 21) refer to as ‘a discourse of rescue’, rather than rights, equality or justice. This reinforces the notion that disabled people in the asylum system are a distinct minority. Provision for selected individuals can therefore appear as if innovative acts of discretionary generosity. This obscures the disabling impact of wider policy and the scope for systemic change.

The Vulnerable Person’s Relocation Scheme

The Vulnerable Person’s Relocation Scheme (VPRS) was introduced as a new discrete scheme, specifically to provide support to selected individuals and their families fleeing conflict in Syria. It would provide ‘five years’ Humanitarian Protection with all the rights and benefits that go with that status, including access to public funds, access to the labour market and the possibility of family reunion’ (2014). Support would, however, diminish from the first year onwards, affirming it to be a temporary gift rather than a right or a response to human need.

Selection for the VPRS was based, not on the protection criteria of the 1951 Convention but on apparent vulnerability. Deputy Prime Minister Clegg (2014) explained that priority would go to ‘women and girls who have experienced, or are at risk of, sexual violence; the elderly; survivors of torture and individuals with disabilities’. According to a civil servant with managerial responsibility for the resettlement programme, the definition of ‘vulnerability’ was further extended to include children, LGBT and people with legal or physical protection needs. In the context of people fleeing conflict, such broad definition of ‘vulnerability’ may encompass more people than it excludes. The purpose may be more to enable discretionary selection of limited numbers of people rather than to clarify eligibility criteria.

Reference to categories of vulnerability may legitimise the small numbers of people accepted for resettlement relative to the response from other states. At first, no precise number of beneficiaries was provided, although Patrick Wintour (2014), writing for *The Guardian*, claimed that ‘coalition sources’ suggested it would be ‘no more than 500’. More than 18 months after the introduction of the VPRS, the drowned body of Alan Kurdi, a Kurdish toddler found on a Greek beach on 2 September 2015, ‘provoked a remarkable and transnationally articulated demand for responsibility’ (Perl and Strasser, 2018, p. 508). The scale of public pressure for action caused the hostility of wider immigration policy to be temporarily replaced with calls for generosity and compassion. In July 2015, before Kurdi’s death, Prime Minister David Cameron (2015a) referred to a

'swarm' of migrants wanting to come to Britain, suggesting the need for defensive measures. Less than six weeks later, after Kurdi's death, Cameron (2015b) referred to being 'moved by the heart-breaking images', and committed to increasing the resettlement of Syrian refugees to 20,000 (BBC, 2015). It is inconceivable that Cameron was unaware that countless migrants had died before, or would die after, this child. Yet, the image of a drowned toddler, followed by the surge of public pressure, resulted in a shift in focus to the need for generosity. Magdalena Hodalska (2018, p. 210), scholar of media representation, argues that the change in public response towards refugees stemmed from the visual similarity between the image of Kurdi and 'any other boy in Europe'. His body 'made the faraway conflict close and personal for the audience familiar with the images of boys dressed in T-shirts and shorts, but unfamiliar with the images of blood, debris, and shattered glass'.

The apparent familiarity meant this child could neither be dismissed as the 'other' nor perceived as a threat. Public response to the familiarity of this boy's body provoked such calls for change that it temporarily appeared as if a 'moment of politics' (Rancière, 1999, p. 11) might ensue. However, public pressure and cross-party support (Smith, Gower and Bardens, 2014) for a humanitarian response to people fleeing the Syrian conflict had to be combined with successive government pledges to defend against the apparent threat of migration.

The 1951 Convention contains no legal obligations towards people fleeing persecution towards foreign nationals in third countries before they arrive in the United Kingdom. The resettlement of selected 'vulnerable' people fleeing the Syrian conflict could therefore be framed as charitable generosity rather than the rights-based focus of the Convention. This discretionary approach was reinforced by repeated cross-party references to pride. Liberal Democrat leader Nick Clegg (2014) spoke of Britain's 'long and proud tradition of providing refuge at times of crisis'. Conservative Party Home Secretary Theresa May (2015) repeatedly referred to pride regarding support for Syrian refugees. Labour Party Shadow Home Secretary Yvette Cooper (2015) also referred to Britain's 'proud history', suggesting that denying support to refugees was not the 'British way'. There is little substantive basis for these cross-party assertions of pride. That year, protection status was granted to 17,900 people in the United Kingdom while Germany granted status to 148,200 people (Eurostat, 2016). The same year, Turkey, Pakistan and Lebanon were each hosting over a million refugees (UNHCR Global Trends in Forced Displacement, 2015). However, notions of pride are emotional and therefore unquantifiable. As Tyler (2013, p. 79) observes, 'one of the most powerful British national myths is that this state has an ancient and proud history of granting asylum to foreign nationals'. Reference to pride evokes patriotic notions of the superiority of a national populace, implicitly asserting that there is something special about 'us', as distinct from 'them'.

Pride relies on presenting support to refugees as acts of generosity, rather than as legal obligations. Like support for selected disabled people, discussed above, resettlement programmes that evoke notions of charitable generosity may provide

what a Lacanian psychoanalytic perspective (Stavrakakis, 2005) might consider ‘enjoyment’ or a ‘cathartic’ role (Betts and Collier, 2017, p. 74) for those contributing. In a parliamentary debate regarding Syrian resettlement, Helen Whately MP (2016) described Britain as having ‘a reputation as a compassionate country of opportunity ... Some have doubted us recently, but we should make that a reality for 20,000 Syrians’. Bekkers and Wiepking (2007, p. 32) argue that, *giving* can ‘alleviate feelings of guilt’. Support for selected Syrians therefore serves to enable ‘us’ to feel good about ourselves.

If provision of services is framed as charitable, then if beneficiaries appear to be enjoying themselves too much, it may be framed as at ‘our’ expense. When Syrian refugees expressed dissatisfaction with resettlement conditions on the Scottish island of Bute, this was reported in the *Daily Mail* (25 July 2016) as a sign of ingratitude. As Stavrakakis (2005, p. 77) explains ‘The Other is hated because he is fantasized as stealing our lost enjoyment’. If people are ungrateful, it prevents ‘us’ from enjoying our compassion and can therefore provoke anger. In a similar manner as representations of the problem to be addressed by welfare reforms, the problem to be addressed by the VPRS became to identify people who are appreciative, vulnerable and therefore deserving, as opposed to those who are unappreciative and therefore undeserving.

The apparent generosity of the VPRS was always explicitly limited to selected individuals, thereby assuming that ‘our generosity must have its limits’ (Mondon and Winter, 2020, p. 51). As Heidi Armbruster (2019, p. 2680) argues, the project was based on ‘exceptionalising a small group of Syrians as legitimate targets for compassion and constructing compassion itself as a rationed resource’. Acts of generosity towards selected individuals affirm ‘our’ goodness, and therefore the fantasy that ‘our’ relative privilege is deserved and to be defended from those who are undeserving. The apparent generosity of the VPRS therefore complemented rather than contested the hostility of wider asylum and immigration policy.

The disabling impact of immigration detention

In addition to resettlement initiatives targeted at ‘vulnerable’ people, references to disability (albeit with the use of euphemisms) are most apparent in relation to immigration detention or the work of what are officially known as ‘immigration removal centres’. Alongside goals to create a ‘hostile environment’, Home Secretary Theresa May commissioned a report by Stephen Shaw (2016), former Prisons and Probation Ombudsman for England and Wales, into the ‘Welfare in Detention of Vulnerable Persons’. May asserted that the ‘wellbeing of those in our care is always a high priority’. The Shaw report calls for action to reduce the negative impact of detention on ‘vulnerable’ people. In a suggestion of awareness of distinctions between the social and medical models of disability, the Shaw Report (2016, p. 10) notes that ‘vulnerability is intrinsic to the very fact of detention’. Similarly, a later review by the Independent Chief Inspector of Borders and Immigration (ICIBI, 2019, p. 18) notes that ‘immigration control

measures which deny access to services, can increase vulnerability’ with an ‘emerging picture of negative outcomes linked to our system’. Nonetheless, having acknowledged the impact of systemic barriers, both Shaw (2016) and subsequent reviews by the ICIBI (Bolt, 2019; Neal, 2021) seek to identify and mitigate the impact on people labelled as ‘vulnerable’ or ‘at risk’ rather than to remove the barriers. This approach thereby promotes a never-ending quest to identify people affected by immigration control measures which ‘increase vulnerability’, without contesting the existence of these measures.

In principle, detention policy includes provision to avoid a detained person’s health being negatively affected. Rule 35 of Detention Centre Rules (Home Office, 2019b) states that a doctor must assess whether the health of detainees ‘is likely to be injuriously affected by continued detention’. In practice, the director of a major refugee support organisation described this rule to be ‘cursory at best. Happens at 2, 3 o’clock in the morning, probably by a load of whiskied doctors’.

The medical assessment focuses on assessing whether a person has *pre-existing* medical conditions which are likely to be exacerbated by detention, rather than on the disabling impact of detention for everyone. An ICIBI review (2022, p. 52) notes that prior to a deportation flight, the same detainees may attend healthcare ‘several times in one day’ with symptoms associated with stress. The review (2022, p. 8) concludes that detainees claim vulnerability ‘as a method of getting out of detention’. Despite recognising the damaging impact of detention and deportation, the problem is framed as if located with affected individuals.

Initiatives to identify and provide for selected ‘vulnerable’ people, might be considered a welcome, albeit insufficient response to the restrictions of asylum and immigration policy. In practice, despite existing measures to identify people, disability does not, for example, prevent a person from being detained. Among the people who have contributed to this book: Luis, a blind man was detained without any adjustments for his needs; Robert, a young man with haemophilia was denied access to medication until the uncontrolled bleeding was such that he needed emergency hospital treatment; and Ana, an older disabled woman spoke of the apparently arbitrary cruelty of detention. To argue that the solution is to improve implementation of Home Office initiatives to identify vulnerable people would be to assume that the purpose of these initiatives is to address people’s struggles. Instead, the objective is made explicit by the Independent Chief Inspector of Borders and Immigration (ICIBI): ‘identifying the needs of vulnerable individuals is a test not just of its competence but also of its capacity for compassion, both of which have been questioned in recent months’ (Bolt, 2019, p. 8).

The motivation is to *enhance* the credibility of wider immigration policy. Support provided to selected individuals with no automatic entitlement to support in the United Kingdom, or as Schinkel (2022) puts it, people who ‘might not have been here’, may be presented as an indicator of Britain’s generosity. This may be used to affirm what Bolt refers to as questions of ‘competence’ and ‘compassion’ but cannot address the disabling impact of restricting access to services and support.

The disabling impact of detention is amplified by the profitable dimension. Immigration Removal Centres are run by private contractors (Welch and Schuster, 2005; Bosworth, 2008). During a power cut at Harmondsworth detention centre, people with serious medical conditions were reportedly denied access to medication (Taylor, 2023c). The management of this detention centre is outsourced to Mitie, which, like any other private contractor, is answerable to shareholders. Without strong external regulation, human well-being, including that of people considered ‘vulnerable’ or ‘at risk’, remains marginal to the task of profit maximisation and the associated need for control *over* detainees.

Distinctions of entitlement

It is important to reiterate that immigration policy has always been designed to make distinctions between different people’s entitlement. The 1951 Convention was not designed to provide for people based on need but on agreed criteria for refugee status. Distinctions between those people framed as deserving of hostility and those considered deserving of compassion, create what Schrover and Schinkel (2013, p. 1126) describe as a binary portrayal of immigrants as ‘being a risk ... and being at risk’. This distinction reflects the inherent contradictions of liberal democracy. If there is a territorial or social border at which responsibility or obligation to provide support stops, then there is a need to police that border. During a federal election campaign speech, then Australian Prime Minister John Howard (2001) spoke of his country’s ‘fundamental right to control its border ... We are a generous and open-hearted people ... We will decide who comes and in what circumstances they come’. More than a decade later, UK Deputy Prime Minister Nick Clegg (2014) echoed this complementary discourse of generosity and defence, describing the United Kingdom as one of the most ‘open-hearted countries in the world’. The nebulous yet normative concept of being ‘open-hearted’ further asserts notions of ‘us’ as better than ‘them’, which, as Bridget Anderson (2013) argues, has been a constant thread of migration policy. The hostility imposed on people considered to be undeserving is unchallenged by selecting individuals considered to be exceptionally ‘vulnerable’ or ‘at risk’.

Expanding the depth and breadth of the hostile environment

In the decade after Theresa May’s introduction of policies explicitly designed to create a ‘hostile environment for illegal migration’ (Kirkup, 2012), government policies towards people who are disabled and/or seeking asylum became ever more hostile. Beyond the ongoing impact of restrictions which limit access to services and support, current practices include the imposition of more immediate and overt suffering. A report from the Independent Monitoring Board exposes how guards are instructed to remove prescription medication from people held in short-term holding facilities (Taylor, 2023b).

It is reported that this has resulted in people being deprived of medication to prevent seizures and blood clotting.

Meanwhile, a pilot project by the King's Arm project (2023) with support from the Home Office and UNHCR provided support to selected migrants considered vulnerable. People were provided with legal advice as well as help to access wider services, including health and social care, mental health support and community activities. One client is cited as having described being in the:

depths of hopelessness and in despair, I did not know who to turn to for help. Once I met you, you took away all that fear, you gave a sense of security and safety ... no one had bothered to really listen to me, but with you I found you so accepted me and understood where I was coming from.

The UNHCR reported that the project was significantly cheaper and more humane than detention. Yet, the Home Office stopped the funding. Government policies towards people in the asylum system are clearly not intended to provide a 'sense of security and safety'. The disabling impact of asylum restrictions is not the result of oversight but of deliberate policy and practice.

The explicit reference to the hostile environment may have changed, but subsequent legislation, including the Illegal Migration Act (2023) take the restrictions to a new level of hostility, with plans to detain people before an asylum claim has been considered. Prior to this legislation, the distinction between detention and initial accommodation centres had already become increasingly blurred. A backlog in assessing asylum claims resulted in people being housed for extended periods in initial accommodation such as hotels. The expense of this is used to justify use of cheaper accommodation including army barracks and a converted barge, known as the 'Bibby Stockholm'.

If a person is legally recognised as needing 'reasonable adjustments' under the Equality Act (2010), then they must be accommodated in a place where such adjustments are possible. Exemption from being accommodated on the Bibby Stockholm barge, for example, may rely on evidence of impairments 62 *Austerity, the hostile environment and individual blame* or chronic health conditions which make the barge inaccessible. However, avoidance of such accommodation does not necessarily result in preferable alternatives. In 2022, Clearsprings Readyhomes began to use a former care home in Essex as initial accommodation for disabled people who had recently arrived in the United Kingdom. By summer 2023, the 55 people housed there include people who are paraplegic, non-verbal and with significant health conditions. The site is physically accessible, but care equipment, including grab rails were removed prior to people arriving. The accommodation is staffed by security rather than care workers or health professionals. People are theoretically not detained here, and yet for those needing mobility aids, assistance or accessible transport, there is limited capacity to move around or leave the accommodation. Lack of Home Office decision-making results in people remaining in 'initial' and theoretically short-term accommodation, such as this former care home, for extended periods.

The local authority should provide a Care Act assessment but prolonged housing in initial accommodation creates ambiguity as to responsibility. After significant media attention (Pettifer, 2023; Taylor, 2023a), and threats of legal action, care assessments were provided; however, these were carried out in what appears to be a perfunctory manner without ensuring that access needs were met or providing independent advocates. Access to social care will be discussed in greater depth in Chapter 5. The impact of inadequate assessments and services in this former care home is that some people are denied basic support to enable them to move around, access appropriate food and meet essential human needs. These policies highlight two apparently distinct elements of policy towards disabled people which will now be considered.

The paradoxical privilege of disadvantage

At times, evidence of disability (or whichever euphemistic label is used) may be a means of escaping some of the worst elements of asylum and immigration policy. An immigration barrister explained, ‘if an asylum seeker is not disabled when they arrive it would be helpful if they become disabled quick’. According to this person, survival may depend on people ‘clinging to their symptoms’ and may therefore be further disabling. This perspective risks presenting ‘symptoms’ as optional and therefore reinforcing the culture of disbelief in the needs of disabled people in and out of the asylum system. In principle, provision for disabled people reduces the barriers that are faced rather than being simply additional to what non-disabled people receive. Nonetheless, as asylum and immigration policy becomes ever more hostile, if entitlement to support is dependent on being considered exceptionally ‘vulnerable’ or ‘at risk’, then it is necessary to foreground evidence of extreme suffering. This distinction is not exclusive to the United Kingdom. As Ticktin (2011, p. 4) observes regarding French immigration policy: ‘sick bodies are given recognition by the state ... but only as long as they remain sick; this gives immigrants’ rights, not as equal citizens, but only insofar as they are – and remain – disabled’.

Entitlement to support and therefore survival may depend on embodiment of what Ticktin refers to as ‘this paradoxically privileged position as the most disenfranchised, the most wretched of the earth, the most worthy of care’ (2011, p. 11). The exceptionalising of particular individuals, framed as ‘the most wretched of the earth’ may be a means to reduce the impact of restrictions on selected people but does not alter the restrictions preventing others from accessing essential needs.

In the United Kingdom, since the introduction of the forced dispersal of people in the asylum system in 1999, people subject to asylum controls have been housed in areas of low-cost accommodation. Like immigration detention, the provision of such housing is a highly profitable business, contracted out by the Home Office to private contractors such as Clearsprings Ready Homes, Serco limited and Mears limited (Asylum Matters, 2019). The housing contracts include the need to provide for people with ‘specific needs’ or people ‘at risk’.

This is defined as including ‘mental health conditions’ and ‘physical disability’. Yet, as stated in a report by Doctors of the World and researchers at the University of Birmingham (2022): ‘Accommodation conditions were not meeting basic human standards, which contributed to poor health. This included poor food, access to basic sanitary products, inability to store medication or have professionals visit to provide care’.

If a person is legally recognised as needing ‘reasonable adjustments’ under the Equality Act (2010), then they must be accommodated in a place where such adjustments are possible. Exemption from being accommodated on the Bibby Stockholm barge, for example, may rely on evidence of impairments or chronic health conditions which make the barge inaccessible. However, the apparent advantage of avoiding such accommodation does not necessarily result in preferable alternatives.

In 2022, Clearsprings Readyhomes began to use a former care home in Essex as initial accommodation for disabled people who had recently arrived in the United Kingdom. By summer 2023, the 55 people housed there include people who are paraplegic, non-verbal and with significant health conditions. The site is physically accessible, but care equipment, including grab rails were removed prior to people arriving. The accommodation is staffed by security rather than care workers or health professionals. People are theoretically not detained here, and yet for those needing mobility aids, assistance or accessible transport, there is limited capacity to move around or leave the accommodation.

Lack of Home Office decision-making results in people remaining in ‘initial’ and theoretically short-term accommodation, such as this former care home, for extended periods. When people are in longer term accommodation the local authority should provide a Care Act assessment but the prolonged housing in initial accommodation creates ambiguity as to responsibility for care provision. After significant media attention (Pettifer, 2023; Taylor, 2023a), and threats of legal action, care assessments were provided; however, these were carried out in what appears to be a perfunctory manner without ensuring that access needs were met or providing independent advocates. Access to social care will be discussed in greater depth in Chapter 5. The impact of inadequate assessments and services in this former care home is that some people are denied basic support to enable them to move around, access appropriate food and meet essential human needs.

The apparent reduction in restrictions imposed on people in the asylum system who are framed as deserving is clearly selective and not substantive. Response to the COVID-19 pandemic has highlighted hegemonic disregard for the value of disabled people’s lives.

Disregard for the lives and deaths of disabled people in the COVID-19 pandemic

By the start of the COVID-19 pandemic in 2020, UK government policy and practice was firmly rooted in neoliberal values of individual responsibility. These values would be reinforced with lethal consequences. It was clear from

the start of the pandemic that disproportionate numbers of disabled and older people would be at risk of serious disease. The risks associated with having certain medical conditions (Harrison et al., 2020) are amplified for people living in communal settings, using social care services or without the capacity to isolate (Shakespeare, Ndagire and Seketi, 2021; Shakespeare et al., 2022). People in asylum accommodation were clearly among those at such risk.

In the initial period of lockdown, the scope for rapid and wide-reaching systemic change was shown. Mutual aid groups were established with particular focus on helping people to meet everyday needs. Despite people with mobility impairments and chronic health conditions having been repeatedly told in the past that this was impossible, online communication and remote access to public events rapidly became normalised. Emergency initiatives to provide accommodation for homeless people, including people without migration status reduced deaths among homeless people during this period (Lewer et al., 2020). These initial responses to the pandemic make clear that change is possible.

Despite the clear evidence that lives can be saved through taking collective action, these emergency measures were temporary. In the year after the first lockdown, journalist John Pring (2021), reported that there were at least 24 breaches of disabled people's rights. The transfer of people with COVID-19 from hospitals to care homes in 2020 caused the virus to spread particularly fast among older and disabled people. Family members of people who died as a result of this policy have taken legal action against the government (*R (Gardner and Harris) v Secretary of State for Health and Social Care and others*, 2022). When there was a sense that medical care was in short supply, 'Do Not Resuscitate' orders were imposed on many older and disabled people without their consent (Ryan, 2020; Thomas, 2020). Prime Minister Boris Johnson removed mandatory COVID precautions before any other country in Europe (Elgot and Sample, 2021), with the responsibility explicitly left to individuals. According to the Office for National Statistics, 60% of the people who died from COVID in the first two years of the pandemic had pre-existing conditions (2022). This data has not been used to assert the need for ongoing public health precautions, but instead, the narrative that 'only' people with pre-existing conditions are at risk of dying from COVID was widely used to justify others returning to pre-pandemic ways of living.

After, the initial period of lockdown, response to the pandemic can be seen as the antithesis of a social model approach. Disregard for collective responsibility to address inequalities and reduce threats to disabled people's lives has never been more apparent. As Clifford (Pring, 2021) states, 'Despite the hardships and tragedies of austerity and welfare reform, at no point in my lifetime has it been so clear ... how dispensable disabled people's lives are held to be'.

This is not unique to the United Kingdom. In a despairing blog post from the United States, disabled activist and author Mia Mingus (2022) writes:

We will not trade disabled deaths for abled life. We will not allow disabled people to be disposable or the necessary collateral damage for the

status quo. We will not look away from the mass illness and death that surrounds us or from a state machine that is more committed to churning out profit and privileged comfort with eugenic abandonment.

Yet that is exactly what has happened. Despite the proven impact of wearing masks to reduce the virus spread (Cheng, Lam and Leung, 2020), it rapidly became a hegemonic mark of ‘freedom’ (Kahn, 2022; Williams and Michie, 2022) to refuse masks and allow the virus to spread uncontrolled. Similarly, remote access to public events has been increasingly removed. The result is to exclude people concerned about the ongoing risk of COVID for themselves or others, as well as to reinstate the access barriers faced by people with mobility impairments and chronic illness prior to the pandemic. Lizzy Horn, a young person with ME expressed her frustrations at this situation with a haiku and image contributed to a painted mural in December 2021.

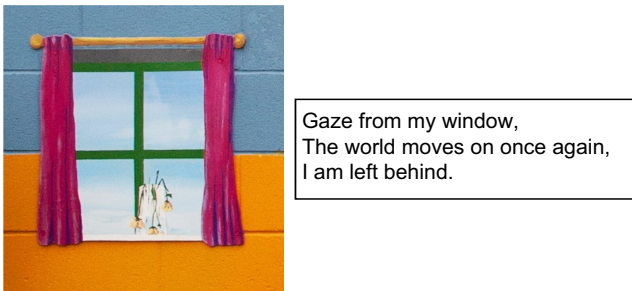


Figure 5 The world moves on.

The lack of ongoing precautions has reinforced the exclusion of disabled people from public space. The collective approach of the social model appears to have been removed from the hegemonic common sense of public interaction.

People from ethnic minorities have also been disproportionately affected by the pandemic. The BMJ (Wise, 2020) reported that ‘people from Asian and black ethnic backgrounds are at increased risk of dying from COVID-19’, with black men having ‘more than double the risk of dying compared with those with ethnicity recorded as white’. The unequal impact may be accounted for by racism, resulting in poverty, worse living conditions, wider health conditions and people working in sectors such as transport, healthcare and cleaning which did not allow for homeworking during the initial phase of the pandemic. People with insecure migration status are clearly disproportionately represented among both the racialised population and people living in particularly precarious circumstances (Bhopal, 2020). The Napier Barracks in Kent are among the accommodation provided by Clearsprings for people in the asylum system. In 2021, those accommodated there included people with serious health conditions such as leukaemia, tuberculosis, hepatitis C, liver or kidney disease and malnutrition, yet staff at the barracks were unaware who

was clinically vulnerable to the virus. Referring to notes from staff meetings, journalist Diane Taylor (2021) revealed that there were fears for people's lives when 197 (approximately half the people held there) became infected with COVID-19. At the peak of the virus outbreak in January 2021, meeting notes state that 'Nowhere on site is Covid secure'. The notes describe: 'a lot of sick people coughing and food containers lying around. Conditions are not good. Feeling on camp is tense. People are terrified in their beds'.

The rapid spread of the virus through these barracks as well as immigration removal centres led to appeals for detainees to be freed in the interests of public health (Bail for Immigration Detainees [BID], 2021). The lack of precautions against the virus highlighted and exacerbated inequalities associated with both disability and migration status.

Disregard for the value of the lives of people most at risk from COVID-19 may in part explain the observations tweeted by a palliative care doctor: 'In over 20 years in healthcare & being around the dying, I have never witnessed a death being minimised with "they were dying with something else anyway" prior to Covid ...' (Palliative Doc, 2023).

The disregard for the ongoing impact of the virus was affirmed when the director general of the WHO (2023) Dr Tedros declared the public health emergency to be over on 6 May 2023, despite also stating that:

Last week, COVID-19 claimed a life every three minutes – and that's just the deaths we know about ... As we speak, thousands of people around the world are fighting for their lives in intensive care units. And millions more continue to live with the debilitating effects of post-COVID-19 condition. This virus is here to stay. It is still killing, and it's still changing.

Contrary to media reports, he did not state the end of the need for precautions. Instead, he explicitly asserted that:

The worst thing any country could do now is to use this news as a reason to let down its guard, to dismantle the systems it has built, or to send the message to its people that COVID-19 is nothing to worry about.

The assumed insignificance of the lives that would continue to be lost may explain the contradictory messages inherent in declaring the end of the public health emergency while also affirming ongoing risk. Irrespective of the causes, this approach reinforces societal divisions whereby public health measures are removed while people concerned about the virus must rely on individual precautions including avoidance of indoor events.

The swift action at the beginning of the pandemic to shift to online events or to house homeless people (Kirby, 2020) highlights the contingency of current inequalities and the scope for future progress, yet across political parties at national and local levels, there have been concerted efforts to return to pre-pandemic agendas.

The convergence of disability and immigration policy

It is perhaps unsurprising that there are parallels of policy between and across government departments. Neoliberal goals of individual responsibility and private wealth are central to government policy. Furthermore, the responsibilities of Members of Parliament and civil servants routinely shift between departments. There are many examples of the increasing similarities between the policies imposed on people in the asylum system and the wider disabled population. The Immigration and Asylum Act (1999) removed entitlement to Disability Living Allowance, thereby removing recognition of the extra costs associated with disability; more than a decade later, the Welfare Reform Act (2012) began to remove this financial support from citizens. Similarly, in 1999, people seeking asylum began to be dispersed to areas of low-cost housing. The under-occupancy penalty, commonly known as the 'bedroom tax' (Clifford, 2020, p. 12) introduced in the Welfare Reform Act (2012) also resulted in people having to move to areas of low cost housing. More generally, the sanctions imposed on benefit-claimants (Ryan, 2019; Clifford, 2020) are not dissimilar to those that were tried and tested on people in the asylum system. In both situations, the potential for removal of all support creates an extrajudicial form of punishment. The necropolitics (Mbembe, 2019) of asylum policy discussed in Chapter 1, increasingly also applies to the impact of welfare sanctions. As journalist Frances Ryan (2019, p. 51) writes, 'Death has become part of Britain's benefit system, in which people who have life-threatening illnesses can be deemed "fit for work", resulting in loss of support and subsequent loss of lives'. Death is the most extreme impact of welfare reform, but as Clifford (2020, p. 150) writes: 'there are many other terrible impacts, including rising poverty, food-bank use, debt, survival crime and homelessness, in addition to widespread mental distress'.

The convergence of policies is also apparent across the mainstream political parties. At the Conservative Party conference in October 2022, Home Secretary Suella Braverman's spoke of her 'dream': 'I would love to be having a front page of *The Telegraph* with a plane taking off to Rwanda, that's my dream ... [Starting by Christmas] would be amazing' (Dearden, 2022).

In an interview for LBC (2022b), reporter Iain Dale, offered Shadow Home Secretary Yvette Cooper 'an opportunity to create a real dividing line between you and Suella Braverman ... what do you dream about?'. Cooper responded that: 'I dream about getting police back on the streets'. This response was particularly significant as it came at a time of public unrest in response to new proposed police powers (Vickers, 2021) in the wake of the murder of Sarah Everard by a police officer, combined with growing awareness of racism and misogyny in the police force (Smoke, 2022). The 'dreams' of the home secretary and the shadow home secretary, epitomise a broad cross-party consensus. This was further confirmed by Keir Starmer (LBC, 2022a), leader of the Labour Party who explicitly stated that there is 'not a great deal between the two parties on immigration'. Neither party promotes notions that support should be provided on the basis of equity or

common humanity. Instead, both major parties focus on individual responsibility, with the blame for societal problems directed at people who are already marginalised and facing greatest restrictions in their lives.

Beyond the level of official policies, there is also convergence in the wider representation of people in the two ostensibly distinct sectors. The cost of services for disabled people and for people seeking sanctuary in the United Kingdom is increasingly framed as a burden on public expenditure. On 25 May 2023, Channel 5's Jeremy Vine Show tweeted that: 'Nearly four million people in the UK are being supported by the state ... because they've been deemed too sick to work. Is it wrong for taxpayers to fund them indefinitely?'

Political discourse is amplified by such mainstream TV personalities encouraging the public to direct their anger not at politicians but at users of the welfare state. The convergence of key elements of policy affecting people in the asylum system and a wider population of disabled people prompted Ryan (2018) among others, to refer to disabled people as also living in a 'hostile environment'.

Scope for convergence of resistance

The convergence of policies restricting the entitlements of disabled and asylum-seeking populations is not to suggest an end point. Changing representation of disability in recent decades highlights how policy and practice can and do change. The increasing convergence in the restrictions imposed on the overlapping populations of disabled people and people subject to asylum controls might have been expected to bring together resistance. Yet the segregation of resistance to the restrictions imposed on these ostensibly distinct populations continues in the United Kingdom and beyond.

There has been greater resistance to the removal of support from disabled citizens, than there was to removing access to services from people without migration status. Resistance to Welfare Reforms and austerity politics was led by an alliance of Disabled People's Organisations: 'the Hardest Hit' (2011). The name of this alliance highlights the disproportionate impact of these Welfare Reforms (Roulstone, 2015; Ryan, 2019) on disabled people, but also indicates lack of awareness that people in the asylum system had already lost entitlement to access the welfare state more than a decade earlier.

The social model of disability highlights the disabling impact of preventing access to services and support. If this approach is extended it could help focus resistance on the disabling impact of restrictions that are deliberately imposed on people in the asylum system. The next chapters explore how greater solidarity and alternative approaches could be developed through greater convergence of resistance.

Conclusion

Policy analysis shows that many restrictions that were initially imposed on people seeking asylum have been gradually extended to affect a wider

population, particularly disabled people. Welfare reforms and immigration policy are shaped by increasingly similar goals including an overt shift from the notion that human need should be the primary determinant of entitlement to support and instead to promote neoliberal focus on individual responsibility which has, in turn, become the discourse of individual blame. The few initiatives that exist in relation to the intersectional needs of disabled people in the asylum system, adopt euphemistic labels that avoid reference to disability and therefore also obscure commonalities with the disabled people's movement. These approaches fail to acknowledge or contest the disabling impact of systematic restrictions imposed on people in the asylum system.

Just as government policy has extended insights from one sector to another, the sharing of insights and experiences between sectors could help to build solidarity and focus on creating greater collective resistance. The next chapter turns to explore barriers to building such resistance, particularly, the impact of increasingly compromised distinctions between those implementing and resisting government policy.

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Figure 6 'Only one person came to see me when I heard my brother was killed. I bleeding inside. I couldn't talk. I needed people to listen. I felt my insides going into a small hole. I needed a place to forget my pain'.

4 Implementing or resisting government policy

The previous two chapters analysed the development of current policy in relation to immigration, disability and the intersection. The convergence of government policies may make alternatives appear impossible. It is essential to understand that all policies and practices are always contingent but that when inequalities of assumed human entitlement become hegemonic, it can appear as if the most that can be achieved is minor adjustments as to who is considered worthy of support. As Jason Glynos and David Howarth (2007, p. 111) ask: ‘to what extent do subjects engage authentically with the radical contingency of social relations ... or to what extent are they complicit in concealing it?’

The Home Office exists to implement government policy, therefore it is perhaps inevitable that their initiatives focus on improving the efficiency, perceived credibility or ‘policing’ (Rancière, 1999) of the asylum system. But government policy is shaped by the work of wider organisations. Both asylum policy and welfare reform include a transfer of responsibility from the state to the voluntary sector. This chapter turns to consider the roles, responsibilities and limitations of different contributors to the asylum and immigration sector, including the work of voluntary sector organisations, legal representation, informal networks of solidarity and local community initiatives. The implementation of the ‘hostile environment’ may take place through a series of seemingly banal administrative, technical or even well-intentioned actions, rather than exclusively through hostile intent. As Ralph Grillo points out: ‘Sometimes the governing paradigms which have structured all our lives are so powerful that we can think we are doing progressive work when in fact we are reinforcing the paradigms’ (Grillo, 1995, p. 16).

This chapter explores distinctions between implementing and resisting government policy. It is, however, important to note that there may be different elements of any person’s contributions and that distinctions between people in different sectors are not, and never have been, absolute. All may have a role in ‘policing’ or in disrupting inequality.

Responsibility for current inequalities

Few people appear to perceive themselves as responsible for intersectional restrictions, yet the distinctions of entitlement underpinning current Home Office initiatives, are reinforced by people with diverse subject positions. As Goodfellow (2019, p. 37) explains, ‘even some parts of the immigration sector have helped sustain a “hierarchy of migrants”’. There are not binary distinctions between what Meister (2011, p. 27) refers to as ‘a narrow class of victims (those who suffered physical torment) and a narrow class of perpetrators (the active tormentors)’. The purpose of Home Office initiatives is to implement government policy. It is not, and will never be, to challenge the disabling restrictions of asylum policy. Nonetheless, senior Home Office employees complained in a meeting about being fed-up with being criticised by the voluntary sector. One employee described the motivation to do ‘the right thing’, while another asserted that, ‘It’s about working together to make the world a better place’. This perception can be maintained if the asylum system itself is assumed to be neutral or intractable. With this understanding, anything provided can be understood as if an act of generosity.

The perceived impossibility of addressing causal problems appears to extend across people with different roles and responsibilities. With faltering language, as if aware that the perceived choices are unappealing, a Home Office employee described the inevitable consequences of ‘immigration control’:

there will be people who get decisions ... that aren’t the decisions that they want ... we obviously have got ... safeguarding and vulnerability responsibilities as people go through the system, but ... if you haven’t been granted, how do we ensure that there is, you know, I guess, that the options around supported return ...

This person locates the problem with asylum decisions yet frames these as if intractable. His colleague, expressed similar fatalistic assumptions, arguing that beyond asylum decision-making, the Home Office has few powers ‘when it comes to vulnerabilities. The power is really to recognise and refer’. This fatalism is associated with reliance on wider services:

we’re so dependent on whatever systems deal with those vulnerabilities, whether it’s mental health, or physical disabilities ... If those systems are stressed ... it makes liaising with those providers and trying to get a service for a particular person ... that much harder.

He continued that ‘in a way, we’re no different than another member of the public who’s trying to get service for their own family member’. To liken a core government agency to a ‘member of the public’ suggests denial of the existence and consequences of power inequalities. It is disingenuous for the Home Office to blame wider services, when the Home Office is responsible for

providing accommodation and support for people seeking asylum, irrespective of whether this responsibility is outsourced to external contractors. Only if a person is found eligible for Community Care (Home Office, 2018) does responsibility shift to the local authority.

It is not only Home Office staff who focus on the impact of wider service cuts. In a group of voluntary sector staff and activists working with refugees, Sylvia described the impact of cuts resulting in people arriving in the UK ‘coming onto a sinking raft’. If the problem is perceived as stemming from wider service cuts, then responsibility extends beyond issues of asylum and immigration. This awareness appears to be used to provide evidence of the perceived impossibility of change but could also increase motivation to build collaborative resistance.

The ‘banality of evil’

People responsible for implementing government policy may perceive themselves as impotent, neutral, or even as seeking to ensure that those with entitlement are able to meet their needs. As Arendt (1964) argues, the implementation of government policies relies on multiple seemingly banal acts. When observing the lack of remorse shown by Eichmann for his role in Nazi atrocities, Arendt (1964) referred to the ‘banality of evil’, concluding that he perceived his role as administrative rather than malicious. Responding to Arendt’s analysis, Richard Bernstein (2000, p. 220) argues that Eichmann ‘was motivated by the most mundane and petty considerations of advancing his career, pleasing his superiors, demonstrating that he could do his job well’. At the Eichmann trial, Arendt made a distinction between the doer and the deed: ‘the deeds were monstrous, but the doer – at least the very effective one now on trial – was quite ordinary, commonplace, and neither demonic nor monstrous’ (Arendt and Kroh, 1964, p. 4). Elaborating on Arendt’s argument, Phil Cole observes that ‘what is most terrifying and indescribable about these people is not that they are monsters, but that they are human ... one aspect of the banality of evil is that those who perform it are staggeringly, disturbingly normal’ (2006, p. 199).

He relates Arendt’s work to the UK asylum system, warning that to make the humanity of certain people superfluous and ‘to demonise others is to fail to learn the lessons of history’ (2006, pp. 208–209). Arendt’s observations bring useful insights to the implementation of current asylum or welfare reform policy. The harmful effects of the UK detention system are well documented. Yet, for example, the Shaw report (2016), does not call to end detention, but for ‘vulnerable persons’ to be spared the worst effects. It is a different magnitude, however, in principle, it is not unlike Eichmann’s efforts to reduce numbers of people in railway carriages. The focus is on being somewhat less bad, rather than contesting systemic injustice.

The asylum system is composed of many ostensibly banal acts, in addition to the more overtly violent acts associated with detention or deportation, for example. It was a hospital administrator who checked Ana’s migration

status, resulting in her operation being cancelled, exacerbating her physical pain, mental distress and capacity to meet human needs. The administrator was carrying out a banal task without overt violence and quite probably without malicious intent, but the impact is unaltered by the motivation. The appearance of banal bureaucratic decision-making, according to Cole (2006, p. 200), ‘enabled Eichmann to make decisions about the fate of millions, and yet be at a distance from their fate’. If current inequalities result from human actions, then, however mundane, and apparently innocent each person may perceive their role, the result is to administer injustice.

The intersectional injustices experienced by disabled people seeking asylum result from the restrictions and inequalities of policy and practice. Nonetheless, it appears rare for people to perceive themselves as in any way to blame for injustices, other than as the result of possible oversight. Instead, there is widespread blame of those in other sectors, with the implication that if ‘they’ are the problem, then ‘we’ are relieved of guilt. The notion of evil, whether banal or otherwise, attributes blame to others and avoids addressing systemic inequalities. As Cole (2006, p. 6) writes, an ‘attraction of the idea of evil is that it can fill that hole’. To focus efforts on identifying people considered deserving, or worthy of compassion, may be framed as a pragmatic administrative decision or even as if a progressive alternative to the wider hostile environment. But such initiatives fail to address the increasingly hostile and disabling impact of asylum restrictions. If the causes of intersectional injustice are systemic, then systemic solutions are needed.

The technical task of intersectional initiatives

The solution to the intersectional struggles of disabled people in the asylum system is sometimes presented as if an issue of well-intentioned technical expertise rather than political choice. One Home Office employee described investigating provision for disabled people in the asylum process, as ‘an eye-opener’ and called for better availability of mobility aids and accessible accommodation. Similarly, when examples of the restrictions faced by disabled people seeking asylum were conveyed to a senior member of a Labour controlled local authority, her response was that the solutions are ‘common-sense’, and that, as she is a ‘can-do’ person, she would ensure that appropriate action is taken.

Identifying people in need of ‘safeguarding’ is often referred to as if central to the technical task. A local authority director of social care explained that he would not attend a meeting to discuss social care for people in the asylum system but instead advised by email (November 2018): ‘We do take this issue very seriously of course and would suggest an approach to the Adult Safeguarding Board’.

By representing the task as an issue of identifying individuals in need of safeguarding, the assumed goal is to reduce immediate risk to life rather than

to address the struggles resulting from disabling restrictions and inequalities. After his asylum claim was refused, Ali attempted to take his own life. If he had been labelled as ‘at risk’ in advance, it may be that ‘safeguarding’ efforts would have prevented his actions, but ‘safeguarding’ would not have addressed the cause of despair.

The cause of need is more significant than the need itself

The ambiguous distinctions between the implementation and resistance to asylum policy is highlighted by response to torture. The asylum system relies on evidence of persecution, therefore proof of having been tortured is of central importance in determining a person’s right to support. As anthropologist Tobias Kelly (2012, p. 754) argues, ‘It is not the quality, or nature, of the pain that singles out torture survivors, but the specific cause of their distress’. People with similar needs that stem from other causes may be denied support. Evidence of torture is therefore associated with the paradoxical position of being perceived as among ‘the most wretched’ and therefore ‘the most worthy of care’ (Ticktin, 2011, p. 11) as discussed in the previous chapter. When eligibility to support is determined by factors beyond human need, then time and resources becomes diverted to assessing entitlement, rather than addressing the need. Visible scars provide what Fassin and d’Halluin describe as ‘the tenuous thread on which hangs the entire existence – both physical and political – of the asylum seeker’ (2005, p. 606). Scars may provide evidence of previous injustice and therefore the legal basis of an asylum claim but are not necessarily even indicative of current needs.

If access to essential services relies on such evidence, people seeking asylum may have to endure the retraumatising effect of disclosing experiences of torture. Capacity to speak about traumatic experiences may depend on the ongoing psychological impact (Basoglu et al., 2001). In her experience of supporting people, Elena explained how some people who have gone through:

unspeakable things ... they won’t say them because it’s so difficult to say them. So there’s also a totally, and completely, hidden cohort of people ... that has gone through something like that and never spoken of it. And only when you spend loads of time with people ... then finally you can realise. And by that point the Home Office is like, well, you’re obviously lying because why didn’t you tell us about your sexual abuse earlier?

The barriers to acquiring evidence of torture are sometimes acknowledged by Home Office employees. During a discussion group, Patricia explained:

someone with PTSD for example, it’s well known that people won’t disclose that until they feel safe, so actually it might not even come out at all during the whole asylum process ... what we have to do is ensure that

staff have got the right level of awareness and training to spot the signs and then to know what to do about it.

According to Carlos, who works in the voluntary sector, specifically supporting survivors of torture, sometimes people ‘may not be aware that what’s happened to them is torture ... and it may not be something that people ask them about in ways that facilitate disclosure’. UK medics may be ill-equipped to recognise or address the symptoms. Rosa, a torture survivor went to the doctor with knee problems resulting from having been beaten for 40 days. The doctor responded with dietary advice and referral to physiotherapy. Such response may be well-intentioned, yet it neither addresses the need, nor facilitates further disclosure.

Initiatives to identify and support people to disclose experience of torture may enable affected people to access support. However, such initiatives also risk reinforcing the disconnection between need and entitlement to support, while also legitimising the denial of support to people whose needs stem from other causes. If some people’s needs are not associated with entitlement to support, their lives are assumed to have lesser value or to be dispensable. Securing evidence of previous suffering does not acknowledge or address the disabling impact of asylum restrictions. Such initiatives may be essential for those who gain access to support but contribute to implementation of distinctions of entitlement rather than building resistance to asylum policy.

Different roles and responsibilities in the resistance or implementation of government policy

In the context of ever greater restrictions and the urgency of people’s struggles it is perhaps understandable if the focus for action is on providing immediate relief. It is important to understand the contradictions and restrictions faced by potential allies before considering how more effective resistance might be developed.

The contributions and limitations of the asylum voluntary sector

There are a wide range of asylum voluntary sector organisations whose roles include service provision, campaigning and peer support. In order to understand how a broader movement of solidarity might be developed, the contributions and limitations of this sector must be recognised.

It should be evident that the asylum voluntary sector and Disabled People’s Organisations are not parallel entities. The disabled people’s movement makes a distinction in the roles and legitimacy of organisations *of* and organisations *for* disabled people. The latter are sometimes accused of ‘disability corporatism’ (Oliver and Barnes, 2012). In recent years, there has undoubtedly been increased commitment in the asylum voluntary sector to ensuring central roles for people with lived experience, but it is essential to consider who or what determines the organisational agenda.

In the context of the immediacy of struggles for survival, the value of voluntary sector support cannot be underestimated. Organisations may support people to meet their physical and emotional needs, including food, shelter, advice and social contact. Whether or not people are disabled, access to support frequently requires focussed advocacy. Elena, a committed activist and voluntary sector employee explained that an asylum seeker with significant health issues eventually got a bus pass, but that he:

didn't just get one because the refugee sector people wrote a letter ... he needed some posh medic person to write for him to get what he needed. And sometimes the posh medic is needed rather than the GP.

Similarly, Rita, a volunteer advice worker, recalled the barriers to getting a bus pass for disabled people in the asylum system. She explained that she had never been successful: 'you don't get one through being an asylum seeker. You can request one ... but the criteria are high'.

If getting a bus pass depends on framing individuals as exceptionally deserving, then that is what must be done. The risk in focussing on support for individuals who are considered deserving is, however, that it does not contest the existence of deliberate restrictions or the notion that *other* people are undeserving.

The voluntary asylum sector is characterised by immense commitment of employees and volunteers. As Goodfellow (2019) argues, the hostile environment not only affects migrants but also those that support migrants, such that few people can continue this work for long periods. Similarly, Zoe Gardner, tweeted regarding work in the voluntary asylum sector: 'People always tell me to keep hope ... As if anyone in this line of work has had hope for a decade? Working without hope because we must & if we didn't it would be so much worse' (19 May 2020).

The impact of this becomes more apparent when contrasted with the response from others. Natalya, a voluntary sector employee, who is herself disabled, expressed surprise at people's shock when first learning about the experiences of disabled people seeking asylum. She explained that 'everything we do with the Home Office is inhumane, we just get used to it. We constantly have to accept systematic abuse. I can't campaign because all my time is spent trying to get people's needs met'.

The limitations of the asylum voluntary sector must be acknowledged while also recognising the value, motivation and relentless pressure that staff and volunteers are under.

Organisations are inevitably limited by their funding. It is for this reason that David Harvey (2010, pp. 253–254) argues that 'revolutionary change by NGO is impossible. They are too constrained by the political and policy stances of their donors'.

Many organisations rely on maintaining constructive relationships with Home Office or statutory authorities at national or local levels. The outsourcing

of responsibility for service provision has resulted in some organisations becoming dependent on government contracts. For example, Betts (2017, p. 74) argues that there is little scrutiny of what he refers to as the ‘resettlement industry’ because it is ‘worth billions of dollars a year to the NGOs and civil society organisations that participate in it’. Dependence on government funding inevitably limits capacity to scrutinise government action.

Even without explicit limitations, campaigns for systemic change may less readily appeal to funders than provision for the immediate needs of people considered particularly deserving. Voluntary sector funding may depend on pragmatic focus on targets which are Specific, Measurable, Achievable, Realistic and Timebound (SMART). However, as Prather (2015, p. 14) argues, such ‘criteria fit extremely well’ when focused on returning a particular issue ‘to normal’, but do not promote more fundamental change. Perhaps most significantly, organisations may rely on employees who are able to effectively communicate with funders, which may be assumed to include having the same language, culture and skillset as funders (Weisinger, Borges-Méndez and Milofsky, 2016). If organisations are dominated by people using ‘expert’ language, from privileged backgrounds, then people with other backgrounds such as disabled people seeking asylum may be alienated and become construed as ‘hard-to-reach’.

Funding may not preclude asylum sector organisations collaborating with the disabled people’s movement. Nonetheless, contesting systemic injustices may appear unachievable. If the goal is to mitigate the impact of Home Office policies on selected individuals then that is where attention must be focused. As has been discussed, euphemistic references to disability contrast with principles of the UNCRPD and the UK disabled people’s movement. Sometimes, Home Office references are repeated as a tactic. Olga works in the voluntary sector, is involved in Disabled People’s Organisations, yet refers to disabled people seeking asylum as ‘vulnerable customers’. Her rationale is that this reflects Home Office language and helps communication: ‘it’s just gonna take much longer for them to understand it if you don’t use their language’. Describing people as ‘customers’ reflects Home Office reference to their ‘business model’ (UKVI, 2017). This language frames people seeking asylum as if having a choice as to where to go and the asylum system as if part of the market economy. The repetition of this language reinforces Home Office conceptions of problems. It is as if people’s struggles are caused by individual attributes and choices rather than the restrictions that are imposed by others.

Without negating the essential support and huge commitment of many of those involved, the asylum voluntary sector appears at least in part to take the role of helping to improve implementation or ‘policing’ of Home Office initiatives. The next chapter will consider more specific examples of this approach and the impact on the scope for building horizontal solidarity with the disabled people’s movement. But first it is necessary to consider wider sources of support for people in the asylum system.

Legal representation

A key determinant of people's scope to address injustice is often their access to legal representation. This is particularly significant in the context of government and media attacks on legal professionals. A briefing from Conservative Campaign Headquarters was shared with the national press, specifically targeting Jacqueline McKenzie (McKenzie, 2023) head of immigration and asylum at the law firm, Leigh Day. This firm represents people who have been 'injured, discriminated against or had their human rights abused', with expressed commitments to 'ensuring that individuals have the same access to justice as the UK Government and large corporations'. To that end, the firm provides services to individuals 'looking to bring legal action against the British Government or large organisations based in the UK' (Leigh Day, 2023). A statement by partners in the firm in support of Jacqueline McKenzie (Leigh Day legal partners, 2023) was followed by wider solidarity from the Law Society and wider public. The targeting of the legal profession is indicative of government attempts to act beyond the law.

At an individual level, people routinely depend on expert legal representation in order to successfully resolve asylum claims, to access services, and to address barriers to social care. People threatened with being accommodated on the Bibby Stockholm barge relied on legal representation to be considered 'unsuitable', generally on medical grounds. At the policy level, government plans to remove people to Rwanda before asylum claims are considered were at least temporarily halted by legal action. Legal representation can be an essential means of asserting people's rights or resisting the removal of rights, but if those rights have already been removed then the scope for change through these routes is less clear.

Legal rights can contribute to resistance if people have access to appropriate representation. As a voluntary sector employee, with a migration background, explained, 'in law it says that I am able to have this and that, but then you also go up against walls all the time'. If people are unable to access adequate legal representation, the existence of legal rights becomes irrelevant. Oliver and Barnes (2012, p. 175) argued in relation to the focus of the disabled people's movement that focusing resistance on achieving legal rights benefits 'those with plenty of money to spend and those employed in the legal and related professions'. Even with access to legal representation, the capacity to meet people's needs is dependent on their legal entitlements. As discussed in Chapters 2 and 3, both asylum and welfare reform policies have developed with the explicit focus on restricting entitlement to services and support, rather than on ensuring all needs are addressed. In this context, it can be assumed that many, if not all, people in the asylum system have significant unmet needs, therefore the focus of legal representation must be on *which* needs carry additional entitlement.

To argue that the asylum system is inherently disabling or racist does not support legal claims unless there are associated entitlements. A legal professional specialising in immigration and social care explained that:

The immigration system as a whole is just inherently racially discriminatory. But you can't really do anything about that ... there is an Equalities Act exemption for decisions made under the Immigration Act in relation to race discrimination ... no doubt in recognition that immigration laws disproportionately target brown people.

This person went on to argue that,

we can help people with disabilities ... because we have additional laws at our disposal ... But it feels a bit wrong when at its heart you know they are all discriminated against on the basis of their race ... that's just not something that equality legislation will recognise.

This perspective focuses on potential provision for individual disabled people. Without doubting the essential value of legal representation, capacity to challenge the disabling or racist impact of asylum policy is more limited.

Informal networks of support

While the funded voluntary sector and legal representatives have some scope to promote their work, the informal, unmeasured and often unpaid support of friends and fellow nationals is often hidden from public view. These networks may include religious groups, fellow nationals or simply groups of concerned individuals. A legal professional observed that 'I suspect that there are people who do a huge amount who are not getting any support and probably do spend some of their own meagre pittance on doing that'.

Disabled people, regardless of migration status (Slasberg and Beresford, 2014), may particularly rely on such informal support to address the barriers meeting human needs.

Informal networks of support are undoubtedly a crucial means of meeting essential needs and resisting destitution. But there is inherent precarity and inequality if one person's survival depends on the kindness of another. At some point, as a solicitor observed: 'generosity runs out and a friend that they have been staying with ... can't deal with it anymore'. Beyond the inherent inequalities, informal support may even facilitate wider removal of services and therefore the implementation of government policy. Statutory support may be denied if needs are being met elsewhere. As the solicitor continues:

I am not at all saying they should be done away with, but you know ... a wonderful network of people helping people and that makes it harder to prove your case ... in some cases I have had to say, well, you are just going to have to withdraw the support you are providing to show that they can't cope.

When entitlement to formal services depends on being perceived as 'vulnerable' or 'at risk', then networks of informal support may reduce

eligibility and be used to legitimise the removal of formal services. The increased dependence on discretionary acts of compassion from friends, family and charitable agencies reduces people's capacity to assert their needs. But when official entitlement to services has already been removed, then informal support may be a lifeline. The solidarity provided by these informal networks can therefore also be a means of reducing the impact of policy that is deliberately designed to create destitution or hostility.

Solidarity or the antipolitics of charity

There is an important distinction in the scope for resistance between acts of solidarity designed to resist political injustice, and acts of charitable generosity that are presented as if apolitical.

Notwithstanding the potential limitations discussed above, many formal and informal networks provide solidarity to people in the asylum system. According to his interpreter and friend, when Samuel was provided with hostel accommodation in response to his mental health needs, the housing providers were 'acting as if it was a favour ... privilege' for which he should be grateful. With disdain for such framing, his interpreter added: 'imagine it ... it is an insane world'. He clearly framed his unpaid interpreting as solidarity to help his friend manage systemic injustice. As such, these are political acts, designed to counter inequalities, rather than acts of charity. Such distinctions are crucial in building resistance and countering injustice.

Local community initiatives have the potential to contribute to implementing or resisting asylum and immigration policy. Numerous local initiatives were established to welcome Syrian refugees selected for the VPRS. Collective community pride may be enhanced by welcoming refugees if support is framed as an issue of compassion, but this is not necessarily a contribution to political solidarity and resistance. A small-town meeting focused on celebrating the reception offered to two Syrian families resettled under the VPRS. Members of the public were reported to have 'donated loads and loads of stuff' which was described as 'inspiring' and 'typical' of the 'community spirit' which 'epitomises' the town. Such small numbers of refugees relative to the 20,000 people to be resettled in the whole country did not deter organisers from repeatedly asserting a belief in their own generosity. Un evidenced assumptions that the welcoming of two families contained lessons for the wider UK population led to questions as to how the work could be promoted at a national level. Such assumed superiority contrasts with a study of geographical differences in attitudes to immigration (Crawley, Drinkwater and Kausar, 2019), in which it was found that out of 12 regions of Britain, the region under discussion was among the lowest providers of support for refugees and people in the asylum system. Like the initial announcements of the VPRS (2014), the number of people welcomed is framed as less significant than the generosity of response towards those selected. Without acknowledgement of possible alienating inferences for

non-Christians, the small-town meeting was held in a church, with local organisers speaking from the pulpit, thereby evoking almost religious zealotry to affirm pride in ‘our’ goodness. The purpose was pointedly not political. The focus was not to contest the inequities of government policy, but to highlight ‘our’ generosity towards selected individuals.

Similar discursive representations of generosity and pride were used at a district-wide meeting of elected councillors, council employees and volunteers, regarding the welcoming of selected Syrian refugees. This group of people actively engaged in welcoming refugees denied that Theresa May had referred to her intention to create a ‘hostile environment’ (Kirkup, 2012), despite ongoing media coverage of that goal. When evidence was provided, one councillor asserted that May had been referring to ‘illegals’, not to the ‘good’ refugees being hosted locally. If community response relies on discretionary support that evokes pride, then it also reinforces the notion that there is something distinctive about ‘us’, whether at the local or national level.

For some of those involved in these local initiatives there is active determination to avoid politics. A leading organiser of local support spoke of his motivation: ‘as far as I have any political consciousness, and I’m not sure I do ... I choose to get involved with something that I think is achievable’.

His focus on what he perceives as ‘achievable’ may provide tangible results, thereby enabling a sense of pride, but does not contest systemic causes. According to Ticktin (2011, p. 5), the result of focusing on identifying exceptions to systemic injustice, is that:

Rather than furthering solidarity or equality in the face of discriminatory policies and laws ... regimes of care end up reproducing inequalities and racial, gendered, and geopolitical hierarchies: I suggest that this politics of care is a form of antipolitics.

The antipolitics underpinning expressed compassion towards selected individuals is a political position underpinned by the assumption that systemic change is unachievable or undesirable. Local community initiatives are not, however, necessarily designed on the basis of charitable generosity. For example, the Portland Global Friendship Group provide support to people housed on the Bibby Stockholm barge. In collaboration with wider support groups and Trade Unions, their activities are designed to counter the activities of the far right in the local area as well as to provide support to people housed on the barge.

The potential peer support of Disabled People’s Organisations could also be a means of promoting solidarity. However, there are barriers to collaboration even among organisations focused on solidarity and addressing systemic inequalities. The director of a Disabled People’s Organisation explained that the lack of people in the asylum system among their membership is because the

organisation's constitution insists members identify as disabled people and support the social model of disability. According to her, 'prejudice within *their* communities' (emphasis added) makes it harder for people in the asylum system or members of minority ethnic groups to identify as disabled people. The overwhelmingly white membership was thereby attributed to problems in 'their' communities rather than to organisational practices. Yet, unless people have training or contact with Disabled People's Organisations, the potential to adopt a social model approach may not have been considered.

Beyond the organisational level, there are wider barriers to solidarity from individual disabled people. Everybody is influenced by hegemonic representations of issues beyond their own experiences. Charles, a white, disabled UK citizen expressed commitment to wanting to support people in the asylum system. But he explained that he had grown up in the New Labour years and had been taught to 'Hold the centre. Hold the centre'. His assumption was that the centre ground is neutral, rather than an active position and that this neutrality is both possible and desirable. He emphasised his goal to avoid being seen as having 'a chip on my shoulder' or coming across 'as against capitalism'. This person did not speak of any restrictions or fears preventing him from seeking more fundamental change yet chose to reinforce hegemonic values and avoid dissent.

Public awareness of intersectional struggles and the scope for building solidarity is limited by the segregation and isolation experienced by many people in the asylum system and disabled people. In addition, as Ryan (2019, p. 197) observes: 'It is difficult to focus your energy on what is happening in a care home to a disabled stranger when you're struggling to pay the bills, or your children can't find affordable housing'.

Nonetheless, the outpouring of goodwill towards Syrian refugees in response to media representations of the death of Alain Kurdi is indicative of a human instinct to support other people in need of help.

The scale of injustice may motivate people to seek tangible focus for their action. However, if support is presented as a gift or an act of compassion, it does not automatically contest systemic inequality. At the individual level, rights can be contested, whereas gifts are, by definition, discretionary (Schwartz, 1967). The 1951 Refugee Convention gave people the *right* to seek sanctuary from multiple forms of persecution. It is not only in the context of disability that these rights have become diluted. Fassin (2016) explains that, 'whereas many European states once regarded asylum as a right, they now increasingly treat it as a favor'. He refers to the selection of refugees for resettlement as 'nothing less than a market of compassion'. If it is at the government's discretion whether to *give* protection to people, then people have no *right* to claim it. Instead, survival depends on being framed as exceptionally deserving, rather than on asserting rights to support.

Effective movements of solidarity rely on awareness of the causes of injustice, the ways in which these have been addressed in the past and the scope for developing alternative solutions. As will be discussed in the next chapters, sharing lessons from the disabled people's movement could be a means to develop such solidarity.

Conclusion

The contributions and limitations of support from people with wide ranging roles have been discussed. There appears to be wide-spread consensus that action is needed to address the struggles of selected people in the asylum system. However, the blame and responsibility for addressing injustice is repeatedly apportioned elsewhere. Senior Home Office staff describe themselves as seeking to do 'the right thing', yet their role is to implement the restrictions of government policy. Meanwhile, the voluntary asylum sector and legal representatives provide essential support but must focus their efforts on addressing the urgency of individual struggles. Organisations seeking to provide immediate relief may adopt the language of the Home Office and focus on the apparently pragmatic and technical task of identifying people with attributes associated with entitlement to support. But such efforts also risk reinforcing notions that people without such attributes are undeserving. As important as immediate relief is, reducing the symptoms of injustice for some individuals will not address the problem or develop alternatives.

The distinctions between effective implementation and resistance of government policy are not always clear. Even euphemistic references to disabled people may be considered progress in comparison to the receptionist of a major refugee charity who stated in 2012 that 'disabled asylum seekers? ... They don't really exist' (Yeo, 2015). It is perhaps indicative of a perceived association between power and knowledge, if awareness of intersectional injustice results in reinforcing Home Office distinctions of entitlement, rather than seeking to build solidarity and learn from the insights of wider movements of people with lived experience. The next chapter considers specific examples of how the insights and achievements of the disabled people's movement are ignored or distorted by current policy and practice in the asylum and immigration sector.

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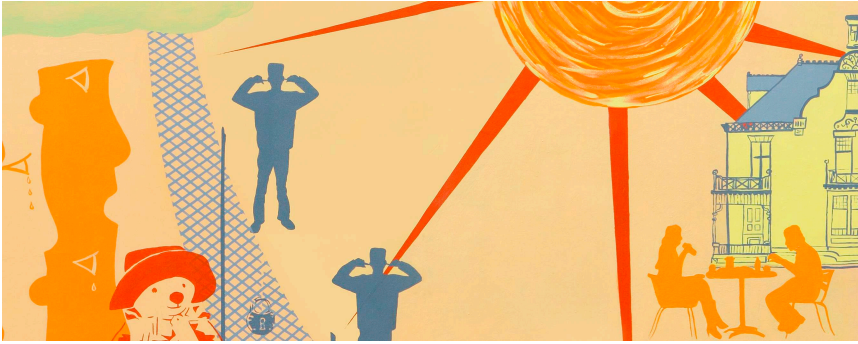


Figure 7 'This is not our house. We are just looking. We have no house to go to'.

5 Failure to learn from the disabled people's movement

According to Clifford (2020, p. 38): 'Perhaps one of the primary reasons that disabled people have been actively excluded from the left is because there is an unspoken belief, held by other Leftists, that we are broken or flawed'.

If alternative ways of organising society are sought, then new collaborative approaches are required. This chapter argues that bringing together the insights and experiences of the disabled people's movement, people subject to asylum controls and allies of both sectors could help create a broad-based movement of solidarity. This discussion provides the context before turning to specifically consider the relevance of the social model of disability in the final chapter.

Understanding of disability in the asylum voluntary sector

Confused representation of disability in the asylum system is not a coincidence. Such are the barriers in contemporary UK society that non-disabled people may grow up without close contact or understanding of the disabled people's movement. In the absence of this input, perspectives may be shaped by stories of tragedy, heroics, or what Stella Young (2014) refers to as the 'inspiration porn' promoted by charitable fundraising. Employees in the different elements of the asylum sector are as susceptible as anyone else to hegemonic framing of disability. However, the reason for lack of understanding does not change the impact. Whether resulting from oversight or deliberate intent, there appears to be almost total disregard in the statutory and voluntary asylum sectors for the achievements and basic tenets of the disabled people's movement.

The issue of stigma is sometimes referred to by employees in the asylum sector as if it were an issue exclusive to countries from which refugees flee. The result is to shift the blame for injustice to somewhere else and thereby to absolve 'us' of responsibility. Rosa, a local authority employee, argues that refugees feel stigma regarding disability, because they come 'from a country that doesn't recognise disability in a positive way'. Similarly, David, a voluntary sector employee states that refugees 'don't see disability the same way we [British citizens] see disability ... there is a lot of stigma to do with it'. On a separate occasion he expanded on this belief, stating that there is:

not much of disability awareness where people come from and a lot of people see it as a weakness in the family or shame to the family having a disabled person in the family or being disabled yourself ... here ... that shame is gone because over here people are treated as they are.

Just moments later, Michael, a blind refugee, described his positive experiences of ordinary people trying to help him in his country of origin and in the United Kingdom. Hearing Michael describe his lived experience did not appear to shift David's perceptions that the problems experienced by disabled refugees stem from attitudes in their country of origin:

some people ... they start to define themselves by their disability and they don't do much about getting on in their lives ... if you're in a wheelchair you can still find a job ... some people would get stuck because they're in a wheelchair and they don't really make any effort.

This person positions himself as if seeking to contribute to resisting the restrictions of asylum policy, yet he implicitly asserts the biopsychosocial model (Waddell and Aylward, 2009), reinforcing the neoliberal values of individual responsibility which shape Welfare Reforms.

In contrast to assumptions that there is greater stigma associated with disability in 'other' countries, at times the reverse is true. Charlotte openly uses a wheelchair when it is useful but gets out of it when it is not. At a party, Charlotte got out of her wheelchair to dance. A UK citizen involved in the asylum voluntary sector, watched her and laughingly questioned whether she could 'really' be disabled. This questioning reinforces the prevalent notion that both people in the asylum system and disabled people may be pretending to be something that they are not. This onlooker appeared to perceive the use of a wheelchair as a last resort rather than a useful tool, with dancing having no place in the display of victimhood that is expected to accompany disability. This response extends beyond the asylum sector. Professional dancer Kate Stanforth (2023) describes the abuse targeted at her, and asserts that she is 'a dancer who sometimes uses a wheelchair – people should just get over it'. Research by sociologist and disability activist Rebecca Maskos (2018) found that many disabled people resist the use of mobility aids for as long as possible, perceiving wheelchairs as stigmatising. If a wheelchair is considered a last resort, then it may appear strange for someone to get out of it. In contrast, a social model approach to disability understands a wheelchair as a tool, to be used as, and when, needed.

The punitive impact of restrictions and the assumptions that people are lying or to blame for their own misfortune can be absorbed by those affected, whether associated with disability or migration status. As Ana continues: 'being asylum is something that you feel ... when you don't have [migration] status here, it's like you're a sinner ... you're not recognised as human being ... You are nobody'.

Embodiment of the stigma directed at refugees (Tyler, 2020) could not be more clear than from Joseph who had such clear evidence of persecution that he had been granted unusually rapid refugee status, yet he wanted his daughter to think he had come to the UK for work. It is perhaps inevitable to absorb some elements of hegemonic values. Lorde (1984, p. 123) asserts: 'The true focus of revolutionary change is never merely the oppressive situations which we seek to escape, but that piece of the oppressor which is planted deep within each of us'.

The regressive impact of intersectional initiatives is not necessarily deliberate or malicious. Contestation relies on having awareness and capacity to perceive the possibility of systemic change.

Mental health perceived as a distinct issue

In further contrast to assumptions that stigma is more prevalent in people's country of origin, several people seeking asylum spoke openly of their mental health support needs and showed me their medication without the apparent stigma that is commonly associated with mental distress in the United Kingdom. This openness may stem from mental distress being so pervasive and attributed to the impact of asylum restrictions, rather than to individual weakness. Claire, a mental health service user who volunteers in the asylum sector, observes that among people in the asylum system: 'the largest group I would say, probably have experienced mental health issues. And that's a big taboo in this country' amongst the wider population.

Similarly, Elena explains that in the asylum voluntary sector, high levels of mental distress are too often:

normalised ... we're like, people just *don't* sleep ... people just *are* depressed ... people just *do* have flashbacks ... in someone else who wasn't an asylum seeker, maybe we would think oh, how awful, we should do something about it ... [in the asylum sector] there's some kind of inertia ... because it's nearly across the board.

Despite widespread assertions that disability is rare in the asylum system, several interviewees reiterated Elena's notion that mental distress is 'across the board'. An immigration barrister explained: 'everyone has some mental health problem if they're an asylum seeker, because life is so grim'. Widespread understanding of mental distress as being pervasive and caused by living conditions appears to contradict assumptions that disability is a minority issue to be addressed by charitable initiatives towards selected individuals. These incompatible assumptions are combined by separating mental distress from disability if a person is in the asylum system.

During discussions as to what could be learnt from experiences of hate crime, a senior voluntary sector employee suggested that the mental health needs of people seeking asylum should be shared between organisations

without needing individual consent. This suggestion reinforces distinctions between 'us' and 'them' (Grove and Zwi, 2006; Anderson, 2013), promoting lower standards of privacy for 'them' rather than 'us'. The proposed infringement of people's privacy is framed as if people's struggles stem from individual distress. Yet, for example, both Kamil Ahmad and Bijan Ebrahimi reported their experiences of hate crime many times to multiple authorities, without adequate response before they were murdered. The lack of protection resulted, not from their individual distress or from ignorance of their needs, but from disregard for their needs.

Minority status

Where disability is considered at all in the asylum and immigration system, it is portrayed as if a minority issue. In the context of majoritarian conceptions of democracy, the entitlements of minorities are contentious. Combined with the assumed primacy of the nation state and a capitalist economy, disabled people in the asylum system are framed as having little or no automatic eligibility to support. The result is that any action is framed as if a sign of charitable generosity, rather than an act of political resistance to address systemic inequalities.

Minority status is always and inevitably dependent on which element of a person's identity is foregrounded. Some elements of everyone's identity will be in accordance with the majority in a society and others will be minority. Some academic studies assume a causal association between minority status and marginalisation. Harris and Roberts (2004, p. 13) provide a list of 25 'self-reported conditions/impairments', suggesting that for example less than 1% of disabled Somali migrants identify as having had a stroke. They conclude that the population of disabled people in the asylum system is 'extremely diverse' and that 'this diversity contributes to the invisibility of disabled refugees and people in the asylum system' (ibid.). Yet, the diversity of medical conditions experienced by UK citizens is not generally used to explain lack of support. The notion of diversity and consequently who is minoritised depends on the power ascribed to the different elements of an identity.

The othering of people without migration status is such as to result in the denial of common experiences. Before working in the asylum voluntary sector, Elena, worked in Social Services. She recognises the racism within conceptions of disability when people are seeking asylum. According to her, if people are seeking asylum, then the response of social workers to people who are autistic is 'like oh, it's a cultural difference. So "their" autism and "our" autism must be different, and so it must just be a weird, foreign thing'. Differences in what constitutes disability or impairment corresponds to Puar's (2017, p. xiv) discussion of the wider inequalities in the context of 'the racialization of bodies that are expected to endure pain, suffering, and injury'. If assumed definitions are different, then it reinforces the notion that disability is a minority issue in the asylum system.

The lower entitlements of people considered to be a minority may be framed as if inevitable or even legitimate. However, as will be discussed in the next chapter, minority/majority status would be irrelevant if a social model approach were taken to focus on collective responsibility to remove restrictions and inequalities. The way a problem is represented (Bacchi, 2009), therefore determines the solutions that appear appropriate.

Co-option and failure to learn from the disabled people's movement

The failure to learn from the insights and achievements of the disabled people's movement is a missed opportunity. Not only are there relevant insights and experience of contesting inequalities, but despite the immediacy of struggles and injustice, the achievements are impressive. At the international level, the UNCRPD was developed by bringing together the ideas, experiences and priorities of disabled people around the world. At the national level, the disabled people's movement played a leading role in resistance to austerity cuts to services and support (Gentleman, 2011; UK Disabled People's Council, 2011). The restrictions imposed on disabled people were catalogued and submitted to the UN, prompting the first inquiry and a damning report by the UN Committee on the Rights of Disabled People (2016). In August 2023 the biggest delegation of Deaf and disabled people that the UNCRDP committee had ever seen presented new evidence of breaches of UK government obligations to the United Nations. The delegation was praised for good organisation (Clifford, 2023). In contrast, the UK government had also been due to present but told the committee they were not ready and would need to delay until March 2024. The failure of the asylum sector to consider the insights of the disabled people's movement cannot be attributed to unimpressive or ineffective achievements.

Attention now turns to three examples of the detrimental impact of divisions between the asylum voluntary sector and the disabled people's movement. The first, and most detailed, example describes how the insights and focus of the disabled people's movement in relation to social care are undermined by asylum voluntary sector and local authority employees. The second example explores how battles that were once won by the disabled people's movement are being disregarded as if the achievements had never happened. The final example highlights the divisive impact for both sectors.

Example 1: Undermining resistance to the social care system

Lived experience of lack of social care services was discussed in Chapter 1. The causes of this crisis and alternatives to the current system are discussed by others (see, e.g., Slasberg and Beresford, 2015, 2016, 2017b; Beresford and Slasberg, 2023). The asylum voluntary sector routinely supports people with care needs to access social services. The focus here is on the reticence to collaborate and build on the understanding of social care promoted by the UK disabled people's movement and the UNCRPD.

It is necessary to begin by briefly considering the wider context of social care. Lack of funding from national government has created huge budgetary shortfalls for local authorities which have compounded a crisis of social care provision (Slasberg and Beresford, 2014, 2016). Expressions of support for personalised care are combined with continued reduction of public services at the level of local authorities across mainstream political parties. Essex County Council, led by the Conservative Party, introduced what they called a 'Good Lives' approach to the provision of social care. This would reduce provision of formal care services, instead relying increasingly on informal support: 'not only tapping into the individual's own resources, but forging stronger links with the wider community – especially the voluntary sector' (Cole, 2016). Meanwhile, Bristol City Council (2018), led by the Labour Party, developed the 'Better lives programme' for social care. At a time when the council faced a £108 million funding shortfall (2018, p. 10), this approach was designed to combine 'value for money' (2018, p. 27) with providing the 'right level and type of support' (Bristol City Council, 2018, p. 25). This built on previous promotion of the need for a 'stronger and more resilient care market', ensuring 'good investment' (Bristol City Council, 2017). The two councils, led by ostensibly opposing political parties, would drastically reduce social care costs by shifting responsibility away from formal service provision. Both approaches were framed as if progressive, avoiding a charity model approach and recognising people's strengths while also saving money.

The result of local authority service cuts is that by 2023, it was reported that 28% of people were waiting more than six months for a care assessment (Age UK, 2023). The same year, the director of Social Care (2023, item 4) of Bristol City Council referred to the need for a 'personalised approach' to consider 'service users' dignity', while simultaneously presenting plans for disabled people to be accommodated in care homes if that is more cost effective. The overt marketisation of services highlights the legitimacy of Giroux's (2008, p. 594) warning that when 'the social state is displaced by the market, a new kind of politics is emerging, in which some lives, if not whole groups, are seen as disposable and redundant'.

In relation to social care this 'new kind of politics' is underpinned by an implicitly biopsychosocial (Waddell and Aylward, 2009) approach, with use of services framed as a negative indicator of being 'dependent' (Bristol City Council, 2018, p. 11) and the goal being to 'maximise people's independence' (2018, p. 25). Such reference to 'independence' is in direct contrast to the right to 'independent living' enshrined in Article 19 of the UNCRPD (2006), which obliges state authorities to provide 'in-home, residential and other community support services ... necessary to support living and inclusion in the community ... with choices equal to others'.

The definition of 'independent living', developed through the collaborative work of disabled people around the world, explicitly 'does not mean doing everything for yourself' (Clifford, 2020, p. 53). As Mario, a disabled UK citizen, asserted, 'I am more independent if I have the support I need'.

The meaning of 'independent-living' to which the UK government committed when signing the Convention is being routinely co-opted and distorted such that the removal of services is justified 'in the name of promoting "independence"' (Ferguson, 2017, p. 24). In this way, a key achievement of the disabled people's movement is weaponised against the people whose needs it was designed to support.

A strength-based approach to service provision

The co-option of demands for 'independent living' is combined with methods of reducing eligibility for social care to limit the number of people who are eligible for services. 'Strength-based' social care assessments have been widely adopted by local authorities to 'transform the dominant paradigm' (Graybeal, 2001). Instead of focussing on what disabled people *cannot* do, this approach is presented as if a progressive means of assessing what people *can* do with the skills, resources and relationships available to them, without assuming that formal service provision is the appropriate solution. It is not new to criticise a strength-based approach (Gray, 2011; Slasberg and Beresford, 2017a). The report from UK Deaf and Disabled People's Organisations (Inclusion London, 2018, p. 31) to the United Nations Committee on the Rights of Disabled People, stated that 'strength-based' assessments are designed to reduce state-funded support, thereby denying 'people the same opportunities to be included in the community with choice and control over our own lives'. Unlike the restrictions of the hostile environment, this approach is framed as if in the interests of disabled people, yet the result is to remove people's entitlement to services, reduce local authority costs, while undermining the obligations of the UNCRPD.

After their care assessments, Nushi and Juan both described feeling misled into recounting the strengths that they draw on for survival, rather than the support that they need to address barriers. Nushi spoke of fellow tenants of the supported housing responding to his screams when in crisis. Juan routinely and openly converses with the voices he hears. Both men were assessed as having no 'eligible needs'. As argued by Slasberg and Beresford, when care assessments are focused on 'eligible need' the result is to obscure the unmet needs that result from service reductions (2017a, 2023). It is for this reason that the campaign for a National Independent Living Support Service (Rofa and DPAC, 2019) promotes a call for social care support needs to be assessed independently of local authority politics. After the care assessment, Nushi's committed and knowledgeable voluntary sector advocate, James, explained that:

it felt like there was a decision they had made, and I don't feel the assessment had a lot of bearing on the decision ... The problem is that some people are ignorant, but do they want to know what it's really like? ... that, I don't know.

If the insinuation is correct that the local authority employees did not '*want to know what it's really like*', this implies that the primary goal is not to *understand* human needs but to reduce budget costs.

Both Nushi and Juan were informed that they would lose entitlement to housing and support from social services. Instead, they were advised to sleep in night shelters and access food from drop-in centres. As cited at the start of this book, unsurprisingly, the prospect of losing housing and support significantly increased Nushi's anxiety and distress. When his physical and mental health had deteriorated, he would then again develop 'eligible needs'.

Strength-based assessments are not explicitly used in relation to asylum policy, yet the similarities are apparent. A solicitor explained that in the asylum system:

the resourcefulness of people to cope, they find ways to cope. It doesn't help them ... because quite often the attitude is, 'well you have survived so far, so you are coping'. And you have to show that they are not coping. And so, you have to reach this sort of crisis point, which services aren't supposed to let you reach, in order to show that they need to intervene.

Escaping from difficult situations, travelling to the United Kingdom, and surviving in the asylum system, could be considered the ultimate indicator of the highly valued neoliberal attribute of resilience. Yet, in neoliberal parlance, those who are 'resilient' are not 'vulnerable'. If a person is perceived as 'able to cope', then they are also perceived as undeserving of discretionary support for vulnerable people.

At a meeting specifically to discuss these issues, social care staff vociferously rejected any criticism, including personal testimony, of the impact of a strength-based approach on people in the asylum system. One staff member asserted that it is 'empowering' to focus on people's strengths rather than their weaknesses. If it is assumed that meeting needs without social care is a 'strength', then this also implies that requiring support and services is a 'weakness'. In contrast, the disabled people's movement and the UNCRPD understand the use of social care, not as a weakness, but as a means to address the barriers that prevent people from meeting human needs.

Asylum voluntary sector response to social care

The 'Better Lives' approach developed by Bristol City Council makes no explicit reference to people in the asylum system; however, there are 13 references to 'citizen' (2018). In a similar manner to the 1998 White Paper, discussed in Chapter 2, it is unclear whether 'citizen' is used to refer to 'people' or to distinguish from migrants. Lack of direct reference to the needs of non-citizens confines their needs to the unreferenced 'other', yet people seeking asylum are at particular risk of adverse impact from these approaches to social care. Legal wrangling between the state and local authorities (Westminster

City Council vs National Asylum Support Service 2002; Slough judgement 2006) confirmed that if a person is eligible for social care, then responsibility to provide these services lies with the local authority in which a person 'is ordinarily resident' (The Care Act, 2014, section 18.1). Yet, in reality, according to a legal professional, 'immigration status is a massive difference' in the ease of access to social care.

Collaborative efforts to address intersectional restrictions

It is unsurprising if employees in the asylum sector are ignorant of the history and demands from the disabled people's movement. The marginalisation of disabled people makes it unlikely that people without involvement in the movement will be aware of the context. The problem is not the ignorance, but the rejection of opportunities to learn and build on existing campaigns. When choosing to prioritise collaboration with those who control the resources, the result is to undermine wider struggles, as well as failing the people that they seek to support.

Attempts to bring together the asylum voluntary sector and the disabled people's movement highlight divisions. A public tribute was held to disabled people in the asylum system and refugees who have been failed. At this event, Bristol Mayor Marvin Rees apologised for council failings that had contributed to the murders of Kamil Ahmad and Bijan Ebrahimi. He committed 'to making sure we look at everything that happened and everything that didn't happen'. A voluntary sector employee later warned that without action, further lives will be lost. This person spoke of the needs of people such as Nushi and Juan with social care needs in the asylum system. A specific roundtable meeting was scheduled with MPs, City Council officials and social care staff to discuss response to the social care needs of people in the asylum system. It was hoped that the potential for progress would be increased by the symbolic significance of the Mayor's statement combined with heightened awareness of the consequences of failure to address the barriers faced by disabled people seeking asylum.

Response to the issues asserted in the subsequent roundtable meeting illustrates three main barriers to the voluntary asylum sector building on the achievements of the disabled people's movement. Firstly, there are formal and informal restrictions as to what is considered permissible to contest. Secondly, there is disregard for intersectional lived experience and the insights of the disabled people's movement. Thirdly, there are prevailing liberal assumptions of the value of pragmatism and consensus. These factors exclude voices of dissent and limit the scope to move beyond the implementation or 'policing' (Ranci re, 1999) of government policy.

Voluntary sector restrictions

In preparation for the roundtable meeting, a short film was made (Yeo and Spencer, 2018), highlighting the key messages of people in the asylum system

seeking social care. Speaking on camera, Nushi spoke of his threatened eviction from Social Services supported accommodation. His advocate, James, articulately and accurately explained how these experiences are counter to the Care Act (2014). James was the only person contributing to the film as part of paid employment. This is significant because paid employees may be more constrained in what can be said. One week before the film was to be shown, James's employer asked to see the film and expressed concern about the film's implied criticism of council practices. Consent for their employee to be involved in the film was withdrawn, not because of any factual inaccuracies but because we 'work in partnership with the Council, so we need to be mindful of that'. The result was that unpaid activists had to cancel other work to revise the film, ensuring that the messages could be conveyed without the paid employee's involvement.

The reluctance of charities and other voluntary organisations to criticise powerful interests is not exclusive to the asylum sector. With reference to collaboration between disability charities and the government, Clifford (2020, p. 263) calls for acknowledgement that 'the bottom line for these charities is not to do with the treatment of disabled people but their own organisational interests'.

The impact of such restricted agendas goes beyond the charity itself. As Beresford (2012) explains, charities present themselves as 'the nation's conscience'. If these organisations collaborate with government, whether at local or national level, then as Clifford (2020, p. 263) argues, it encourages public perceptions that 'everything is essentially OK'. This is compounded by media reliance on spokespeople from these accredited organisations. Voluntary sector acquiescence with dominant narratives removes criticism from public discourse. Writing with regard to charitable work with disabled citizens, Clifford (2020, p. 257) describes how the pragmatic focus of lobbying may have resulted in benefit-claimants having less long to wait without financial support. However, as she puts it, 'the overall direction of policy remains unchanged and grave injustices continue'. If collaboration is limited to work with those with power, and the goal is reduced to mitigating the impact of policy for certain people, then the impact of deliberate policy can remain uncontested and change to the systemic causes of injustice appears impossible.

Disregard for disabled people's expertise

The revised film was shown to council leaders and social care staff at the roundtable meeting. They responded by committing to address what they framed as multiple 'oversights', while vociferously rejecting the existence of systemic barriers. A senior council representative called for a taskforce to 'tweak the pathways' necessary to access social care. Taskforce members were selected to include staff from the asylum voluntary sector, social services and councillors but to exclude disabled service users or activists who could speak independently of council funding. When council staff were asked

whether it would be acceptable to have a taskforce examining racism, composed entirely of white people, a senior employee responded that 'we work with disabled people all the time, are you suggesting we do not know what we are doing?'. The implication of this question is that council expertise cannot be questioned by those with lived experience of the impact. As Mondon and Winter (2020, p. 209) write, 'emancipatory politics will never come from the top as the powerful will always resist the loss of their status'. More notable is that not a single voluntary sector representative at the meeting questioned the exclusion of disabled service users and activists from the proposed taskforce. As the meeting drew to a close, one councillor suggested that as a 'compromise' the council should collaborate with an established organisation *for* rather than *of* disabled people. The proposed organisation relies on council funding and is therefore limited in its capacity to criticise in the same way as representatives of asylum voluntary sector organisations.

An assumed correlation between power and knowledge appears to be combined with active dismissal of the insights and achievements of the disabled people's movement. After the meeting, one voluntary sector employee reported that: 'It was great to hear chief Council officers ... being so receptive to inclusion and equality – lovely work'.

In the context of a meeting that was organised by disability activists, in which council officers had expressly excluded further involvement of disabled people, this reference to 'inclusion' and 'equality' suggests no expectation of 'a part for those who have no part' (Rancière, 1999, p. 11). In contrast, disabled activists and service users described feeling:

very disappointed ... dismissive and invalidating response from senior staff.

The more I think about that meeting, the worse it all feels.

What happened to, 'Nothing about us, without us'?

The vastly different responses to the same meeting may, in part, be explained by the organisational distinctions between the asylum voluntary sector and the disabled people's movement discussed above. Voluntary sector employees rejected the opportunity to collaborate with ongoing struggles of the disabled people's movement, in favour of partnership with the statutory service provider. It is not new, or exclusive to the asylum sector, for funded organisations to seek vertical collaboration with those perceived to have the power, rather than to build a horizontal movement of marginalised people. Clifford (2020, p. 253) writes a stinging critique of disability charities that avoid 'outspoken criticism of the government ... in favour of opportunities to work in partnership'. It must be asked whether such collaboration is justified if the result is to reinforce regressive values or whether it is what Clifford (2020, p. 257) refers to as 'a betrayal of all those

suffering as victims of that agenda?'. The 'betrayal' from voluntary sector staff at the meeting served to maintain relations with council staff, squash potential contribution to a 'moment of politics', and ensure that any change would be reduced to 'policing'.

The affective appeal of pragmatism and consensus

The stated rationale for excluding activists and people with lived experience of barriers accessing social care was pragmatic. According to a senior council employee, it would take longer to include disabled people because 'people with lived experience might understand their own lives, but don't understand how the system works'.

If disabled people do not understand the mechanisms of local government, it is a result of ongoing inequalities. To exclude people from consultation on this basis is to perpetuate these inequalities. The assumed superior value of the knowledge of the powerful, results in systematically undervaluing the insights of marginalised people, while simultaneously denying people the opportunities to gain the experiences valued by the existing social order. Furthermore, despite acknowledging that lives have been lost because of 'how the system works', the approach promoted by the council and asylum voluntary sector precludes the development of alternatives based on the insights of lived experience and perspectives of people seeking to rethink social care. Without input from people with different perspectives, gaps in understanding and visions of what is possible are obscured, while the righteousness of those selected for the taskforce would be maintained. As Mouffe (2005, p. 10) argues, 'every consensus is based on acts of exclusion'. Without voices of dissent, it is possible to maintain apparent consensus and limit change to what the council official referred to as 'tweaking the pathways'.

Despite the mayoral commitment to 'look at everything', in the quest to understand why two people's pleas for help had been ignored by local authority employees with fatal consequences, the prioritisation of pragmatic, consensual approaches limit apparent solutions to the perceptions of those with relative power. Attendees in this meeting from the voluntary sector and a Labour-controlled local authority, present themselves as united in opposition to Conservative government policy, yet actively excluded those seeking change to existing practice. This agenda avoids acknowledging the disabling impact of current strategies and fails to meet the obligations enshrined in the UNCPRD Article 19 regarding independent living, and General Comment 7 which demands the involvement of disabled people. The priority was to prevent significant resistance to the intersection of asylum controls, designed to create a 'hostile environment', and what the UN Committee (2016) judged to be 'grave and systematic' abuse of disabled people's rights. Perhaps most significantly, the ostensibly pragmatic rationale that restricting taskforce members would enable more rapid action is unconvincing as the people who were excluded were the ones who had organised the meeting. Their removal

also took away the core commitment to action; it appears that the taskforce never actually met.

Example 2: Repetition of previously successful battles regarding integration

The current segregation between the disabled people's movement, people in the asylum system and allies of both, hinders capacity to share experiences, obliging people to develop new responses to battles that had been won by others. Awareness of previous success would facilitate a less constrained response, acknowledging that the injustices faced by disabled people and people in the asylum system are contingent, have changed before, and can be changed again.

The promotion of integration as a solution to societal divisions provides a good example of where shared learning and a focus on the need for systemic change could support resistance. Despite the successful rejection of an integration agenda by the disabled people's movement at the turn of the last century, the agenda has continued to be imposed on other marginalised groups, particularly migrant communities. A key moment in the rejection of an 'integration' agenda can be seen as the Salamanca statement (1994) resisting the 'integration' of disabled children in existing education systems (Vislie, 2003) but soon extended to wider policy areas. Taking a social model approach to represent the problem as being the way that society is organised, rather than the individual child, the agenda was shifted to calls for collective responsibility to achieve inclusion. This is defined by the Alliance for Inclusive Education as 'commitment to removing all barriers to the full participation of everyone as equally valued and unique individuals' (2016). The successful shift from goals of integration to inclusion effectively moved the assumed onus of responsibility for change, from individuals to organisations and political systems.

The normative pressure to integrate is as unachievable for people facing the restrictions and inequalities of the asylum process, as it was for disabled children in mainstream education. However, the assumed normative value of integration has continued, whether in relation to government policy (Home Office 2004; Home Office 2005; Department of communities and local government, 2008), academic study (see, e.g., Joppke, 2011; Lessard-Phillips and Galandini, 2015), or collaborative initiatives (Ndofor-Tah et al., 2019). The parallels between the promotion of integration for some groups and the rejection of these goals in relation to disability appear to be rarely even acknowledged. Decades of work and successful resistance by the disabled people's movement is thereby discarded without even engaging with it. In the context of ongoing injustices, it would be disingenuous to argue that the disabled people's movement has developed an infallible route to justice. However, if other marginalised groups or their apparent allies fail to even acknowledge the struggles and insights that have gone before, it risks

obscuring and undermining these achievements. Furthermore, common experiences could facilitate the development of more effective solutions to other struggles.

Bringing together insights from the disabled people's movement and people in the asylum system in relation to immigration detention exposes the flaws in integration and inclusion. The Shaw report (2016, p. 17) on 'policies and practices concerning the health and wellbeing of vulnerable people' in immigration detention, referred to the 'unsuitability' (2016, p. 193) of several categories of people for detention, including people with learning difficulties, people with 'serious mental illness' and people with Post-Traumatic Stress Disorder. He clearly did not consider integration or inclusion to be an appropriate response to the adverse impact of detention. No progressive response to immigration detention would propose that an inclusive detention system would address the detrimental impact. If an agenda is unjust, no level of inclusion or integration within it will create justice.

The common elements of struggle could facilitate the development of solidarity, collective resistance and collaborative solutions to ongoing inequalities. Without debate as to the purpose of inclusion or integration, there is a similar risk of failing to tackle underlying inequalities. Ruth Lister (1998) argues that objectives of inclusion are also part of a paradigm shift away from equality. As Schinkel (2013, p. 1142) argues regarding objectives of integration, if 'the non-integrated' are framed as if 'outside society', it produces an image of society as 'a morally cleansed realm: social problems are relegated to the domain of 'outside society'. Disabled people, migrant populations and people experiencing intersectional barriers may be similarly framed as among those who are 'outside society'. In her essay, 'We Refugees', Arendt recalls that 'once we were somebodies about whom people cared; we were loved by our friends ... we could buy our food and ride in the subway without being told we are undesirable' (1964, p. 115).

She describes the struggle 'to avoid anyone guessing who we are, what kind of passport we have'. For racialised people and people with visible impairments a quest to 'avoid anyone guessing' is less feasible. Integration relies on changing 'your behaviour, your language, the way you act, your ideas' (Bauman, 2012). Yet the barriers to integration are beyond individual actions.

Parallels between the normative promotion of integration for some groups and the rejection of these goals in relation to disability appear rarely considered. The exchange of analysis and strategies between the disabled people's movement and people subject to asylum controls could extend perceived options beyond apparently binary choices of exclusion and inclusion, or between segregation and integration. Instead, more transformative discussion is needed as to who is to be included or integrated in what? what for? on what terms? and what alternatives could be developed? Without such questions, as Rancière argues, politics becomes the quest to find 'the centre ground, rather than a forum for debate, disagreement and contesting oppression' (1999, p. 124). Lack of effective resistance to current

injustices may stem, in part, from the assumed impossibility of positive systemic change. Holloway criticises those who try to 'smother our scream' by asking questions like: 'Do we not understand the complexity of the world, the practical difficulties of implementing radical change?' (2002, p. 3). Instead of the much-needed radical systemic change, the focus becomes limited to the immediacy of individual struggles. Resistance to neoliberal inequalities requires what Giroux refers to as 'new narratives about what is possible' (2008, p. 614). Action to integrate or even include marginalised people may reduce the injustices experienced in some circumstances but risks obscuring the range of possibilities and reinforcing the assumed credibility of the wider social order.

The agenda for debate may have been reduced in the United Kingdom, but the reduction of imagination to binary options is not universal. A voluntary sector employee in Bolivia (cited by Yeo and Bolton, 2008) criticised the work of international non-governmental organisations arguing that their goal is to erase different ways of organising society by including the most marginalised people in capitalist system of globalisation. Similarly, an indigenous leader at a public meeting criticised government efforts to include indigenous people, arguing that inclusion and exclusion are two sides of the same coin. Justice is not achieved by being included in an unjust social order. Collaboration and learning from people with different lived experiences is necessary to build the resistance and vision necessary to achieve systemic change.

Example 3: Divisive agendas regarding the 'right to work'

The detrimental impact of lack of collaboration between the disabled people's movement and the asylum voluntary sector is highlighted and reinforced by initiatives such as the asylum sector campaign for the 'right to work' (Lift the Ban, 2020). This campaign frames the 'right to work' as 'common-sense', with frequent assertions of the potential advantages to the taxpayer of allowing people in the asylum system to find employment. This may be framed as resistance to the ban on paid employment for people in the asylum system, initiated by the New Labour government (Nationality Immigration and Asylum Act, 2002). However, to reinforce the notion that those without paid work are a burden, ignores the high unemployment among refugees with the right to work, and the oppressive reality of becoming dependent on the Job Centre or many forms of employment. Hassan, a young man who had gone through the asylum system relatively quickly, spoke of how he had first been restricted by the Home Office, then by the Job Centre, and more recently by McDonalds. His official status had changed but the 'right to work' had not addressed his struggles to meet basic needs, only the source of the restrictions.

Meanwhile, for the wider population of disabled people, the 'right' to work has become an 'obligation' enforced through the conditionality of welfare and the withdrawal of financial support (see, e.g., Peev, 2010; Grover and Piggott,

2013; Mills, 2023) with fatal consequences (Pring, 2019). The White Paper, *Transforming support: Health and Disability* (Department for Work and Pensions, 2023) takes this further by proposing that paid employment is increasingly obligatory irrespective of the barriers. The disabled people's movement therefore campaign against being forced to seek paid work. This is not to suggest that disabled people do not also seek the removal of access barriers to employment. The submission from UK Deaf and Disabled People's Organisations to the UN Committee on the Rights of Disabled People (2023) included focus on the barriers to employment. The impact of many impairments combined with access barriers led one contributor to complain that the government states that 'the way out of poverty is through hard work, which is not an option for many of us'. Despite successive governments seeking to force disabled people into paid employment, in 2020, the employment rate for disabled people was 52.3% compared with 81.1% for non-disabled people (Powell, 2021). Such high rates of unemployment among disabled citizens, and the ban on working for people in the asylum system, position both sectors as separate from the population of people labelled as 'hard-working'. But the absence of paid employment does not mean that people lead lives of leisure. What is commonly understood as 'hard work' does not include the unpaid work of survival which shapes the lives of people seeking asylum as well as the wider population of disabled people navigating the barriers to meeting essential needs.

In this context, asylum sector campaigns for the 'right to work' risk undermining, rather than developing, a broader movement of resistance. It would be naïve to imagine that people in the asylum system would be treated better than the wider population. The 'right' to find paid work would soon become an obligation and threaten what is already minimal support. Instead, this issue could be used to prompt collaborative resistance. As Russell and Malhotra (2002) argue: 'challenging productivism, opens the door to alliances with many other groups who are also marginalized by the imprisoning dictates of a market economy'.

The notion that human value depends on economic contribution helps implement the wider oppression of those who cannot find paid work, a disproportionate number of whom are disabled. Therefore, resistance to this notion could also serve to bring people together in a broader movement of solidarity.

Without belittling the value of the services and support that are provided by the asylum voluntary sector, these examples highlight some consequences of failure to collaborate with the disabled people's movement.

Scope for collaboration with Disabled People's Organisations

The disabled people's movement has decades of experience and achievements in contesting the disabling impact of restrictions that prevent people from meeting human needs. Nonetheless, it would be wrong to ignore the barriers and shortcomings in terms of capacity to develop effective collaborative

resistance. Awareness of commonalities is obscured by the immediacy of struggles resulting from ever greater restrictions imposed on people in the asylum system and the wider population of disabled people. The result is that response to the restrictions in either sector is developed as if in isolation.

The funding crises faced by Deaf and Disabled People's Organisations cannot be ignored. Many organisations have been forced to close or restructure due to lack of funding (Pring, 2018). In addition to the impact on provision of social care, the reduction of funding from Essex County Council has wider ramifications. When the Essex Coalition of Disabled People, lost its local authority funding, the director, Mike Adams, resisted closure and instead planned to 'modernise' (Pring, 2016). What was previously a user-led organisation became a Community Interest Company (CIC): 'We Are Purple'. In accordance with government goals, the target was to help disabled people find permanent jobs. The CIC would seek to 'marry together disabled people and businesses and other stakeholders in order to have a different conversation about disability'. Adams explains that 'what we want first and foremost is for disabled people to be treated as customers' (Pring, 2021). This is presented as a means for people to be treated with respect rather than charity. But people without the means of paying for services cannot be treated as respectable customers. As Russell and Malhotra (2002, p. 218) observe, 'access to the marketplace is predicated on having the purchasing power to buy the services'. The notion that people should be valued for their economic contribution reinforces the assumption that people who do not contribute economically are a burden on wider society.

People accommodated in the former care home in Essex are provided with less than £10 per week. Staff at the local voluntary organisation Refugees, Asylum seeker and Migrant Action (RAMA) show huge commitment to supporting people, often at personal expense. Without this support and the collaboration resulting from media attention, the denial of basic support for people in this former care home would have remained unknown to anyone but those directly affected. But staff at this organisation are well aware of their lack of training or knowledge of disability issues. Despite urgent need for advice and solidarity from Disabled People's Organisations particularly in relation to local services, the business model of their local organisation 'We are Purple' is of little relevance to people without 'spending power'. Without collaboration, this committed voluntary sector action must focus on the immediacy of meeting individual needs rather than building resistance to systemic injustice.

The need for collaboration between marginalised people depends on how the causes and possible solutions to current injustice are understood. As discussed in Chapter 1, some people in the asylum system complained that action was pointless without the presence of 'giants' or the 'powerful' policy makers. Yet, if current restrictions are deliberate policy, then change will not result from informing policy makers of the struggles resulting

from these restrictions. In this context, perhaps the 'giants' are not the policy makers but what climate justice activist Mikaela Loach (2023) refers to as the sleeping giant of resistance that needs to awake. Collaborative resistance relies on people understanding common experiences. Without this understanding, it can appear pointless to collaborate with a wider section of the population who are similarly marginalised.

Conclusion

Among the few references to disability that exist in the asylum and immigration sector, there is little attempt to learn from or build on the insights and achievements of the disabled people's movement. The meaning of disability is reinvented, as if the context of asylum is distinct from elsewhere. Assumptions that mental distress is normal for people seeking asylum are used to reinforce notions that disability is an insignificant minority concern. Initiatives that focus on identifying individuals considered worthy of compassion fail to disrupt the impact of deliberate policy restrictions. Collaboration with dominant power relations may improve implementation or 'policing' of current policy but undermines previous achievements of the disabled people's movement and reinforces notions that systemic change is impossible. If alternative ways of organising society are sought, then new approaches and forms of resistance are required.

If attention were focused on horizontal collaboration and solidarity with the disabled people's movement then different approaches could be developed. Bringing together the insights and experiences of the disabled people's movement, people subject to asylum controls and allies of both sectors could contribute to creating a broad-based movement of resistance. Systemic change may be difficult but, in framing it as *too* difficult, it becomes impossible. The next chapter turns to consider how a social model approach could help to focus resistance on the causes of ongoing inequalities.

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Figure 8 If I see their bus, I am always panicking. Even to pass a police station, I find it very difficult.

6 Extending the social model to build collective resistance

The way a problem is represented (Bacchi, 2009) shapes the solutions and collaborations that appear appropriate. Drawing on the basic premise of what Finkelstein (2001) refers to as the ‘radical social model’, it is disabling when society is constructed in ways that prevent people from meeting their needs. The relevance of this extends beyond the disabled people’s movement. As he explains:

repossessing the social model of disability means searching for openings in the structures of society where we might effectively contribute with others in the restructuring of society so that it is neither competitive nor disabling for all people. (Finkelstein, 2001, p. 5)

The restrictions imposed on people in the asylum system (as outlined in Chapter 1) disable people with existing impairments and create new impairments. The previous chapter has shown that, despite apparently broad consensus regarding the need to reduce the struggles faced by disabled people in the asylum system, the perceived horizon of achievable change appears largely limited to the ostensibly pragmatic goal of identifying individuals worthy of some mitigation of policy restrictions. Such response obscures the disabling impact of preventing people from meeting their needs. It also locates the problem at an individual level, reinforcing the notion that some people are deserving but others are not. The result is to undermine, rather than to build on, the achievements of the disabled people’s movement. If the asylum system itself is disabling, then this is the problem to be addressed.

Analysis of immigration policies and welfare reforms in Chapters 2 and 3 shows how restrictions have been trialled in one sector before being applied to the other. This chapter argues that lessons and insights from resisting these restrictions could also be adapted and extended between sectors. More specifically, key elements of the social model of disability could be adapted and extended to build resistance to the disabling impact of restrictions in the asylum system.

The relevance of a social model of disability

As discussed in the introduction, the original conception of the social model of disability was designed by Oliver (1983), building on the work of UPIAS (1976). It was developed by many other activists to become what Angharad Beckett and Tom Campbell (2015) refer to as an ‘oppositional device’ to focus resistance on the disabling impact of preventing people from meeting human needs. It is critical to recognise that this approach was developed by disabled people in response to lived experiences. Without this input, as Oliver (2018) warned, in what was to be his final extended interview, non-disabled people routinely ‘get it wrong’. The social model provided a means to bring together the struggles of people with different forms of impairments. In these ways, it ‘allowed people to recognise one another as members of the same struggle, with shared values, coming together to dismantle disabling barriers and to build an inclusive and enabling society’ (Beckett and Campbell, 2015, p. 278).

As such, the social model does not need to gloss over differences but instead enables ways of interacting that address different access needs and focus on the common cause of social justice.

Since its initial conception, the meaning of the social model has been revised, co-opted or distorted to mean many different things. It is the original, or the ‘radical social model’ (Finkelstein, 2001) which this book argues could be extended to build resistance to the disabling restrictions of the asylum system. In contrast, the co-opted versions can be considered a warning as to what would happen, and what would need to be resisted, if an extended social model was becoming an effective means of focusing resistance to the disabling impact of asylum and immigration controls.

The social model focuses on the socially constructed causes of the inequalities and disadvantage faced by disabled people. Disabling restrictions are understood as a form of societal oppression, which, like other forms, can and should be contested. As Beckett and Campbell (2015, p. 278) point out ‘the model introduced contingency. If the conditions of disablement were made socially, then they could be made differently’. Instead of framing individual disabled people as a problem to be cured, pitied or ignored, the social model calls for collective responsibility to remove the restrictions and inequalities that devalue disabled people’s lives and prevent people from meeting their needs.

The restrictions and inequalities imposed on people in the asylum system also prevent people from meeting essential needs and are therefore intrinsically disabling. Within this basic principle, there are three key elements of the ‘radical social model’ which appear particularly relevant to the inequalities of the asylum system.

Addressing access needs is essential but insufficient

Society is currently organised to make it appear natural for some people to access the services and support required to meet their needs, while other

people face barriers. Some restrictions are the result of deliberate policies, others are the result of oversights, but the impact is not different. There is nothing inevitable about these inequalities. Finkelstein (1992) famously wrote a story about a community built without steps, where the needs of wheelchair users are routinely addressed, but the ceilings are so low that walking people are disadvantaged.

A social model approach focuses resistance on the disabling impact of restricted access to services and support. Paralympic athlete Stephanie Reid (2020) calls for recognition of the expertise that disabled people bring to building societies that are accessible to all. She argues that buildings with level access are more inclusive of people with mobility impairments as well as



Figure 9 Where is the interpreter?

parents with pushchairs for example. Similarly, many Deaf people describe themselves as a linguistic minority who are disabled by the lack of sign language. The award-winning dancer and actor Rose Ayling-Ellis explains that ‘it is not frustrating being Deaf ... I am disabled because I live and work in a world that disables me’ (2022). At the height of the COVID-19 pandemic, a campaign group (*Where is the interpreter?*, 2021) protested the lack of interpreters in TV news broadcasts. This message is conveyed in the mural created in response to the COVID pandemic.

The group explains: ‘The problem is not that Deaf people don’t hear. The problem is that the government don’t listen’. Similarly, other linguistic minorities, including many people in the asylum system are marginalised if interpreters are not provided.

Issues of access are essential to meeting people’s needs and to a social model approach. However, as Mingus (2011) argues, ‘disabled people’s liberation cannot be boiled down to logistics’. Discussion about disability is often dominated by what Mingus argues are questions of: ‘How do we get disabled people access to the current system, rather than thinking that the entire “table” or “system” might need to change’ (Puar, 2017, p. 15). Access is essential but disability justice relies on ‘dealing with the essential nature of society itself’ (Finkelstein, 2007, p. 5). The restrictions that shape asylum and immigration policy highlight the inadequacy of focusing on access or inclusion. As discussed in the previous chapter, the injustice and disabling impact of detention would not be addressed by becoming more accessible or inclusive.

Innate human vulnerability

Just as all humans have access needs, all human beings are innately ‘vulnerable and physically imperfect’ (Finkelstein, 2001, p. 5). If society is structured in such a way as to prevent certain people from meeting their needs, then that vulnerability becomes more apparent. But as Morris (2015) argues, we should be ‘campaigning to remove the policies and practices which create vulnerability, not using the term as a qualification for support’. If labels of vulnerability are used to distinguish one person from another, it obscures the impact of societal inequalities which enable some people’s needs to be met while preventing others. Finkelstein (2001, p. 5) explains, the ‘transference of vulnerability and consequent dependency into disabled people’ does not end other people’s dependence on services and support. Instead, it creates an illusion about the meaning of normality. The vulnerability of people arriving in a new country without support networks or resources is particularly apparent. This is amplified if, for example, people are traumatised by the impact of persecution, struggles to access basic needs and the loss of loved ones. A social model approach would not remove the impact of loss and trauma but would focus resistance on the inequalities in the way that society is organised and seek to build a system in which entitlement to services is based on need.

Human value is not dependent on capitalist production

While human worth is defined by economic contribution, and society is structured to prioritise profit (Nee and Swedberg, 2005), many disabled people will always be seen as an economic burden. As key proponents of the social model argue (Oliver, 1990; Finkelstein, 2007; Oliver and Barnes, 2012; Clifford, 2020b), disability justice cannot be achieved without transcending ‘the maximum-profit motive’ (UPIAS, 2018, p. 45), which prioritises economically productive, non-disabled citizens. Developing these principles further, Clifford (2020b, pp. 47–48) argues that the needs of disabled people will never be prioritised in a capitalist economy, because while providing ‘services for family, work and health contributes towards the maintenance of a healthy workforce and, through that, to productivity’, expenditure on people who are less economically productive will never correlate with profit. This fundamental inequality is, however, ‘only inevitable from the perspective of the profit motive, fixed firm in capitalist social relations’ (Clifford, 2020b, p. 61). The social model therefore calls for recognition of human value beyond economic productivity.

Like disabled people, people who move in search of sanctuary may be perceived as a threat to the prioritisation of profit. As Vickers (2012) argues, there is a ‘fundamental contradiction between refugees’ claims to asylum and the dominant capitalist interests’. Few people seeking asylum travel with large financial investments and many people face barriers which limit capacity to contribute to a capitalist economy, irrespective of whether or not there is the formal ‘right to work’. These barriers include the impact of trauma and loss, potential language barriers and lack of British qualifications.

Nonetheless, as discussed in Chapter 3, the management of immigration controls is frequently outsourced to private companies which inevitably prioritise profit-maximisation and capitalist interests. An investigation by Corporate Watch (2020) notes that the business model adopted by housing providers contracted by the Home Office is simple:

The companies receive regular fees from the Home Office, then try to find the cheapest accommodation possible from local landlords and sub-contractors, with a bare minimum of management and maintenance, to maximise the ‘cut’ they take. The result is thousands of people dumped in damp, squalid, rat and cockroach infested slum housing.

Beyond the personal goals of the owners, private companies are answerable to their shareholders and will not spend beyond the minimum, let alone undertake expenditure to meet people’s access needs unless there is strong external enforcement. The profit motive is therefore necessarily a barrier to addressing access needs and an anti-capitalist focus is essential to resistance in both sectors.

These three core elements of the original social model could help focus resistance on the restrictions and inequalities faced by disabled people, irrespective of migration status. The rapid appeal of the original social model was not, however, simply associated with its political and strategic focus.

Appeal of the social model

Rather than focus on the potential impasse of many individual medical conditions, the social model focuses on collective responsibility to address the socially constructed, and therefore changeable, nature of society. Like many disabled people, Liz Crow describes the transformational impact:

My life has two phases: before the social model of disability, and after it. Discovering this way of thinking about my experiences was the proverbial raft in stormy seas. It gave me an understanding of my life ... enabled me to confront, survive and even surmount countless situations of exclusion and discrimination ... It has played a central role in promoting disabled people's individual self-worth, collective identity, and political organisation. I don't think it is an exaggeration to say that the social model has saved lives. (1996, p. 55)

Similarly, without denying the loss and traumatic circumstances that cause people to seek asylum, a social model approach would help focus on what is changeable. This could also help provide a 'proverbial raft' with which to rebuild lives.

This is not to suggest that there is, or ever was, unanimous support for the social model among disability activists or beyond. Some critics argue that the social model pays insufficient attention to the impact of impairments (see, e.g., Shakespeare and Watson, 2001). But focusing resistance on socially constructed injustices is not to suggest that this would remove the emotional and physical pain that is inherent in many forms of impairment, or in being forced to flee one's home. The social model does not reject the need for medical intervention but does reject the notion that disabled people have to change in order to fit in to society. Instead, society must change to meet everyone's needs.

Rights-based model

It is important to acknowledge that a rights-based approach to disability is distinct from the original conception of the social model. The UN Convention on the Rights of Persons with Disabilities (UNCRPD) is undoubtedly a landmark achievement. It has enabled activists to hold the UK government to account in an international arena, for the ways in which disabled people's rights are being deliberately denied. The Convention promotes the *rights* of disabled people but is not explicitly anti-capitalist.

If the restrictions imposed on disabled people or migrants stem, at least in part, from capitalist prioritisation of economic productivity, then rights-based agreements will be insufficient to create the change that is needed. Finkelstein refers to disabled people as living in a form of social prison and criticises the rights-based approach promoted by New Labour:

While no one can object to campaigning for ‘rights’ so that the prison in which we live is made more humane ... Nothing less than dismantling the prison and replacing it with a non-competitive form of society can break-down the doors which bar our emancipation. (Finkelstein, 2001, p. 4)

A rights-based approach to disability may not promote the same level of systemic change as the original conception of the social model, but it is motivated by equality. In the current context, to promote the rights of disabled people is a radical alternative to the explicit hostility of welfare reforms. It would therefore be foolish to exaggerate the distinctions; however, this book is arguing to expand the ‘radical social model’, rather than for a rights-based approach.

Co-option and distortion of social model demands

The rapid appeal of the social model led to the language being widely adopted by government and voluntary sector, including major disability charities (Oliver and Barnes, 2012). Some of these charities, according to Oliver (2013, p. 1025), even began to ‘act as if they invented it’. Yet, as Clifford (2020b, p. 195) observes, ‘disability is still predominantly viewed through a pity prism rather than understood to be an equalities issue’. She elaborates that it is probably still the case that ‘the majority of people on the left (and the right) hold ideas about disability that align with an ideology of individualism as opposed to a social model approach to disability’ (2020b, p. 298). In part, the reason for this is that, like many progressive ideas, the meaning of the social model, along with associated demands for ‘independent living’ and ‘choice and control’ has been widely co-opted and distorted (Beckett and Campbell, 2015). Co-opted versions of the social model removed key elements of the original demands. There was no longer focus on the need to address systemic inequalities or to value human life beyond a person’s contribution to the capitalist economy. Instead, hegemonic reference to the social model became reduced to addressing access needs so as to include disabled people in the existing system.

Some attempts to change the meaning of the social model have been explicit, while others have promoted a different approach without overtly acknowledging the distinctions. The Disability Rights Commission established by the New Labour government in 1999 developed a public awareness campaign with billboards stating: ‘see the person, not the disability’. This campaign was widely opposed even by people who would later criticise the

social model (Shakespeare and Watson, 2001), asserting that what is needed is to *address* the injustices not to *conceal* the disability.

Whether as a result of deliberate distortion or lack of understanding of the social model, the meaning has become widely reduced to refer to the need for inclusion, as if the agenda into which inclusion should take place is irrelevant. In 2015, without apparent acknowledgement of the disabling impact of deliberate withdrawal of services and support for disabled people, the Conservative government's Office for Disability Studies claimed to adopt a social model understanding of disability. Instead of being a liberatory framework designed to resist structural inequalities, co-opted reference to the 'social model' removes reference to the disabling impact of capitalism. Publicity for a conference organised by the Institute of Government and Public Policy (2022) regarding 'disability inclusion in the workplace' referred to the need for a social model approach to 'identify the barriers within our organisations and workplaces and work to make spaces accessible and inclusive to all. In doing so, we are able to increase productivity ...'.

The focus on building workplaces that are 'inclusive to all' is inherently exclusive of people with impairments that prevent economic productivity or people in the asylum system who are prevented from working. The notion of 'all' is thereby reduced to those who are valued for economic contribution.

It is perhaps unsurprising that liberal co-opted versions of the social model have become more widely known internationally. In the United States, it seems that the disability justice movement has developed more in accordance with the original social model and in rejection of the liberal co-opted version of the social model. As part of a compelling call for solidarity, Puar (2017, p. 157) criticises what are portrayed as the binary approach of the medical and social models, with particular reference to the need for medical 'repairs' after debilitating Israeli assaults in Palestine. Yet, the original social model neither denies the need for medical treatment, nor the disabling impact of withholding such access. Instead, the primary distinction between the two models is that the medical model frames the individual disabled person as the problem, whereas the social model calls for systemic change to address the disabling impact of inequalities and restrictions which prevent people from meeting their needs. As such, the original social model approach would focus resistance on the disabling impact of military assault, as well as the impact of occupation that prevents people from accessing medical care and meeting other needs.

A key challenge is to avoid demands for systemic change being co-opted and distorted. To resist such pressures, a collaborative movement would need to be clear in its purpose and avoid the lure of ostensibly pragmatic adjustments to current policy, which may provide liberal credibility to improve implementation of government policy but distract from addressing systemic causes or developing alternatives.

The social construction of asylum controls

The relevance of the social model to issues of asylum is manifold. A social model approach could help focus resistance on the socially and politically constructed elements of disadvantage faced by people in the asylum system. As Goodfellow writes:

borders seem as natural as day and night; firming up territories by demarcating where the nation-state begins and ends. We tend to treat them as if they've always been there and always will be. But borders are created and recreated. (2019, p. 35)

The restrictions and regulations that are created by nation-states serve to create what Sharma refers to as some 'people of a place' and other 'people out of place' (2020, p. 114). Legal categories of migration status not only determine who may, or may not enter the territorial entity, but also shape:

conditions of life post-entry, how long they can stay, where they can work, their social and political rights and so on. Discrimination between citizens and certain groups of migrants is not only legal, but often legally required. (Dahinden and Anderson, 2021, p. 18)

Immigration controls disproportionately impact the mobility of poorer people whatever their citizenship (Dahinden and Anderson, 2021, p. 10). Yet, perceived commonality of identity within a nation-state is so entrenched as to create what Benedict Anderson (1983, p. 55) refers to as an 'imagined community' such as to motivate people to die 'for their country'. This 'imagined community' obscures the constructed nature of nation-states and the scope for building alternatives.

Just as hegemonic ableism obscures the constructed nature of organising society that marginalise disabled people, hegemonic ways of referring to migration, frame people who move as if inherently burdensome. As Goodfellow writes: 'by crossing a border, you can cease to be a human being to the people around you, becoming an ("illegal") immigrant or a ("bogus") asylum seeker' (2019, p. 35).

This framing serves to 'homogenise the migrant who is turned, literally into a figure' (Anderson, 2013, p. 69), with immigration statistics framed as always 'too high' (2013, p. 9). Similarly, Bauman's (2004, p. 34) analysis of inequality is applicable: 'There are always too many of them. "Them" are the fellows of whom there should be fewer – or better still none at all'.

As discussed in previous chapters, when entitlement to services depends on migration status, and service providers become responsible for checking people's eligibility, the result is to increase controls on people suspected to have an immigration background. The resultant racism is, however, not new. Legislation outlawing racial discrimination in Britain was introduced in

1965 with overt racism based on skin colour becoming increasingly taboo outside the political far right. However, as Sivanandan (1990, p. 65) argues, 'Racism does not stay still; it changes shape, size, contours, purpose, function'. Anti-racism legislation resulted in what Martin Barker (1981) refers to as 'new racism' avoiding legal repercussions. Ever stricter immigration controls have been justified to control economic resources or avoid social tensions resulting from cultural incompatibility. As Michael Billig (1991, pp. 123–124) describes, policies become 'phrased in such a way that race is never mentioned' and yet, 'as if by magic', white people are prioritised.

The huge public response to images of Kurdi's body, discussed in Chapter 3, may have been caused in part by visual similarities with 'any other boy in Europe' (Hodalska, 2018, p. 210). Media response to Ukrainian refugees in 2022 was riven with overt racial bias (White, 2022), including the shock of seeing refugees who 'seem so like us' (Hannan, 2022); NBC reporter Hallie Cobiella put the issue more bluntly, 'they're white'; and in a BBC interview, Ukraine's deputy chief prosecutor, David Sakvarelidze referred to the emotional impact of seeing 'European people with blue eyes and blonde hair being killed' (cited by White, 2022). In 2023, public welcome to Ukrainians was displayed while refugees from other countries are left to drown in the English Channel, threatened with being sent to Rwanda, or forced into overcrowded, insanitary conditions in 'immigration processing centres' such as was sited at Manston disused airfield in Kent (Bailes, 2022) or the Bibby Stockholm barge. Whether restrictions are promoted with arguments of cultural incompatibility, economic burden or overt racism, the disabling impact is combined with racist inequalities.

Commonalities and distinctions between the sectors

Many commonalities between the experiences of people in the asylum system and the wider population of disabled people have been discussed. The social model of disability was developed to highlight and resist the disabling impact of preventing people with impairments from meeting human needs. People subject to asylum and immigration controls also face the disabling impact of restricted access to services and support. Just as the social model of disability brings together people with different impairments, this could be extended to encompass the differences resulting from different forms of immigration status.

At times, the relevance of the social model is already acknowledged in the asylum system. As referenced, the ICIBI (2019) implicitly adopts a social model approach in the observation that the denial of services 'can increase vulnerability'. If the aim were to address this impact, then the proposed solution would be to improve access to services. However, asylum and immigration policy is not designed to build equality. Therefore, despite acknowledging the causal problem, the Independent Chief Inspector of Borders and Immigration (ICIBI) recommendations are not to improve access to services, but to identify 'vulnerable' individuals in order to demonstrate 'capacity for compassion'

(Bolt, 2019, p. 8). Despite having a social model understanding of the problem, the solution is presented as if an individualistic charity model approach which masks the systemic causes of current inequalities.

A broader movement of solidarity could be created through focusing on the common goals. As Arendt wrote in relation to the French peasantry:

what urged them on was the quest for bread and the cry for bread will always be uttered with one voice. Insofar as we all need bread, we are indeed all the same and may as well unite into one body. (1963, p. 94)

Irrespective of migration status or impairment, if people's needs are framed as the 'quest for bread', it would become apparent that it is not the needs that are 'exceptional' but the barriers that are faced. If the overlapping needs, barriers and achievements of the disabled people's movement and people without migration status are brought together, this could facilitate awareness of the common 'quest for bread'.

There is, however, a risk that focusing on a common quest could potentially obscure the distinctions. As Manjeet explained:

I'm disabled ... we are in the same boat, kind of ... they tell me things to do as a disabled person, you can go here, do this, do that ... But at the end of the day, I'm an asylum seeker, it changes everything. (cited in Yeo and Bolton, 2013, p. 49)

There are some essential differences both in terms of policy and people's experiences. Disability remains a legally protected characteristic. The Equality Act (2010) and the UNCRPD (2006) were at least in principle designed to promote equality with the wider population. In contrast, asylum and immigration policy is not, and never was, even theoretically designed to meet people's needs on an equal basis to those of the wider population. The purpose has always been to distinguish between people considered deserving and people who are not. Therefore, the restrictions imposed on people in the asylum and immigration system cannot be argued to stem from oversight. The inequalities that always existed have simply increased and been extended to the wider population.

Beyond policy differences, there are also some distinctions in the barriers that are faced in relation to different impairments, languages, or cultural backgrounds. But both the disabled people's movement and the migrant justice sector are adept at addressing people's different access needs. When working well, the disabled people's movement routinely adapts and combines approaches to address the access barriers faced by people with different forms of impairments. Similarly, migrant justice sector organisations are accustomed to acknowledging and addressing access barriers relating to immigration status, language and cultural differences. In both sectors, these approaches enable the voices and experiences of people to be

heard who would otherwise be ignored. Bringing the routine provision together could strengthen both sectors as well as build a broader movement.

Recognising common goals and sharing ways to address different access needs is essential. As Clifford (2020b, p. 307) writes: ‘Having members with diverse skills and abilities who face diverse barriers requires a collective effort that is refreshingly interdependent within an increasingly individualistic society’.

However, not all access needs are readily combined. For example, online tools may be useful to overcome physical access barriers, particularly during the most acute phase of the pandemic. This overcomes mobility access barriers for some, but the internet is particularly inaccessible to people living in destitution, including many people seeking asylum. The function of a movement of solidarity is therefore also to adopt multiple approaches that recognise distinctions as well as commonalities in people’s experiences and needs.

The somewhat distinct elements of policy and the barriers that are faced may appear to legitimise separate responses. But as UPIAS (1976) asserted ‘We know that as a small, weak, minority group, disabled people cannot achieve a fully human life by their own efforts alone’. It has always been clear that effective resistance cannot be achieved by separate battles against each manifestation of inequality:

the politics of disablement is about far more than disabled people, it is about challenging oppression in all its forms ... Like racism, sexism, heterosexism, and all other forms of social oppression, it is a human creation. It is impossible therefore to confront one type of oppression without confronting them all and of course the cultural values that created and sustained them. (Barnes, 1996, p. xii)

The benefits of collective resistance go beyond the restrictions imposed on any group. Clifford (2020b, p. 299) calls for ‘engaging in active struggle alongside non-disabled people’ in order to:

make new alliances and to push a social model understanding of disability onto the mainstream agenda ... it is also about being involved in building a wider movement that is strong in order to win a society that is free from all oppressions.

While arguing for the principles of the social model to be extended, it must be recognised that the scale of explicit government intent to restrict access to essential services is far beyond what it was when the original social model was developed. But as deliberate restrictions are imposed on an ever-wider population, the relevance of the original social model becomes ever more pertinent. In their organising work in response to state violence, capitalism and environmental disaster, Kelly Hayes and Mariame Kaba (2023) call for a ‘revolution of reciprocal care’, that promotes our

interdependence. They argue that we need to ‘free ourselves from the strictures of individualism and unite in acts of solidarity and collective care’ (2023, p. 79). These writers and activists are not referring to the disabled people’s movement, and yet social model principles could not be more relevant to their stated goals.

Strategy for building collective resistance

In the current context, some might argue that a strategy focused on systemic change is too ambitious and to reduce the injustice experienced by certain people is better than nothing. The crucial question is whether such an approach is a step towards greater justice or a means of increasing the credibility of wider injustice. Adjusting who is framed as an exception to certain restrictions of asylum and immigration policy does not transform oppression. As has been argued, an oppressive agenda is not transformed by becoming inclusive. Indeed, a focus on inclusion or selecting worthy individuals, risks adding liberal credibility to an inherently unjust system.

The sharing of experiences and insights between people who are already disabled and people who face disabling restrictions irrespective of migration status could enable greater solidarity and collective resistance. Writing with more specific focus on the US context, Puar (2017, p. xiv) writes, ‘the tension between being and becoming, this is the understated alliance’. This distinction is less significant in the original meaning of the social model of disability, developed in the United Kingdom, in which people with impairments are disabled by being prevented from meeting human needs. Nonetheless, there is an ‘understated alliance’ between people facing disabling restrictions of different forms.

The extension of the original radical social model approach could help to bring together the skills and practices of two sectors that are adept at addressing the barriers faced by disabled people, people subject to asylum and immigration controls, and those who face both forms of restrictions. In combination, the routine practices of each sector would have increased, potentially revolutionary, scope to disrupt inequalities by asserting the ‘part of those who have no part’ (Ranci ere, 1999). These steps are essential precursors to developing more effective resistance to systemic injustice and to building a more just world.

The role of lived experience

The insights and expertise that stem from lived experience of the disabling impact of asylum and immigration controls are essential to understanding the current situation and developing alternatives. As Mills (2023) argues:

centring the experiences of those long deemed a ‘burden’ on the state ... does important things for our analysis and for our movement organising

and activism, namely understanding how harm and premature death is baked into systems – not an unfortunate by-product.

Many of the skills and insights necessary to build resistance are developed through the experience of struggle. People who are acutely aware of how the existing system disadvantages them may have greater capacity to envisage alternatives than those who are more privileged or whose upbringing and livelihoods are entrenched in the current system: ‘the master’s tools will never dismantle the master’s house ... they will never enable us to bring about genuine change’ (Lorde, 2018).

Nonetheless, as Clifford (2020b, p. 269) argues, it cannot be assumed:

that those at the sharp end of neoliberal ideology would play a leading role in the fightback ... Space, time and resources have had to be carved out for activism on top of attempting to navigate the ever more wearing daily grind. On the other hand, the one thing disabled people are familiar with, by the very definition of being disabled, is struggle.

In addition to practical needs, it is also necessary to acknowledge and address emotional needs. The ‘scream against oppression’ (Holloway, 2002, p. 73) underpins accounts of disabled people seeking asylum. This can motivate action, but it can also lead to the despondency of despair. This desperation is shared by other disabled people, without additional experiences of migration. As Francisco, a disability activist, explains, ‘the relentless, relentless attacks on disabled people ... people are fighting for existence’. The fight for existence mean that as Holloway (2002, p. 146) writes, ‘we who scream are we who acquiesce’. When survival relies on meeting immigration conditions, then to ‘acquiesce’ may be what is needed to survive.

The claim that people have ‘nothing to lose but their chains’ (Marx and Engels, 2009) is misleading. While people are still alive, there remains something to lose, and the more life becomes a struggle for basic survival, the more chance that one more loss may be fatal. Just months before she died, Manjeet explained that ‘I don’t have the energy ... I myself am in a floating boat, I can anytime fall down’. When people are struggling for immediate survival, it should not be assumed that people have the capacity to lead resistance. This is not limited to injustices associated with disability and migration. With a focus on climate justice, Loach (2023) is critical of assumptions that people facing the greatest disadvantage, must lead the resistance:

The pressure that can be placed on those who have been traumatized to not only find a way to navigate the harm that trauma does to both our bodies and minds but also to be the ones to lead the conversations and find a way out. Rather than standing in solidarity with those who have

been traumatized and supporting them, the call has become instead to platform them, elevating them above everyone else. It is an immense amount of pressure.

Action must be grounded in the realities of lived experience, but solidarity must serve to reduce, rather than impose additional pressure on people at the frontline of injustice.

Sometimes it is a strategic decision to make the additional efforts needed to reach people who face fewer restrictions. The dancer Ayling-Ellis (2022) chose to make a speech using spoken English rather than British Sign Language, because it is the:

best way to get hearing people to listen, and I really want the hearing people in the room to really listen to this speech. Hearing people can learn a new language, they can learn to sign. I can never learn to hear, yet I'm the one making 110% effort to come to your world to adapt to you. [...] We see it time and time again: the minority being made – or rather forced – to adapt to the world designed for the majority.

The blame for lack of solidarity cannot be attributed to any one sector. The failure of the disabled people's movement to contest the restrictions imposed on people in the asylum system may have stemmed from lack of awareness, being absorbed with other struggles, or an active decision to prioritise the experiences of people perceived as peers. Measures to promote the value of sharing insights and experiences could help to raise awareness of common struggles, build solidarity and collective resistance.

The budgetary costs of organising resistance cannot be ignored. Sharing ideas and learning from people who are marginalised, including disabled people in the asylum system may involve addressing physical, emotional and communication barriers. The costs of this rely on the solidarity of allies. If people with lived experience of disabling restrictions lack capacity to organise and lead resistance, then those with greater resources are relied on to shape understanding of problems and develop solutions. The result is that demands for change are easily co-opted to fit into the dominant agenda. Financial contributions to the costs of bringing people together and addressing access barriers are therefore crucial to success.

Compromised positions and potential difficulties of collaborative working

The barriers to a collaborative social model approach must be acknowledged. It is nonsensical to imagine that current inequalities and restrictions will be removed by policy makers who explicitly aim to create a hostile environment. Unless there is fundamental change to the current cross-party consensus regarding immigration policy and welfare reforms, a social model

approach would not help implementation of government policy. It would not therefore be supported by policy makers unless it was first co-opted.

Collective resistance is clearly distinct from collaborative implementation or improved ‘policing’ (Rancière, 1999) of government policy. In her call for the social model of disability to be reinvigorated, Clifford (2020a) points out that not everyone will support the level of change that is needed and that it is essential to ‘identify who are our allies in the project of achieving fundamental social and political change to end not just the oppression of disabled people, but the end of all forms of oppression and exploitation’.

The recognition of allies in relation to the development of a social model approach to asylum is, however, not straightforward. People with many different roles and responsibility currently contribute to elements of policy implementation as well as potential resistance. The value of a social model approach depends on organisational aims and focus.

Legal representation clearly has a crucial role in supporting people to access rights and is playing a leading role in resisting recent government measures that remove people’s rights, but it may be less effective as a means of achieving systemic change. Many voluntary sector and Disabled People’s Organisations carry out vital work providing for people’s essential needs. Without funds, capacity to provide such support is limited and staff livelihoods are at stake. But there are inevitably conditions attached to funding. Organisations that are reliant on government funding or influence are inherently limited in their scope to contribute to resistance. Whether at the national or local levels, government funding is only ever offered to improve policy implementation, not to build resistance. Such funding may therefore support organisational survival, provide resources for symptomatic relief of immediate struggles but compromise capacity to contribute to resistance. Organisational survival may rely on balancing priorities. The compromised capacity is not so damaging if it is overt but voluntary sector organisations are often widely considered to be the voice of resistance. Therefore, it is particularly damaging to the scope for resistance if such organisations are complicit in redefining once progressive concepts.

The detrimental impact of compromised roles is particularly apparent when the voluntary asylum sector works in collaboration with the Home Office. After Manjeet’s asylum claim was refused, she was due to be evicted and would have become street homeless. She sought help from a voluntary sector organisation but was advised to return to her country of origin. Instead, she showed the power of bringing sectors together in solidarity. Together with others in the asylum system, disabled people and allies, she organised a protest which gained significant media coverage. She recalled:

there were people outside with placards. It was a big thing on the news ... That’s when I got a call from the Home Office that I should go to xx and fill out the section 4 form ... I said, ‘But I went yesterday, they refused me’.

The Home Office contacted the voluntary organisation that had previously refused to help and called for her to be supported. As she put it, 'imagine that!'. She was clear that the media publicity was influential in her support being reinstated.

The potential benefits and risks of action

According to Manjeet, one of the consequences of her protest was that service providers feared that she could instigate another public campaign and, therefore, became more attentive to her needs: 'I'm in an organisation and I have support and it can go on the media'. She recounted several further occasions when she believed that her agency resulted in preferential treatment. Unlike other people seeking asylum, she was shown possible accommodation and asked if it was appropriate. As a wheelchair user, her agency in this context was amplified by the visible impact of the vulnerability associated with the threat of being made street homeless. This visible impact may be a mobilising force for resistance. As Butler (2015) argues, 'The very meaning of vulnerability changes when it becomes understood as part of the practice of political resistance'. What Manjeet perceived as relative advantage may also stem from being an articulate, assertive English speaker with good understanding of how the system works. Unlike Maria, she had no false expectation that asylum decisions take place in public meetings and therefore understood how to assert influence. Initiatives are needed to increase understanding of how the system works and therefore where resistance should be effectively targeted to meet people's needs as well as to build longer term resistance.

Not everybody's experiences of taking visible roles in leading resistance are as successful as Manjeet's. After taking high-profile roles in public campaigns, Ana recalled receiving a negative decision on her asylum claim. In her perception, resistance is dangerous. In contrast, Irina believed that her role in public campaigns protected her. Lack of transparency in decision making makes it difficult to know who is correct. It is important to acknowledge the potential risks associated with being seen to take a leading role in resistance, but leadership can involve contributing ideas, experiences and skills without this needing to be public. The mantra 'Nothing about us, without us' is as central to demands for a social model approach to asylum as it is to disability. The knowledge and insights developed through lived experience of disability and seeking asylum are essential but when people are struggling for survival, the solidarity of allies is essential. All individuals and organisations have limited capacity. A core function of a social model approach to asylum would be to create a movement of solidarity in which roles can be shared according to skills and capacity, enabling people to contribute when and how they are able, without exacerbating the precarity of people's struggles.

Conclusion

A social model approach could help to bring people together in a broad-based movement focused on sharing insights from different experiences, building solidarity and collective resistance. Such an approach could help focus on: addressing the full range of access needs that make up our interdependent existence; the inequalities in the ways that society is organised to systematically prevent some people from meeting their needs; valuing human worth beyond contribution to the capitalist economy. This could bring together the skills, experiences and energies of people facing disabling restrictions, irrespective of migration status. There should be no doubt that if this approach appeared to be successfully building resistance to current approaches, there would be efforts to co-opt and distort key demands in the same way as has occurred with numerous other demands that were once progressive. The solidarity of a broad movement would need to be focused on the causes of injustice to withstand such pressure. Providing solidarity and paying attention to the perspectives of the most marginalised people is not a tokenistic sign of benevolence. Instead, insights developed through experience of marginalisation could enable resistance to be focused on the injustice of current restrictions. With the shared skills, capacity and solidarity of a broad movement, attention could be focused on the demand for a system in which support and services are provided on the basis of need and common humanity.

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Figure 10 Action to build solidarity and collective resistance is needed to remove the barriers that separate us.

Concluding comments

Building a movement for justice

This book began with Nushi's exasperated assertion that it 'makes no sense' to evict him after his mental health improved. He was well aware that without a safe place to live, his health would deteriorate until he would again be entitled to support. The contributions of people with lived experience of disability and of immigration controls have shown that he is not alone in experiencing systematic restrictions in meeting basic human needs such as to reduce life to a struggle for survival. These restrictions would 'make no sense' if the purpose were to provide for people's needs, to promote equality or even to make economical use of public resources, but as this book has shown, neither asylum and immigration policy nor welfare reform is designed for these goals. Instead, ever greater restrictions are imposed on people framed as a burden on state finances to create a system that is highly profitable to private contractors, blames individuals for their own misfortune, and promotes public hostility towards marginalised people. A social model approach to disability or asylum and immigration would not help with these goals. Therefore, if government bodies proclaim support for a social model approach without significant policy change, it is simply an indicator that the language of the disabled people's movement has been co-opted and distorted. Instead, as Clifford argues: 'We must raise awareness that an alternative is possible – one with different forms of human relationships, personal development, and interdependency that we cannot even imagine from the constraints of our current position' (Clifford, 2020).

The book has argued that there is urgent need for action to address current injustices and to prevent similar restrictions from being extended to an ever-wider population. The experiences of people facing intersectional struggles could provide the impetus to share insights between sectors with which to build a broader movement of solidarity and resistance.

The extent of people's struggles and the immediacy of threats to life mean that action to address symptoms of injustice must be adopted. It is however essential to avoid exclusively focusing on immediate symptoms and reinforcing perceptions that the causes of injustice are insurmountable. Activist Mia Mingus (2011) explains:

I am done with disability simply being ‘included’ in able bodied people’s agendas and lives only when it’s convenient. I want us to tap into the transformative powers of disability, instead of only gaining access to the current system ... We don’t simply want to join the ranks of the privileged, we want to challenge and dismantle those ranks and question why some people are consistently at the bottom.

This concluding chapter summarises the key arguments, the barriers to change and how intersectional injustices could prompt wide reaching change to the benefit of all.

Current situation and its origins

The first step to addressing current injustice must be to acknowledge what is taking place. When entitlement to services depends on criteria beyond human need, some people are denied access to services and their lives become framed as dispensable. Increasingly draconian immigration policy and welfare reforms amplify the urgency for new forms of resistance.

The Illegal Migration Act (2023) increases the restrictions and the disabling impact of immigration policy. People will be detained on arrival in the United Kingdom. Previous avoidance of detention and physical force on pregnant women and children is being reconsidered, with the overriding duty to detain people for the purpose of removal. The UNHCR (2023) describes the legislation as ‘an asylum ban – extinguishing the right to seek refugee protection in the United Kingdom for those who arrive irregularly’. The removal of the right to claim asylum will further increase the disabling impact of immigration controls. In this situation, increased numbers of people will avoid immigration authorities where possible. This will entail also avoiding use of wider public services, including health, social care and education, where data would be shared.

Despite frequent reference to the financial burden of asylum support, new policies are not designed to reduce the cost. Instead, asylum policy enables a transfer of responsibility and resources from the state to highly profitable private sector providers of accommodation, detention and security. The new legislation and restrictions are introduced while safe routes of entering the United Kingdom have been removed, forcing people to make perilous crossings in small boats with resultant loss of lives.

Meanwhile, if the Health and Disability White Paper (2023) becomes policy, disabled people will be forced to seek paid work, irrespective of the barriers. The planned policy changes have been introduced despite significant evidence (Pring, 2019; Mills, 2023) that denial of services and support in existing welfare reforms have already resulted in many lives being lost.

It would be wrong to suggest that nothing has changed in relation to intersectional struggles in the asylum system in recent years. There is undoubtedly increased awareness of at least some of the injustice that takes

place. This does not, however, mean that there is widespread action to address the causes of these struggles. More than half a century ago, as part of his argument for establishing the NHS, Bevan (1952, pp. 177–178) stated that:

capacity for emotional concern for individual life is the most significant quality of a civilised human being. It is not achieved when limited to people of a certain colour, race, religion, nation or class. Indeed, just to the extent that this or that group commands our exclusive sympathy, we are capable of the most monstrous cruelty or at best indifference, to others who do not belong to the group ...

Bevan's warning of the capacity for 'monstrous cruelty' could have been written many decades later to describe the restrictions imposed on people seeking sanctuary, disabled people and the intersection. Current struggles are not the result of oversight but the logical and predictable result of deliberate policy and practice.

Whether because of misunderstanding or conscious misrepresentation, the meaning of disability in the context of immigration is widely framed as if distinct from elsewhere. The original social model (UPIAS, 1976; Oliver, 1983) focused on the disabling impact of restrictions and inequalities that prevent people from meeting their needs. The deliberate denial of services and support for people subject to asylum and immigration controls causes new impairments, and further disables people with existing impairments. When the social model was first developed, at least some of the barriers could be argued to result from oversight. However, the restrictions imposed on people in the asylum and immigration system are explicitly designed to restrict access to services and support. Yet, despite increased acknowledgement of the existence of intersectional injustice, the few initiatives that exist in relation to disability in the asylum sector are not designed to remove these restrictions but to identify individuals considered to have 'exceptional' needs.

These initiatives are often framed as if innovative and taking place in an ahistorical vacuum. This book has argued that the development of effective solutions may require understanding how current policies and practices have developed. As outlined in Chapter 2, there were always exceptions to the 'universal' rights in post-Second World War international and national initiatives. It was an easy matter to extend the scope of exceptions in subsequent years. The Immigration and Asylum Act (1999), introduced in the early years of the New Labour government, removed entitlement to the welfare state if a person was claiming asylum. The same year, Prime Minister Tony Blair set out his vision to modernise the welfare state through making entitlement to support conditional on evidence of individual responsibility. This approach enabled the shift of focus to individual blame which was core to the reduction of state services in later welfare reforms (2009, 2012). As

discussed in Chapter 3, subsequent governments have gradually increased and extended restrictions in the form of greater immigration controls, wider welfare reforms and public service cuts (Adler, 2018; Ryan, 2019; Clifford, 2020). Ultimately to address the disabling restrictions in any sector requires political change. When considering how to create such change, it is essential to recognise the parallels between government departments and across mainstream political parties. Government practices in any sector are shaped by a larger policy agenda. Moreover, the careers of politicians and civil servants are characterised by shifting regularly between departments. Therefore, the parallels between different elements of policy are to be expected and it is unlikely that one area of policy will be successfully transformed in isolation.

The restrictions imposed on people in the asylum system are complemented by Home Office initiatives to identify individuals considered to be deserving or worthy of 'compassion'. Euphemistic labels of 'vulnerability', being 'at risk' or having 'exceptional' needs are used which avoid direct reference to disability, and dissociate people in the asylum and immigration system from the wider population. In the context of the deliberate nature of current inequalities, initiatives to identify people framed as deserving become tools that, complement and reinforce the assumed legitimacy of ever greater hostility and restrictions imposed on those considered undeserving. The lack of initiatives to address the restrictions that cause ongoing struggles is perhaps unsurprising given that the Home Office exists to implement government policy, and that asylum and immigration policy is designed to determine who may enter or remain in the United Kingdom, rather than to meet human needs or promote equality. In this context, it is to be expected that Home Office initiatives are designed not to contest, but to improve implementation, or the 'policing' (Ranci re 1999) of government policy.

What is perhaps more surprising is that as discussed in Chapters 4 and 5, despite frequent criticism of wider Home Office approaches, the voluntary asylum sector and community initiatives frequently endorse Home Office initiatives towards selected individuals rather than promote and build on the insights and achievements of the disabled people's movement. The result of this individualistic response is to obscure the disabling impact of preventing people from meeting human needs and to lead a regressive shift from the collective focus of the social model of disability.

The ostensibly pragmatic focus of endorsing initiatives that select individuals worthy of reduced restrictions focuses attention on the symptoms rather than the causes of injustice. Policies that are deliberately designed to restrict access to services and support cannot be resisted by seeking exceptions considered worthy of support. Without negating the value of measures to relieve immediate struggles, unless clear distinctions are made between symptoms and causes of injustice, relentless work to reduce symptoms risk reinforcing perceptions that systemic change is unachievable. Just as racism cannot be addressed by identifying people who are particularly Black, or

sexism by finding people who are particularly feminine, intersectional injustice cannot be addressed by selecting individuals considered particularly worthy of compassion.

Whether in the asylum system or beyond, identifying exceptions or adjusting the criteria for entitlement cannot address systemic injustice. With reference to activism against immigration detention and deportation in the United States, Nancy Hiemstra warns that:

it is critical that we remember the goal is not to bring order to the chaos to just build a better 'D and D system' [detention and deportation] ... Instead, those working for change must target the driving forces behind the existence of the system. We must therefore work for broader structural changes regarding the economic dependencies that have been created, the intimate ties between corporations and policymakers, and the popularity of anti-immigrant discourse. (2016, p. 72)

Similarly, but focusing on the lives lost due to the conditionality and sanctions that restrict support in the welfare system, Mills (2023) writes scathingly of those who attribute injustice to 'flaws': 'When this violence is named only as a "flaw", it risks implying the system is broken, rather than functioning as it was designed. "Flaws" channel our energy into correcting and reforming a violent system'.

If action is focused on mitigating the impact of violence inherent in a system that actively prevents people from meeting human needs, then however many initiatives are created and however much energy is directed into implementing these initiatives, there will always be more examples of injustice.

There is an important distinction to be made between adjusting symptoms of injustice and the process of organising for radical change. With focus on the violence of occupation in Palestine at the time of her writing, Puar (2017, p. 140) describes the incompatibility of policies that 'debilitate' and those that promote 'disability as a socially maligned condition that must be empowered to and through a liberal politics of recognition'. Similarly, initiatives that ostensibly recognise the needs for selected disabled people to be included in existing systems may provide liberal credibility which then obscures the disabling impact of wider restrictions. New approaches are needed to enable action to address people's immediate needs as well as to address causal injustice.

Collective resistance to intersectional injustice

As this book has shown, there are increasing similarities between the restrictions imposed on people in the asylum system and on the wider population of disabled people. As argued in Chapter 6, a social model approach could focus resistance on the disabling impact of preventing people from meeting human needs irrespective of migration status or impairment. The restrictions that

people face may stem from multiple overlapping sources, including immigration controls, racism, ableism and the prioritisation of profit that is inherent in capitalism. The source of the restrictions does not alter the disabling impact. A social model approach could enable alternatives to be developed that prioritise meeting human needs rather than assessing degrees of entitlement.

Experiences of intersectional injustice could be understood not as those of an insignificant minority or as worthy exceptions but instead as highlighting the need for collaborative solutions. Interventions by the disabled people's movement over previous decades successfully contested individualistic medical or charity model representations of disability. The social model shifted the focus to collective responsibility to address the inequalities that prevent people with impairments from meeting human needs. The social model has been widely co-opted and distorted to become reduced to the goal of removing the barriers that prevent people from contributing to society and more specifically to the labour market. This book has focused on the relevance of the original social model (UPIAS, 1976; Oliver, 1983), or what Finkelstein referred to as the 'radical' social model, designed to build resistance to the disabling impact of restrictions and inequalities imposed on people with impairments. Extending this approach to the restrictions imposed on people subject to asylum and immigration controls could help to bring together two movements of resistance that are too often separated, 'disrupt inequality' (Rancière 1999) and build alternatives to current injustices. Collective resistance could be targeted at the disabling impact of preventing people from meeting human needs, irrespective of migration status or impairment.

The rapid appeal of the social model of disability when it was first developed and the clear relevance to the impact of asylum restrictions, might suggest that extending it would be straight forward. However, it cannot be stressed often enough that the restrictions imposed on people in the asylum system are the result of deliberate policy. A social model approach focused on resisting the disabling impact of these restrictions is counter to such goals and will therefore not be supported by those designing or implementing government policy. Instead, a broader movement of mutual solidarity is needed based on horizontal collaboration between people subject to asylum and immigration controls, the disabled people's movement, and allies of both.

The normative value of consensus may be appropriate if problems result from oversight, but both welfare reforms and immigration policy are deliberately designed to limit access to services and support. Collaborative implementation or improved 'policing' (Rancière, 1999) cannot address restrictions that result from deliberate policy. The scope for resistance is limited if there is a liberal façade of consensus that relies on ignoring or excluding dissenting voices. When organising a public event, an employee of an asylum voluntary sector organisation advised me not to involve one disabled person because she 'gets angry'. As bell hooks (1996, p. 12) argues, white people being 'unable to hear black rage' results in the rage remaining 'trapped in the realm of the

unspeakable'. She refers to the silencing of rage as the 'sacrificial offering' made to 'gain the ear of white listeners' (1996, p. 13). Avoidance of 'rage' limits the agenda to 'policing', or the 'partition of the sensible' (Rancière, 2010, p. 46), thereby reinforcing the 'common-sense' consensus that adjustments to current inequalities is the most that can be achieved.

The 'scream' of injustice or the resignation of despair may contrast with contributors with wider roles and responsibilities. A committed activist focused on the restrictions faced by disabled people seeking asylum takes a measured, and apparently pragmatic approach, seeking to influence government policy and practice without overt sense of rage or despair: 'it's that interesting thing of like, they're taking on board what we're saying but it's government, so it's slow'. This approach may achieve some reforms but the liberal appeal of consensus with those designing and implementing inequalities cannot address the impact of restrictions that stem from deliberate policy. The development of this wider resistance relies on 'rage' (hooks, 1996), 'dissensus' (Rancière, 2010) or the 'scream' (Holloway, 2002) of injustice. For this purpose, it is essential not only to avoid silencing the urgency and anger of those at the sharp end of injustice but to actively engage and enable the rage of 'those who have no part' (1999, p. 123) to provide the impetus for change. Only when the scale of injustice and the scope for change is acknowledged, can systemic alternatives be developed. Bringing together the experiences and achievements of the disabled people's movement with those of people in the asylum system could provide peer support to help transcend the 'scream of despair' into the energy of resistance to develop the urgently needed alternative ways of organising society.

The small body of literature on issues of disability and asylum, frequently refers to lack of knowledge as if this were non-controversial. This assumption is, however, only valid if the knowledge that stems from lived experience is disregarded. If expertise is assumed to be associated with power, then the 'subjugated knowledge' (Bê, 2019, p. 1) or 'crip-specific knowledge' (Johnson and McRuer, 2014), developed out of lived experience of disabling systems is systematically subdued.

Promoting the knowledge and insights that stem from lived experience is not to suggest that such experiences automatically result in understanding the causes of injustice, the commonalities with other groups, or having prepared solutions and routes to justice. As Loach (2023) argues:

Just because you have had certain experiences, does not guarantee that the vision for a future you are working towards is one that tackles those issues at their roots. Having people who have lived experience of being oppressed is of vital importance but only if they are bringing the vision for liberation of the oppressed with them.

It is essential to avoid the damage that has routinely been done for example by non-disabled people claiming to speak on behalf of disabled

people. But, as explained in Chapter 6, it is also essential to avoid assuming that people with the most acute experiences of injustice must take additional responsibilities and leadership of movements for justice, unless such roles are chosen. A broad-based movement is needed, based on shared learning, effective solidarity and collective resistance. Such a movement should reduce, rather than impose new pressures on people who are already on the frontline of injustice. The lack of collaborative approach to disability and migrant justice over recent years is, however, perhaps indicative of the barriers.

Barriers to change and how they might be addressed

Beyond immediate contacts, public understanding of other people's experiences relies on social or wider media representations. These representations are not neutral. Government officials were criticised by the UN investigation (2016) for making unsubstantiated accusations about disabled people that encourage negative media reports and public hostility. In 2023, the Minister for Disabled People, Tom Pursglove MP, tweeted pictures of himself wearing a bullet proof vest supposedly to address fraudulent benefit claims (Topple, 2023). Similarly, Prime Minister Rishi Sunak's (2023) prioritisation of 'stop the boats' frames people arriving in the United Kingdom in 'small boats' as if a threat to themselves and the wider population. This perspective is promoted across mainstream media. In the absence of other information, attention is directed towards how to 'stop the boats' with public anger targeted at marginalised people rather than at the lack of safe migration routes or the disabling impact of restrictions.

To create a movement of resistance without media representations, it is necessary to find ways to promote regular interaction between people with different experiences. Without contact it is hard for people to share ideas, learn from each other and build a movement of solidarity. Action in relation to disability in the asylum system, or asylum in the disabled people's movement can then become framed as if innovative, disconnected from the broader asylum system, or the history and achievements of the disabled people's movement. The philosophical notion of underground power through which rhizomatic plants gain their strength is described by Gilles Deleuze and Félix Guattari (1987, p. 7) as 'ceaselessly established connections between semiotic chains, organizations of power, and circumstances'. Such connections are needed to share ideas and insights beyond people's immediate experiences.

A liberal approach to injustice may promote awareness raising as if an end in itself. Information and direct interactions are necessary elements of building a movement of resistance but more concerted strategy is needed to address structural inequalities or the explicitly punitive impact of preventing access to services. Russell and Malhotra argue against those who imply:

that by erasing mistaken attitudes, society will accept 'difference' and equality will flourish. This approach diverts attention from the mode of

production and the concrete social relations that produce the disabling barriers, exclusion and inequalities facing disabled persons. (2002, p. 212)

Liberal reforms and awareness-raising cannot address the deliberate hostility directed at people in the asylum system, which is being increasingly extended to the wider population, particularly, but not exclusively, directed at disabled people.

Accounts of the human impact of systemic injustice may build empathy to counter wider political representation. The writing and international profile of Nujeen Mustafa (2016) serves to raise awareness of the barriers that must be addressed by wheelchair users seeking sanctuary. But as Sara Ahmed (2014) warns, without awareness of systemic causes or how to contribute to change, public interest can wane, and examples of ever more stark injustice are required to regain attention. There is a risk that stories of suffering become commodified as a perverse form of public entertainment. Walia (2021) asks, 'why is my humanity only cared about when I share stories of victimisation'. A variety of approaches at building a movement of resistance are needed but it is important to be clear about the purpose and the limitations.

Alongside the need for human stories there are frequent calls for improved data. Suggestions that improved statistics are needed on the number of disabled people in the asylum system presuppose that lack of data is the barrier to change and that accurate statistics are possible in the context of disabling restrictions. More importantly, if people's lives are considered dispensable and if restrictions are explicitly designed to create hardship, then it is counter intuitive to imagine that statistical data and examples of struggle would result in significant policy change.

In mainstream discourse, the innate value of the lives of disabled people and people without migration status is routinely dismissed. People are framed as if optional extras in a society, or in Schinkel's words, migrants are 'those who might not have been here' (2022). People who drown in the English Channel or in the Mediterranean are referred to in media reports with approximate numbers. The news is the apparent threat of people trying to reach Europe, rather than the tragic loss of individual lives.

The restrictions imposed on people in the asylum system and on the wider population of disabled people not only frame people as if they 'might not' be here but also prevent people from being fully 'here'. Disregard for disabled people's lives as the COVID-19 pandemic progressed is indicative of the barriers to a social model approach. The disabled people's movement has always argued that temporary experience of the impact of disability is an ineffective means of building empathy or effective change. The lockdown introduced at the start of the pandemic provided many non-disabled people with their first experience of restricted mobility. This did not appear to increase subsequent empathy or motivation to remove ongoing restrictions faced by disabled people or people in the asylum system. Instead, as Mingus (2022) argues, it may have increased the fear of disability:

We are your feared present and your inevitable future. We are what age and time promise more than anything else, and this is one reason you fear us and why you have continually pushed us away and hidden us. You don't want us too close, don't want a daily reminder of difference and privilege; you don't want to have to change your life for us. We are to be landfilled away, conveniently forgotten about so you can play pretend without interruption.

The exclusion of people with mobility restrictions, or who seek to avoid COVID-19 infection, including at least 500,000 people with compromised immunity (organising with the hashtag #forgotten500k) is generally ignored or framed as if a price worth paying for the return to pre-pandemic normality for the wider population. The eugenics of framing certain lives as dispensable has become normalised with little apparent public concern about the systematic exclusion of disproportionate numbers of disabled people. The presence of people considered economically unproductive is framed as if an optional extra, with public hostility 'channelled towards those groups within the population ... who are imagined to be a parasitical drain and threat to scarce national resources' (Tyler, 2013, p. 9). If the overriding objective is the prioritisation of profit in a capitalist economy, then the lives of people framed as a burden are insignificant.

The barriers impeding an intersectional movement are not unique to issues of disability and migration. Focusing on the experiences of trafficked women, Sharma asserts the need for feminists 'to contest global practices of exploitation and abuse' through intersectional resistance and solidarity: 'Feminists intent on securing social justice therefore need to make central to their praxis, the elimination of all immigration controls and the eradication of those sets of social relations organised through global capitalism' (2005, p. 106).

While agreeing with the need for such solidarity and shared learning, as Mouffe (1988, p. 42) explains, 'there is no automatic allegiance between different struggles against oppressive discourses'. Radical democracy requires the linking of expertise and experience from diverse forms of struggle to create 'new subject-positions that would allow the common articulation, for example, of anti-racism, anti-sexism, and anti-capitalism' (ibid.). She does not refer explicitly to disability and migration, but her analysis is very pertinent. Without cross-sectoral exchange of ideas and information, people are unlikely to avoid reinforcing the hegemony.

The 'silences' (Bacchi and Goodwin, 2016, p. 20), or what is left unproblematised, limit perceptions of solutions to what currently takes place. As Einstein famously warned: 'we cannot solve our problems with the same level of thinking that created them'. Bringing together the knowledge and perspectives resulting from disability, migration and their intersection, each sector can gain insights and broader awareness.

One of the biggest impediments to meaningful change is when demands become co-opted and reduced to 'policing' or adjustments that improve the

efficiency of the social order. Ferguson (2017, p. 128) argues that neoliberal ideology repeatedly appropriates ‘progressive sounding ideas’ to use ‘for less than progressive ends’. It is no coincidence that so many principles and goals from the disabled people’s movement have been co-opted and distorted to become tools for policy implementation. It may be that the term the ‘social model’ has become too co-opted and distorted to be of value. Perhaps we must accept that the originally radical anti-capitalist meaning of the social model has gone and that to use the term is no longer the rallying cry for liberation that it once was. But if language and concepts are co-opted it may be indicative of the perceived threat and could therefore be seen as a reason to redouble our efforts. Perhaps we should resist the pressure to continually develop new terms as progressive concepts are continually co-opted and distorted. If a movement for justice is rooted in its purpose, then the co-option of words is less important than attempts to shift the focus from the level of change that is needed. It can be assumed that whenever efforts to change the social order appear to be gaining influence, there will be concerted efforts to co-opt and draw the energy into implementation or ‘policing’ of existing policy.

Just as there have been continual attempts to co-opt and distort the meaning and power of the social model, collective resistance to racism has been widely co-opted. The inclusion of black, brown and/or disabled people in positions of power does not, and will not, alter systemic injustice in itself. Loach argues against acceptance of ‘cosmetic inclusion’ in the wider movement for justice. She warns that ‘diversifying a system without changing anything about the structural oppression, simply allows that harmful system to adapt for longer, to appear improved, seem more relevant and evade necessary criticism’ (Loach, 2023).

As she continues, we ‘don’t want diversity in who gets to be the oppressor, we want oppression to be gone’. The scale of popular support for the Black Lives Matter movement resulted in elected leaders and commercial companies professing support irrespective of their previous or subsequent action to address racism. The words ‘Black Lives Matter’ were painted by municipal workers in major cities across the United States. Hayes and Kaba (2023, p. 106) describe this as ‘co-optive efforts to placate outraged public and to depict nervous mayors and other rattled officials as “allies”’. The lettering was a response to the scale of public anger rather than indicative of policy change. According to Hayes and Kaba, sometimes the officials commissioning the lettering also play ‘key roles in perpetuating – and sanctioning – police violence’. Frequent attempts to co-opt and distort progressive demands highlight the need for a movement of solidarity to share roles and provide mutual support while maintaining focus on creating a just and sustainable social order based on common humanity.

Many barriers to change can be easily addressed once acknowledged. People facing the immediacy of struggles may not have the energy and capacity to lead a movement for change. Nonetheless, with solidarity, people

facing intersectional restrictions could play a leading role in shaping strategy and direction. Similarly, if the funding or working relationships of voluntary sector organisations limit capacity to criticise certain institutions then these organisations could instead support others with resources, contacts and shared learning. A broad movement of solidarity could enable people to contribute in ways that are within their capacity. Inevitable attempts to co-opt and distort progressive goals can be prepared for and the focus can be maintained on the goals rather than the terminology.

Wider relevance

This book has focused primarily on the experiences of people in the asylum system in the United Kingdom, some elements of analysis are therefore specific to this context. However, the principles of the social model and the need for collective resistance has wider relevance. For example, reliance on individual vulnerability as an indicator of eligibility to support is not restricted to the United Kingdom. As discussed in Chapter 3, Ticktin (2011, p. 31) explains that support for undocumented migrants in France relies on notions of victimhood: ‘those who hope to be regularised must prove to be the exception’ (ibid.). In this context, to be labelled as ‘vulnerable’ is to be considered deserving. Similarly, according to Daniel Howden and Metin Kodolak (2018), the only way to escape the Greek refugee camp Moria ‘is to be recognized as a “vulnerable” case’ and thereby win the ‘Vulnerability Contest’. In a similar way to the UK situation, a person’s survival therefore relies on what Smith and Waite (2019, p. 9) refer to as ‘performed’ or visible vulnerability. To be entitled to support, people must show that their suffering is not their fault, framing themselves as exceptions to neoliberal assumptions that individuals are architects of their own misfortune.

As referenced in Chapter 3, the scale of migration to Germany has vastly exceeded that to the United Kingdom in recent years. In 2016, there were 722,265 (Eurostat, 2018) new applications for asylum in Germany compared with 39,240 in the United Kingdom. Despite the huge difference in numbers, inequalities of support appear broadly similar to those in the United Kingdom (Yeo, 2017). A Syrian family with a small child with physical impairments described the kindness and generosity of neighbours who became a form of extended family. In contrast, a middle-aged blind man, also from Syria, was experiencing significant mental distress, at least in part stemming from the isolation of living in a small flat with no social contact and nowhere to go. If support depends on kindness and generosity, then it also depends on the appeal of helping someone. A small child with physical impairments is fun to be with in a way that a blind man experiencing mental distress is not.

The violent impact of state discourse of inclusion is criticised by Puar (2017, p. xvii), arguing that this agenda instrumentalises the category of disability while obscuring the ways in which ‘debility’ is produced and sustained. Puar’s notion of the ‘right to maim’ is not written in relation to

UK immigration and asylum policy but is highly relevant. The disabling impact of the state's right to withhold access to services and support, can also be understood as the 'right to maim'. Demands for a system based on common humanity and without hierarchies of human worth, extend beyond the restrictions of national borders.

Pragmatic utopianism

There is a need for what Loach (2023) refers to as 'pragmatic utopianism', or action that is grounded in current reality but focused on the goal for 'oppression to be gone'. While maintaining a focus on the end goal, there is an ethical responsibility for campaigns to be clear as to what is achievable in what time frame. Ana described her anger and disappointment that a campaign to 'close down Yarlwood' detention centre was framed as successful by organisers and yet failed in its overt, and for her the only meaningful aim. The result was to add an additional burden of disappointment to her mental health, creating resistance to further action. There is a difficulty in creating campaign objectives that meet everyone's priorities. A large protest at Yarlwood may appear successful to some but is an exhausting and alienating irrelevance to others if the goal to close it down is not actually achieved.

In the current context, the call for entitlement to services to be based on need may appear naively idealistic whether in the national or the international context. Irina recalls her intersectional needs being framed as too complicated and therefore as a reason for nobody to provide support. The complexity of asylum policy and welfare reform would, however, be vastly simplified if entitlement were simply dependent on human need. Identifying individuals considered worthy of support and developing categories of entitlement would become redundant.

Justice cannot be achieved if the causes of injustice are not addressed. The notion that it is too radical to call for entitlement to support to be based on need is indicative of how entrenched inequality has become. The normalised adoption of 'necropolitics' to deter people from arriving in Europe, and the increasingly punitive policies towards disabled people, might suggest that solidarity and provision for people's needs would be a radical response. But when a person falls and hurts themselves, to offer help is a normal human response rather than a radical act of compassion. In routine social interaction to ignore an injured person, or to assess their economic contribution before helping would be considered inhumane. In her book *It's Not That Radical*, Loach writes of her belief that empathy is the default human response: 'Our default is to connect with and love each other. It is the oppressive systems around us that have worked to separate us and chipped away at our innate ability to experience empathy' (Loach, 2023).

It might be argued that the natural response to help is reduced if the need is far away or affecting strangers. But despite the increasingly draconian restrictions of government policy, public reaction to the death of Alan Kurdi

or the rapid grassroots organising of mutual aid groups and the support for people considered to be particularly at risk at the start of the COVID-19 pandemic can be seen as counter-hegemonic expressions of solidarity. Hayes and Kaba argue that examples of spontaneous mutual aid are not more widely shared in mainstream culture because ‘our collective capacity for care ... does not reinforce state hierarchy. It does not reinforce individualism’ (2023, p. 76). Similarly, when the original social model, promoting collective responsibility and radical structural change, became the basis for organising it was co-opted to prevent a threat to a culture of neoliberal individualism. The potential for ongoing collective response to the deaths of people seeking sanctuary or to the uncontrolled spread of the pandemic, was quelled by government promises of minor adjustments towards certain refugees or measures targeted at people framed as ‘vulnerable’ to COVID-19.

The default human response is overridden when people are dehumanised. As Tyler writes, ‘it is only when publics no longer see those seeking refuge as human beings that state governments can openly and unashamedly engage in practices of segregation, incarceration, expulsion, and torture’ (2020, pp. 124–125).

When the mainstream media promote government assertions of threat from marginalised people and the public lack direct contact with information about alternatives, then natural responses to support each other may be squashed. Nonetheless, if current inequalities are socially constructed, then the issue is not *whether* change is possible but *how* it can be achieved.

It is easy to lose sight of the gains that have been achieved and to feel overwhelmed by the scale of change that is needed. The media does not readily share examples of successful solidarity. The social model itself was developed by disabled people in response to lived experience of restrictions and injustice. The UNCRPD was achieved through international collaboration of disabled people. The big success stories of immigration resistance in recent years have been examples of solidarity. An immigration raid was halted in Kenmure Street in Glasgow (Brooks, 2021) by people filling the street and preventing vehicles from leaving. A deportation flight from Stanstead airport was halted by 15 activists (Smoke, 2021). These actions indicate the power of solidarity and collective resistance.

The restrictions imposed on disabled people in the asylum system may appear to others as if too much injustice to contemplate. Yet, ignoring the experiences of a marginalised minority comes with a cost. Analysis in this book has shown that many policies are gradually extended to a wider population. The increasingly existential threats to all require collective solutions. Mingus (2022) warns that:

You may have been able to avert your eyes from state violence, poverty and crisis, but what about when the very air you breathe becomes a threat? What about when there is nowhere left to escape climate disasters? Individual safety by itself is a myth. There is no individual safety without collective safety ...

If the injustices experienced by disabled people in the asylum system are insufficient motivation to develop new forms of resistance, then the ever more imminent threats to a wider population must change that reluctance.

Beyond capitalism

The initial proponents of the social model argued that while human value is associated with economic contribution, people with many forms of impairment will remain disadvantaged. Similarly, it can be argued that the economic contribution of newly arrived people in the asylum system is limited by factors such as trauma, language barriers and lack of recognised qualifications. While society is structured to prioritise profit, people whose impairments or experiences of migration limit capacity to contribute to a capitalist economy, will always be seen as a burden, the cost of which should be reduced. However, despite arguing for a social model approach to asylum, it is time to acknowledge that the rapidly increasing and deliberate denial of services and support to people in the asylum system and to disabled people goes beyond the impact of capitalism as conceived by the original proponents of the social model.

Capitalism creates and depends on the existence of dispensable lives. Asylum controls and welfare reforms are implemented by profitable private industries. But beyond this profit motivation, current policies are designed to stoke hostility towards people seeking asylum and to disabled people. In both sectors and their intersection, people are referred to as a burden on the wider population. Many lives have already been lost as a consequence of the removal of safe routes for people to enter the United Kingdom and the ever increasing restrictions on arrival. Meanwhile, welfare reforms have already cost lives. The more recent Health and Disability White Paper (Department for Work and Pensions, 2023) threatens to take this lethal impact further by removing support from people without paid work. Policies that are deliberately designed to deprive people of essential needs, to cause lives to be lost and to stoke hatred among the wider population are beyond the situation when the social model was originally designed. Such policies are also beyond the needs of capitalism, they are, however, essential to the rise of fascism.

Conclusion

The restrictions imposed on people seeking sanctuary and the wider population of disabled people are deliberate and disabling. Current initiatives towards people considered worthy exceptions undermine previous achievements of the disabled people's movement, reinforce inequalities and present alternatives as if impossible. Distinctions between deserving and undeserving individuals have always been core to asylum and immigration policy. Improving the implementation of these distinctions reinforces rather than contests the credibility of restrictions imposed on people framed as undeserving.

The immediacy of current struggles for survival highlights the urgency for new approaches. Ever more draconian policies have gone beyond the context when the social model was first established. The level of change that is needed cannot be achieved through minor adjustments as to who is considered worthy of support. It may be difficult to achieve systemic change; however, the current social order, like any other, is socially constructed and therefore changeable.

The extreme injustices imposed on disabled people subject to asylum and immigration controls could provide the impetus to build a broad-based movement of mutual solidarity and collective resistance. Such a movement could bring together the insights from both sectors to counter hegemonic perceptions of the inevitability and acceptability of depriving people of essential needs. Perhaps most crucially, such a focused movement must be prepared to resist attempts to co-opt and distort progressive goals. The focus on justice must be maintained to withstand the imposition of liberal attempts to argue that we must reduce our goals to pragmatic adjustments as to who is excluded, or in what circumstances. Any reduction of suffering for any person is always to be welcomed but we must reject any attempt to divert our goals from the systemic change that is so urgently needed.

On behalf of all the lives that have been lost and all those who continue to struggle to meet essential needs, our objective must be focused on the creation of a society in which support is provided on the basis of need, equity and common humanity. The scale of change that is needed may appear too ambitious, however, as Clifford (2020 p. 300) writes: ‘We have no choice. The stakes have become too high’.

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Figure 11 Disability and migration. Mural bringing together Deaf, Disabled and asylum seeking people in Bristol, 2021.

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