Southwark Diocesan Synod Motion on Refugee Professionals

1. A significant proportion of the refugees who come to this country are qualified in a wide range of skills and many have considerable professional experience. They include doctors, dentists, nurses, lawyers, teachers and IT engineers. These skills are needed here in the UK, so when refugee professionals are enabled to practise here they help to reduce shortages. This is quicker and cheaper than training new professionals. And the refugee professionals themselves become natural members of a more integrated UK society. It’s a ‘win-win’ situation.

2. There is of course a history of professionals being recruited overseas to off-set UK skills shortages. Often such recruiting is criticised for depriving services in other countries of vital human resources. But in the case of refugees, sadly, that deprivation has already been enforced and there can be no such objection to enabling them to practise here.

3. Around fifteen years ago, the possibility of refugee professionals fulfilling their potential and at the same time meeting the needs of society was recognised as a ‘virtuous circle’. For relatively small investment, refugee professionals could be equipped to reduce shortages of qualified people, but also to support themselves and pay taxes instead of depending on benefits. Also at that time, Home Office strategy regarded employment as a key factor in the integration of refugees and Refugee Council work on refugee professionals was welcomed by the Department of Work and Pensions (DWP).

4. The Refugee Council has sustained this work through its Building Bridges programme for refugee health professionals living in London. For example, Jamal held a postgraduate degree in pathology and had many years’ experience but the stigma associated with refugee status had shattered his confidence and he needed help from Building Bridges to find work as a biomedical scientist in the NHS. Farkhunda was forced to flee Afghanistan when the Taliban closed down education for women. She completed her medical studies in Pakistan but after joining her husband in Britain she found that her qualifications were not recognised. Building Bridges helped her to repeat parts of her training and achieve registration by the General Medical Council.

5. From around 10 years ago the government mood changed, perhaps as a result of the economic crash and the policy of austerity that followed. The DWP tends now to press refugee professionals to accept low paid jobs rather than steer them to training programmes that would assist them to apply their skills here.

6. As concern about refugees has risen higher on the UK agenda, there have been news reports of fresh regional schemes to assist refugee professionals. For example, Youssef is a doctor who had to flee from Syria and ended up in Middlesbrough. Through a scheme run by the North Tees and Hartlepool NHS Trust he passed the General Medical Council’s exams and was able to start applying for jobs. Similarly, the Lincolnshire Refugee Doctor Project has created placements at hospitals that help refugee health professionals get the clinical experience they need to work in the UK.

7. Churches, deaneries and ecumenical groupings along with other faith communities have responded in various ways to the refugee crisis. Providing relief for those suffering in Calais, assisting local authorities to play their part, setting up community
spons orship schemes, finding accommodation, offering legal advice, befriending – all these continue to be important. But they all reinforce a view of refugees as very needy people who require help. That is true but it overlooks the parallel truth that refugees are people with much to offer, and that sensible investment in refugee professionals will bring cost-effective benefits to society as a whole.

8. In February 2017 Battersea Deanery Synod held a meeting about responses to increased numbers of refugees arriving in the UK. The meeting was facilitated by representatives of Citizens UK. Subsequently the Area Dean called together a follow-up group and this developed into a continuing project known as ‘Battersea Welcomes Refugees’. Attention has been given, for example, to the housing of refugee families locally.

9. This Diocesan Synod motion takes up another point from that February 2017 meeting, that some refugees are qualified professionals. The motion was designed for debate at General Synod. It was passed by Battersea Deanery Synod in June 2017 and by Southwark Diocesan Synod in March 2018.

10. The purpose of the motion is to encourage dioceses to help in enabling refugee doctors, teachers and other professionals to put their skills to work in this country, thus easing shortages in a cost-effective way. Another benefit is that professionals enabled to practise here become better integrated members of society whilst society learns that they are people with skills to offer as well as people in need of refuge. The motion includes reference to financial support; without this it would lack credibility.

11. The wording of the motion was checked with Dr Rowan Williams, who has been a leading voice on refugee policy both within the church and more widely, and with Dr Stephen Nickless of the Refugee Council’s Building Bridges programme. As the Refugee Council website* puts it, the aim is that refugee professionals are assisted to ‘re-qualify to UK standards and secure employment appropriate to their professional qualifications’.

12. The most recent impact report** states (on page 19) that annual funding of £290,510 enabled Building Bridges to support over 150 refugee health professionals towards employment. The help needed varied from case to case of course, but its cost was less than £2,000 a year on average.

13. The motion also includes a request to the Council for Mission and Public Affairs to provide dioceses with advice on this project.

* https://www.refugeecouncil.org.uk/what_we_do/refugee_services/refugees_into_jobs/refugee_health_professionals

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On behalf of Southwark Diocese
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