



Annex A – Studentship Application Form

Title of proposed research – Health & Wellbeing pathway
The Importance of Sexual and Reproductive Rights for Undocumented Migrants and their Practical Inaccessibility within the UK’s ‘Hostile Environment’
Your research proposal.
IMPORTANT: There is a strict 1300-word limit, fully inclusive of everything except references. This includes all the written text, quotes, in-line citations, section headers, captions, the contents of tables and any foot-/endnotes. Each figure/graphic should be counted as equivalent to 200 words. Tables should be counted as the number of words they contain. Proposals that are found to be overlength will be rejected. Remember that if you are applying to one of our interdisciplinary programmes, a clearly articulated interdisciplinary approach should be evident.
Introduction
<p>Despite international legislation outlining the importance of healthcare provisions, the reproductive rights of some individuals have always been more policed than the reproductive rights of others. Nowhere is this more apparent than in the severely compromised sexual and reproductive wellbeing of irregular migrant women residing in the UK (CEDAW Art. 14.2(b), Art. 12.2; ICESCR Art 12.1). These women are more likely to experience birth trauma, premature delivery and maternal mortality, and less likely to access HIV treatment (Higginbottom <i>et al.</i>, 2019; National AIDs Trust, 2012; Shortall <i>et al.</i>, 2015). The significant disparity in reproductive care and health outcomes for migrant women in the UK indicates that hostile environment policies undermine the legal provision for the highest attainable standard of healthcare for all persons, regardless of race, gender or citizenship.</p> <p>Formalised through the <i>2014</i> and <i>2016 Immigration Acts</i>, the ‘hostile environment’ (1) refers to a collection of policies and practices aiming to make the lives of those residing in the UK without documentation as difficult as possible, thereby motivating their ‘voluntary emigration’ (Button <i>et al.</i>, 2020; Goodfellow, 2020; Jones <i>et al.</i>, 2017; Oommen, 2020; Yuval-Davis <i>et al.</i>, 2018). While attempts to control various populations through access to NHS care are not new, the introduction of the <i>National Health Service (Charges to Overseas Visitors) Regulations (2017)</i> brought the issue back into the public eye. NHS charging and data-sharing practices have caused access to medical support for undocumented migrants to be the <i>exception</i>, rather than the rule (Jones, Finnerty & Richardson, 2019). This is evident in the unjust policies concerning access to sexual and reproductive rights (SRR), with such care being unaffordable and individuals running the risk of detection and deportation if they attempt to exercise these rights (Greenfield, 2019; Maternity Action, 2017). This inequality is further exacerbated by gender, with women facing greater barriers to healthcare and often requiring more support, as a result of pregnancy and their increased risk of sexual violence. Evidently, UK healthcare policies are punitive of sexuality, mobility and race, especially when exhibited by irregular migrant women (Barclay, 2020).</p> <p>Despite a steady rise in the migration of young women, the UK’s policies concerning their SRR remain unchanged, establishing a need for additional research on the topic (De Jong <i>et al.</i>, 2017). While literature concerning the effects of the hostile environment on vulnerable persons</p>



is somewhat extensive, my proposed ethnographic research, adds a new narrative to this existing body of work, due to its methodology and unique focus on an otherwise inaccessible group (Coddington, 2020; Hiam, Steele & McKee, 2018; Nellums *et al.*, 2021; Weller *et al.*, 2019). My research aims to make largely ignored and marginalised groups visible, by giving them a voice and capturing their experience through ethnographic methods, while contextualising this through an analysis of the legal framework and bureaucracies that undermine migrant women's rights.

Research Questions:

1. How do the UK's 'hostile environment' policies restrict practical access to the sexual and reproductive rights that are upheld in international legislation?
2. What impact does the restriction of SRR have on the wellbeing, empowerment and autonomy of undocumented women?

Methodology

This research will primarily fall under the discipline of **mobility studies**, drawing on theories of migration and citizenship to establish what rights undocumented migrants are owed. Such reliance on theories of human mobility employs the knowledge I have accumulated throughout my postgraduate qualification and enhances the interdisciplinarity of my research (Carens, 2013; Shachar, 2009; Oberman, 2016). This interdisciplinarity is further enhanced through my use of the concept of **intersectionality** (Crenshaw, 1989). Intersectionality suggests that no aspect of identity can be wholly separate from another; we must look at the *intersections* of characteristics to understand human experience. This concept is crucial to my proposal, as irregular migrants cannot be defined by just one feature, but rather by the amalgamation of characteristics, all of which collectively impact their experiences and substantive rights. Finally, I will draw on theories of **reproductive justice** to guide my understanding of the *importance* of SRR for undocumented women (Davis, 2019; Floss *et al.*, 2017; Roberts, 2015). These frameworks, alongside the help of Michal Nahman and Stuart McClean from UWE, as well as Sheelagh McGuinness from the University of Bristol, will provide a point of comparison for my second-year findings concerning the practical accessibility of these rights and the effects of such inaccessibility on the lives of vulnerable persons.

I will carry out **ethnographic research** with multiple charitable organisations in Bristol to establish a detailed, qualitative data-set concerning the experiences of irregular migrants within the UK's healthcare system. I have already established contact with multiple charities via my supervisory team. Importantly, I will have volunteered for these groups throughout my first year to build connections with its clients and workers prior to the research collection in my second year. Collaborating with these external organisations will allow me to gather data from an otherwise inaccessible social demographic, as well as broader information concerning the role of humanitarian groups in the provision of healthcare rights in the UK (Castañeda, 2010; Georgiadis, 2008).

To respect the values of each organisation and the vulnerability of their clients, I will primarily interview the workers, particularly volunteers who provide support to migrant women throughout their pregnancies. Where accessing the migrant mothers directly would be ethically problematic as a result of their often-traumatic background, conversing with birthing companions from various organisations provides insight into the experiences of these women,



without jeopardising their mental wellbeing or legal status. Importantly, my experience as a Debt Adviser for the North Bristol Advice Centre has allowed me to cultivate exceptional interview skills particularly concerning vulnerable individuals, as well as in-depth knowledge of safeguarding practices and data-protection procedures. This will ensure that my interviews are effective and focused, and, more importantly, that my research is respectful and empowering for the women involved.

I will collate my ethnographic research concerning the undocumented individuals and situate my findings within the wider context of the hostile environment, as established through first year’s literature review. I will also compare the reported experiences of access to SRR with the provisions outlined in international legislation, to identify the disparity between rights in *theory* and rights in *practice*. Importantly, I will not terminate my voluntary role within the charity. This is not only in the interest of accuracy, but also using my platform to further empower and liberate undocumented women. The individuals will have the capacity to influence the direction of my research, meaning any conclusions drawn will be informed by those it discusses. Importantly, my association with the charities I will gather data from, as well as my links to *Migration Mobilities Bristol*, will enhance the potential impact of this research, as it can be shared with and disseminated by external organisations. This increases the chances of my work creating tangible change, potentially impacting the workings of the charity or providing guidance for future policy recommendations.

Ethical considerations

My research will operate under the *2018 Data Protection Act*, ensuring that all recorded information is confidential and safeguarded.

I will take all possible measures to uphold anonymity, removing all identifiers from my written work and limiting interactions to in-person conversations.

I will also create a clear and extensive consent form to ensure that the participant understands what they are contributing to and how their data is being stored and protected, particularly as information may include personal health or migration-status details, which must remain confidential.

Finally, this research should reflect the values of agency and empowerment it discusses. Therefore, I will encourage participants to read my research at multiple stages, to see and adjust how their narrative is represented.

(1) This has recently been termed the ‘compliant environment’. However, I utilise the original name, as the policy’s essence remains unchanged.

Word count (please complete):

References (Bibliography) (not included in your Word count)

Allen, J. and Sesti, F. (2018). *Health inequalities and women - Addressing unmet needs*. [online]. London: British Medical Association. Available at: <https://www.bma.org.uk/media/2116/bma-womens-health-inequalities-report-aug-2018.pdf> [Accessed 19 Nov. 2020].



Barclay, E. (2020). *Medical tourism's collateral damage: How fears of NHS exploitation have led to the restriction of rights for irregular migrants in the United Kingdom*. Bristol: University of Bristol.

Button, D. *et al.* (2020). *Patients Not Passports: Learning from the International Struggle for Universal Healthcare*. [online]. London: New Economics Foundation. Available at: <https://neweconomics.org/2020/10/patients-not-passports> [Accessed 17 Jan. 2021].

Carens, J. (2013). *The Ethics of Immigration*. New York: Oxford University Press.

Castañeda, H. (2010). Im/migration and health: Conceptual, methodological, and theoretical propositions for applied anthropology. *Napa Bulletin*, [online] 34, 6 - 12. DOI: 10.1111/j.1556-4797.2010.01049.x [Accessed 2 Jan. 2021].

Coddington, K. (2020). Incompatible with life: Embodied borders, migrant fertility, and the UK's 'hostile environment'. *Environment and Planning C: Politics and Space*, [online]. DOI: 10.1177/2399654420968112 [Accessed 17 Jan. 2020].

Crenshaw, K. (1989). Demarginalising the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics. *University of Chicago Legal Forum*, 1989(1), 139 - 167.

Data Protection Act. (2018). *United Kingdom of Great Britain and Northern Ireland*. c.12. Available at: <https://www.legislation.gov.uk/ukpga/2018/12/enacted> [Accessed 15 Jan. 2021].

Davis, D. (2019). *Reproductive Injustice: Racism, Pregnancy and Premature Birth*. New York: NYU Press.

De Jong, L. *et al.* (2017). A systematic literature review on the use and outcomes of maternal and child healthcare services by undocumented migrants in Europe. *The European Journal of Public Health*, [online] 27(6), (pp. 990 - 997). DOI: 10.1093/eurpub/ckx181 [Accessed 21 Dec. 2020].

Floss, L. *et al.* (2017). *Radical Reproductive Justice: Foundation, Theory, Practice, Critique*. New York: The Feminist Press.

Georgiadis, K. (2008). *Migration and reproductive health: A review of the literature*. Working Paper No. 01/2008. [online]. London: University College London. Available at: <https://www.ucl.ac.uk/anthropology/sites/anthropology/files/012008.pdf> [Accessed 2 Jan. 2021].

Goodfellow, M. (2019). *Hostile Environment*. London: Verso.

Greenfield, P. (2019). End NHS maternity charges for vulnerable migrants, say midwives. *The Guardian*, [online]. Available at: <https://www.theguardian.com/society/2019/sep/09/end-nhs-maternity-charges-for-vulnerable-migrants-say-midwives> [Accessed 3 Jan. 2021].



Hiam, L., Steele, S. and McKee, M. (2018). Creating a 'hostile environment for migrants': The British Government's use of health service data to restrict immigration is a very bad idea. *Health Economics, Policy and Law*, [online] 13(2). DOI: 10.1017/S1744133117000251 [Accessed 17 Jan. 2021].

Higginbottom, G. M. A. *et al.* (2019). Experience of and access to maternity care in the UK by immigrant women: A narrative synthesis systematic review. *BMJ Open*, [online] 9. DOI: 10.1136/bmjopen-2019-029478 [Accessed 27 Dec. 2020].

Immigration Act. (2014). *United Kingdom of Great Britain and Northern Ireland*. c.22. Available at: <https://www.legislation.gov.uk/ukpga/2014/22/contents/enacted> [Accessed 17 Dec. 2020].

Immigration Act. (2016). *United Kingdom of Great Britain and Northern Ireland*. c.19. Available at: <https://www.legislation.gov.uk/ukpga/2016/19/contents> [Accessed 17 Dec. 2020].

Ingleby, D. *et al.* (2005). *The role of health in integration*. Lisbon: Centro de Estudos Geográficos.

Jones, H. *et al.* (2017). *Go Home? The Politics of Immigration Controversies*. Manchester: Manchester University Press.

Jones, B. L., Finnerty, F., and Richardson, D. (2019). Healthcare charging for migrants in the UK: Awareness and experience of clinicians within sexual and reproductive health and HIV. *Journal of Public Health*, [online]. DOI: 10.1093/pubmed/fdz157 [Accessed 5 Dec. 2020].

Latif, Z. (2014). *The maternal mental health of migrant women*. Better Health Briefing, 31. [online]. London: Race Equality Foundation. Available at: <https://www.gmmh.nhs.uk/download.cfm?doc=docm93jijm4n895.pdf&ver=1674> [Accessed 20 Nov. 2020].

Mendoza, J. J. (2014). Discrimination and the Presumptive Rights of Immigrants. *Critical Philosophy of Race*, [online] 2(1), Special Issue: Xenophobia and Racism, (p. 68 - 83). Available at: <https://www.jstor.org/stable/10.5325/critphilrace.2.1.0068> [Accessed 19 Nov. 2020].

Maternity Action. (2017). Undocumented migrants: Entitlement to NHS maternity care. [online] *Maternity Action*. Available at: <https://maternityaction.org.uk/advice/undocumented-migrants-entitlement-to-nhs-maternity-care/> [Accessed 28 Dec. 2020].

National AIDS Trust. (2012). *Universal access to primary care: A gateway for HIV testing, treatment and prevention*. November 2012; Policy Briefing. [online]. London: National AIDS Trust. Available at: <https://www.nat.org.uk/sites/default/files/publications/Nov-2012-Universal-Access-to-Primary-Care.pdf> [Accessed 10 Jan. 2021].



National Health Service (Charges to Overseas Visitors) Regulations. (2017). *United Kingdom of Great Britain and Northern Ireland*. 238. Available at: <https://www.legislation.gov.uk/ukxi/2015/238/made> [Accessed 30 Nov. 2020].

Nellums, L. B. *et al.* (2021). “It’s a life you’re playing with”: A qualitative study on experiences of NHS maternity services among undocumented migrant women in England. *Social Science and Medicine*, [online] 270. Available at: <https://www.sciencedirect.com/science/article/pii/S0277953620308297> [Accessed 17 Jan. 2020].

Oberman, K. (2016). Immigration, Citizenship and Consent: What is Wrong with Permanent Alienage? *The Journal of Political Philosophy*, [online] 25(1), 91 - 107. DOI: 10.1111/jopp.12093 [Accessed 19 Nov. 2020].

Obermeyer, M. C. (2001). *Cultural Perspectives on Reproductive Health*. Oxford: Oxford University Press.

Oommen, E. (2020). ‘There have always been a hostile environment’. [Blog]. The Sociological Review. Available at: <https://www.thesociologicalreview.com/there-have-always-been-a-hostile-environment/> [Accessed 17 Dec. 2021].

Price, J. (2014). The Hostile Environment. In: B. Anderson and M. Keith, *Migration: A COMPAS Anthology*. Oxford: COMPAS.

Roberts, D. (2015). Reproductive Justice, Not Just Rights. *Dissent*, [online] 62(4), 79 - 82. DOI: 10.1353/dss.2015.0073 [Accessed 17 Jan. 2021].

Shachar, A. (2009). *The Birthright Lottery: Citizenship and Global Inequality*. London: Harvard University Press.

Shortall, C. *et al.* (2015). *Experiences of Pregnant Migrant Women receiving Ante/Peri and Postnatal Care in the UK: A Longitudinal Follow-up Study of Doctors of the World’s London Drop-In Clinic Attendees*. [online]. Doctors of the World. Available at: https://b.3cdn.net/drofttheworld/08303864eb97b2d304_lam6brw4c.pdf [Accessed 6 Dec. 2020].

Smith, A. C. and Levoy, M. (2016). *The sexual and reproductive health rights of undocumented migrants: Narrowing the gap between their rights and the reality in the EU*. Brussels: Platform for International Cooperation on Undocumented migrants.

Tamayo-Sarver, J. H. *et al* (2003). Racial and Ethnic Disparities in Emergency Department Analgesic Prescription. *Am J Public Health*, [online] 93(12), 2067 - 2073. DOI: 10.2105/ajph.93.12.2067 [Accessed 19 Nov. 2020].

UN General Assembly. (1966). *International Covenant on Economic, Social and Cultural Rights*. United Nations, Treaty Series, vol. 993. Available at: <https://www.refworld.org/docid/3ae6b36c0.html> [Accessed 3 Jan. 2021].



UN General Assembly. (1979). *Convention on the Elimination of All Forms of Discrimination Against Women*. United Nations, Treaty Series, vol. 1249. Available at: <https://www.refworld.org/docid/3ae6b3970.html> [Accessed 3 Jan. 2021].

Weller, S. K. *et al.* (2019). The negative health effects of hostile environment policies on migrants: A cross-sectional service evaluation of humanitarian healthcare provision in the UK. *Wellcome Open Research*, [online], 4(109). DOI: 10.12688/wellcomeopenres.15358.1 [17 Jan. 2020].

WHO Regional Office for Europe. (2018). Improving the health care of pregnant refugee and migrant women and newborn children. Copenhagen: World Health Organisation.

Women In Migration Network. (2017). Criminalisation of migration and the importance of ‘firewalls’. Berlin: Global Forum on Migration and Development., [online]. Available at: http://womeninmigration.org/wp-content/uploads/2017/06/Berlin-2017_6-Criminalisation-firewalls.pdf [Accessed 19 Nov. 2020].

Yuval-Davis, N. (1997). *Gender and Nation*. London: SAGE Publications Ltd.

Yuval-Davis, N., Wemyss, G. and Cassidy, K. (2018). Everyday Bordering, Belonging and the Reorientation of British Immigration Legislation. *Sociology*, 52(2), 228 - 244.