



## Nationalities and Borders Bill: *charging vulnerable asylum seekers for basic healthcare*

Review by **Margaret Hooper**, of the CMF Global Advocacy Group  
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**T**he Nationality and Borders Bill<sup>1</sup> currently passing through both Houses of Parliament is promoted as a means of stopping small boats from crossing the channel and of breaking up the gangs of people smugglers. The Bill also contains clauses to create prison-like conditions for asylum seekers, holding them away from welcoming communities and with poor healthcare access. There will also be cuts to Legal Aid, making it difficult to present an accurate case. The opportunity for family reunions will also be reduced, leaving some partners and children unable to join them.<sup>2</sup>

Since 2015, the NHS in England (but not in the other British nations) has charged asylum seekers with no leave to remain for all but treatment in A&E, for listed infectious diseases, conditions related to torture, domestic and sexual violence, and female genital mutilation.<sup>3</sup> For all other treatments, they are charged as overseas visitors at 150 per cent of cost. These are vulnerable

people who have escaped from war zones and persecution through dangerous and arduous conditions and who have no recourse to public funds nor the right to work.

CMF has long argued that these measures are unjust, carry public health risks, and violate a Christian ethos of welcome and care for the stranger. Many of the concerns that have spurred this legislation are spurious.<sup>4</sup> This new bill brings in further measures that will make an already desperate situation immeasurably worse for many.

At the time of writing, over two million refugees have fled the war in Ukraine, mostly to EU and other adjacent nations.<sup>5</sup> This number could well reach six or seven million in the coming months. We hope many of those will be welcomed into the UK. Yet, in recent years, we have not extended much of a welcome to those fleeing war, persecution, and poverty from the Middle East, Africa, and Asia.

CMF's Global Advocacy Group has

written a briefing, blogs,<sup>6</sup> a podcast, and a letter to the Home Secretary, challenging the Bill and current policy. We have also produced a resource to help you write to your MP about the Nationality and Borders Bill,<sup>7</sup> and have signed a joint faith leaders' letter to the Government.<sup>8</sup> There is still time to encourage our leaders to welcome the stranger and the refugee by ensuring their access to NHS treatment.

### references (accessed 8/3/2022)

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7. Suggested points for letter to MP. *CMF Briefing Papers*. May 2021. [cmf.li/3Hg8pli](https://cmf.li/3Hg8pli)
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## Covid vaccine mandates: *why the Government's change of policy is a wise move*

Review by **Steven Fouch**  
CMF Head of Communications

**F**ew issues have created such division among health professionals as Covid vaccine mandates. While most NHS staff freely accepted vaccination and are strong advocates for it with their patients and colleagues, a small minority (about five to six per cent)<sup>1</sup> have thus far refused vaccination. Even when the Government introduced regulations making it mandatory for workers in NHS England from April 2022,<sup>2</sup> nearly 80,000 continued to refuse. The UK Government had already made it mandatory for social care staff in England from November of 2021. Then, as many as ten per cent of the social care workforce remained vaccine-hesitant, even at the cost of their jobs.

The reasons for hesitancy are complex. Undoubtedly misinformation through social media, conspiracy theories, and some questionable eschatological teaching from a minority of churches contributed. However, some had genuine ethical reasons, concerned about the role of cell lines that may have originated from an aborted fetus

in the 1970s in vaccine production and testing. Rather than collude with what they saw as evil, a minority of Christian health and social care workers saw vaccine refusal as the only option.

There is no doubt that Covid vaccines were vital in getting the UK, and much of the rich world, out of the worst of the COVID-19 pandemic. So, while we continue to take a different position on Covid vaccines to some Christians, CMF fully supports their right to freedom of conscience.<sup>3</sup> Indeed, if we had not taken such a stance, we would have been hypocritical in our advocacy for the right to freedom of conscience in other areas.

But the other significant issue was that when the health and social care workforce was already overstretched, we could effectively have sacked over 100,000 workers across both sectors. The impact would have been devastating.

CMF was not alone in this concern. The RCGP, RCN, and other professional bodies expressed similar concerns to Government,

who this February wisely paused the measure subject to a (very) brief consultation. It has now reversed its social care vaccine mandates policy and is no longer pursuing them for NHS or social care staff.

We still need to convince those deceived by vaccine misinformation of the safety and efficacy of Covid vaccines. We will continue to advocate for the development of vaccines not tested on controversial cell lines. But this episode and its historical antecedents show that mandates tend to harden the position of a small minority of vaccine-hesitant individuals rather than persuade them; dialogue, advocacy, and persuasion are more effective.<sup>4</sup>

### references (accessed 7/2/2022)

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