

Edithmadonna Iheama

and **David Smithard**

consider how we respond to the needs of refugees in ways that tell of the good news of Jesus



RESPONDING TO HUMAN NEED

key points

- The author recounts how her own experience of being an asylum seeker spurred her to help others facing similar problems.
- Accepting the stranger, the foreigner and the outsider are responsibilities for God's people.
- Prevention and crisis intervention in health are vital for asylum seekers' wellbeing and need a multi-pronged approach.

An asylum seeker is someone who claims to be a refugee but whose claim hasn't been evaluated. ... Someone is an asylum seeker for so long as their application is pending. So not every asylum seeker will be recognised as a refugee, but every refugee is initially an asylum seeker.¹

What comes to mind when you hear about refugees and asylum seekers?

People migrate to the UK for many different reasons. Many come by the accepted legal systems; others seek alternative and often dangerous paths through no fault of their own. Such people are designated refugees or asylum seekers (box above). The news media, often supported by local and national politicians, reports their arrival on UK soil as if there is an organised invasion, suggesting that we are about to be swamped by illegal migrants who are only coming for financial gain. Such negative reporting paints a picture of scroungers and criminals who have no right to expect to stay. Yet they are often vulnerable and need our compassion.

The present legal pathways leave people in limbo for prolonged periods, often years, prevented from seeking work, in constant fear of detention, family separation, and deportation. People are allocated temporary housing, which cannot be secured from the inside, and they may be moved at a moment's

notice. The National Asylum Support Service (NASS) administrates financial and accommodation support to eligible asylum seekers who would otherwise be destitute. They may apply for accommodation and financial assistance, accommodation only or financial assistance only. However, if leave to remain is granted, this accommodation and funding is removed, resulting in homelessness.

Although the portrayal of asylum seekers is frequently negative, there are golden nuggets of hope. I have seen legal teams working *pro-bono* and headteachers ensuring that children would not go to bed hungry by continuing to provide free breakfast, lunch, and a grab bag for tea when the local council stopped providing free meals.

Has the Christian church forgotten how the Israelites were refugees in a foreign land or that Mary and Joseph fled to Egypt to escape from Herod with the newborn Jesus? Jesus was a child refugee. Have you pondered what would have happened to the course of humanity if Egypt refused Mary, baby Jesus, and Joseph asylum and deported them back to their home country? Would you have supported granting sanctuary to Jesus's family if they sought refuge in the UK? Could you imagine how different things could have been if Herod had killed baby Jesus along with the other two-year-olds?²

Why do we cry foul when those in need are

offered shelter? Mary and Joseph were offered a place for her to give birth, and I suppose it was probably not convenient for the people who took them in; the place was packed, but they made a space. Could you imagine what could have happened had Mary given birth to Jesus on the roadside, on a cold winter night, in the middle of nowhere? We can safely assume that she got help from someone when she went into labour. They offered her a manger, a blanket to wrap up and protect baby Jesus from the winter cold and looked after their donkey.³

What is our response when we see the need in front of us? Do we see a person that requires help, or do we see a scrounger? Do we respond with platitudes, or do we intervene?

What good is it, my brothers, if someone says he has faith but does not have works? Can that faith save him? If a brother or sister is poorly clothed and lacking in daily food, and one of you says to them, "Go in peace, be warmed and filled," without giving them the things needed for the body, what good is that? So also faith by itself, if it does not have works, is dead. (James 2:14-17)

Or in the book of Matthew:

For I was hungry and you gave me food, I was thirsty and you gave me drink, I was a stranger and you welcomed me, I was naked and you clothed me, I was sick and you visited me, I was in prison and you came to me.' Then the righteous will answer him, saying, 'Lord, when did we see you hungry and feed you, or thirsty and give you drink? And when did we see you a stranger and welcome you, or naked and clothe you? And when did we see you sick or in prison and visit you?' (Matthew 25 35-40)

Edith Ihema (doctor, entrepreneur, and priest) was herself a refugee and has experienced the vagaries of the asylum system. She reports *'While I was going through the challenges of hostile environment as an asylum seeker, the only thing that kept me going was knowing that I am loved by God and the love and compassion shown to me by others. When one is at the lowest ebb in life, hope is often very hard to find, but in my case, my faith helped me to endure in hope (Hebrew 11:1). I was able to feel peace, which could not be explained by immediate circumstances (Philippians 4:7; John 14:27). The gospel is a message of hope. Being able to respond to human needs through practical service, providing physical support to people in their times of need, is a way of making our gospel relevant to them. Particularly offering refugees and asylum seekers food, shelter, and signposting to other organisations is a way of sharing the good news and bringing hope to people in despair.*

Dr Ihema noticed a gap in awareness of wellbeing, health needs, and adequate statutory community health support for many minority communities in her locality, including Refugees and asylum seekers. In response, she has set up a social enterprise business known as CHATS (Community Health Awareness Training Service),⁴ to address the lack of expert and culturally competent services for ethnic minority and migrant

communities. They make use of the skills, knowledge, and insight of her lived experience, from the experiences of other asylum seekers, and from those of ethnic minority backgrounds.

The CHATS service aims for crisis prevention, supporting vulnerable people in their wellbeing journeys, empowering them to take control of their own health, and preventing people from presenting in crisis.

What do we need to do as health professionals? How often do you feel powerless? Refugees and asylum seekers still face barriers and discriminations within the statutory health services. How can you respond to the health needs of asylum seekers and refugees through loving service?

Doctors and nurses are role models. Over the years, we have been figureheads. Many of us have campaigned and are working to transform society's unjust structures, challenge violence of every kind, and pursue peace and reconciliation. We must work towards bringing sanctuary for refugees in our communities, speaking up against the unjust structures in society, wars, persecutions, and violence of any kind that force people to flee and abandon their families and livelihood to seek refuge.

Dr Ihema feels that working to bring transformation to the unjust structures of society is a real opportunity to share the good news of the gospel afresh to an increasingly secularised world.

As Blaise Pascal noted:

*What else does this craving, and this helplessness, proclaim but that there was once in man a true happiness, of which all that now remains is the empty print and trace? This he tries in vain to fill with everything around him... though none can help, since this infinite abyss can be filled only with an infinite and immutable object; in other words by God himself.'*⁵

And, also quoting St Augustine, *'You have made us for yourself, O Lord, and our hearts are restless until they rest in you'*.⁶ I sense a yearning to fill that God-sized hole and the restlessness these theologians talked about in people who do not profess any faith, looking for ways to fulfil their spiritual needs by campaigning for social justice. We Christians should stand at the forefront, championing these causes.

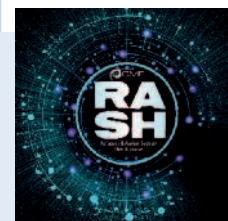
In conclusion, Dr Ihema believes that as we work to bring such transformation, it will be an opportunity to tell the whole story of the fall, the redemption achieved by the death and resurrection of Jesus Christ, and the full glory and the manifestation of the Kingdom of God that is to come.

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The 'Refugee and Asylum Seeker Health Course' aims to equip Christian healthcare practitioners and others to:

- Improve knowledge of the health care needs of refugees and asylum seekers in the UK
- Hear examples of good practice
- Foster a dialogue between those working with refugees and asylum seekers for mutual encouragement and support
- Inspire creative ways to engage with health systems for better provision, support and care

For more information email globalcoordinator@cmf.org.uk

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