
Executive Note

Summary of IPA meeting with People living in Direct Provision Hostels and Voluntary Organisations working with them.

Date 30/10/2020 In Attendance

Stephen MCMAHON

CO Founder Chairman IPA Board

Ms Esther Pepple ONOLEMEMEM Board Member Special Role Diversity, Inclusion and Equality

Representatives from:

Dignity in Partnership

AkiDWa

Laois African Support Group

And Number of residents living in Direct Provision

For Confidentiality purposes names of contacts kept by Ms ONOLEMEMEM

Stephen McMahon and colleague Director Ms Esther Pepple Onolememen held an initial zoom round table discussion with people living in direct provision and voluntary organisations working with them; to address health care access and experiences of living in direct provision in the context of COVID19 and Non Covid access to healthcare. Another key purpose was to see how the IPA could support others advocating for the people living in direct provision.

The meeting was well attended by a number of direct provision residents from across Ireland and about four representatives from voluntary organisations providing support for people living in direct provision were also present.

At the opening of the meeting Mr McMahon informed the participants that the IPA are meeting Health Minister Stephen Donnelly on Tuesday 3rd November at 2:30pm. While we have broad agenda for the meeting the IPA was anxious to include any issues that may arise and bring these to the attention of the Minister and wider public. Both he and Ms Onolememen stressed that the participants confidentiality would be respected.



[Some emerging themes from the conversation addressed health care issues in relation to:](#)

- **Residents reported experience of discrimination and racism:**

All residents at the meeting discussed their experiences of being treated differently compared to their Caucasian counterparts. One resident disclosed an instance “*where my baby was sick I, and staff refused to call the ambulance for her and advised her to find her way to the hospital by public transport*”, meanwhile a Caucasian lady received immediate support from management with her sick child. Another disclosed her experience of putting her daughter’s name down for a GP appointment and never received one for her sick child who also has other health challenges. This mother informed IPA that she had to self-medicate her child until the child felt better.

- **Residents experience of breach of confidentiality:**

Residents expressed their grievances of the lack of privacy in relation to accessing primary care in some residencies. One female resident reported, “*We must go through the receptionist to contact GP, and we must explain to them (receptionist) the reason why a GP appointment is required, thereby disclosing our private health issues we may not want them to be aware of*”.

They also expressed their concerns about their GPs seeing them in the same shared space as the management. They all felt that their right to confidentiality is breached by this act, yet they are afraid to complain. One other resident described her experience of an incident where her health issues had been discussed by management with other residents and was very upset by this.

- **Fear to Complain**

Despite being reminded of their rights to complain and equal rights to health care and regulatory responsibilities by health providers the residents reported that are afraid to complain because such complaints may end up as a bad mark and go against them with their asylum applications. Some felt bullied, and under constant scrutiny from “spy networks” updating the management at some residencies. One resident summed up her feeling of frustration and fear of affecting her application by keeping silent but “*dies on the inside*”

Residents informed IPA of their fear of complaining or reporting their experiences to outside organisations, for some, not even organisations working with them – Some of the organisations present at the meeting expressed shock hearing the depth of the residents’ stories and experiences.



- **Fear to Disclose**

The residents advised that they do not often disclose these levels of details because of fear of being scapegoated by direct provision management, fear of losing their accommodation to worse centres and fear of their asylum application or humanitarian applications being affected by any reports from the managers to IPAS. One resident particularly *expressed her pain of being tired of keeping silent* and has chosen to complain and speak up on issues affecting her even if she is now feeling the backlash of speaking up.

- **Residents experience of uneven Covid management, testing and selfisolation protocols:**

Residents talked about how they were not properly educated about Covid 19 until the outbreak. During the outbreak, they were not properly prepared on what is expected to be happening to them in relation to testing and self-isolation. Some talked about miscommunication between the HSE and the direct provision management, while others talked about the unfair process they had to go through during testing. All residents discussed how the various rules for each levels of the lockdown applied to the blacks differently as it did for their white counterparts such as they're going to isolation on returning to centre but not Caucasians. [Chairman's note these reports were expressed not as anger but sadness]

- **Residents experience of hostility and deprivation from direct provision management:**

Residents discussed their experiences of hostility and deprivation particularly during the covid 19 outbreak One mother described being "*locked in with her children for 48hrs without food or access*" to care while they awaited HSE relocation to another centre which took a number of days She phoned the HSE who contacted the management and was given food including "*Rotten Bananas*" other residents shared food with her.

Residents who have experienced being covid positive shared their experiences of being "*stigmatised*", sent away from their centres. Some informed IPA that they had to reapply for their spaces through IPAS, and were given stricter rules in the centre, meanwhile their white counterparts were treated differently with more leniency. A resident who was pregnant with her first baby talked about how she became quite anxious during the Covid outbreak in direct provision. She shared an experience at attending an appointment at a Dublin Maternity Hospital. She sat in the queue and watch everyone come and go particularly those that came after her, "*they all get seen before me while I sat in the waiting area for two hours waiting to be seen and my Taxi waited outside for me*".



- Residents experience in relation to violation of patients' rights: Access, Privacy, Confidentiality, Safety

Some residents expressed they were not allowed to contact the ambulance directly by themselves regardless of the emergency they were experiencing. They disclosed it was at the discretion of management to decide whether or not an ambulance should be called for them.

- Some Patients experience of intimidation by management of direct provision centres

Residents disclosed that they often felt intimidated by management in the manner in which they are treated.

Conclusion: -

The Chairman thanked all who attended his deep appreciation for their sharing of their experience. He shared an old Nigerian proverb he has quoted on many platforms. to highlight the need to respect the dignity in all people.

“No matter how shattered is the Spirits shrine, the Spirit is there all the same”

- 1) IPA made a commitment to bring these matters to the attention of the Minister at our Meeting
- 2) Share them with a Major Sunday National in response to their interest in these experiences.
- 3) Maintain contact and further engagements with all concerned
- 4) Advise participants of progress on all matters discussed.