

## UK failing to provide universal health coverage by charging undocumented migrant kids

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By charging undocumented child migrants for healthcare, the UK is failing to provide universal health coverage-in contravention of the Sustainable Development Goals and its obligations under the UN convention on children's rights-argue infectious disease and global health experts in an editorial published online in the *Archives of Disease in Childhood*.

The term 'undocumented' refers to people who don't have any documentation proving their immigration status. It includes unrecognised victims of trafficking and <u>modern slavery</u> as well as those yet to seek, or refused, asylum in the UK.

An estimated 600,000 people in the UK are thought to be undocumented migrants, 120,000 of whom are children, including 65,000 born in the UK.

As part of the government's 'hostile environment' policy to curb immigration, legislation passed in 2014 increased restrictions on the entitlement to NHS care as well as imposing a tariff that is 150% of the usual cost for those deemed ineligible for free NHS care.

In 2017 further legislation in England introduced mandatory upfront charging before treatment for those unable to prove their eligibility, and denial of non-urgent care for those unable to pay.



Emergency and primary care treatment are currently exempt, as are some infectious diseases. Other urgent care or treatment deemed immediately necessary, such as maternity care, can be provided, but can still be charged later on.

And as the authors point out, anyone with unpaid NHS debts of  $\pounds$ 500+ is referred to the Home Office after two months, and this can affect their <u>immigration status</u> or asylum application.

"Therefore, families may face legitimate concerns that seeking care for their sick <u>child</u> may result in immigration enforcement such as detention, deportation and even family separation," explain the authors.

What's more, the recent introduction of a £400 annual surcharge per child to immigration applications to what is already a very costly process is likely to make it even harder to obtain or maintain regular status, they point out.

Even children born in the UK can only apply for citizenship after 10 years of residency, they add. "The Windrush scandal highlighted publicly how changing residency rules, combined with reduced NHS entitlements, can also lead to misclassification of status and denial of NHS care," they emphasise.

What research there is on healthcare use by undocumented migrants suggests that they underuse services, and often have poor health outcomes.

Exactly who is entitled to healthcare is often poorly understood by <u>healthcare professionals</u>- something that isn't helped by the complexities of the current system, contend the authors.

"Restricting healthcare access is clearly detrimental for health outcomes,



but also child safeguarding," because it puts obstacles in the way of identifying those at risk, they suggest.

"NHS charging regulations undermine the government's stated commitments to child health and our obligations to children under the United Nations Convention on the Rights of the Child (Article 24) and contradict recommendations outlined in the UN Global Compact for Migration, signed by the UK in December 2018," they write.

Health professionals need to collect data to show the effects of the policy, they suggest, as government reviews can't be relied on.

"Ultimately, health professionals will be instrumental in advocating against the NHS charging system and its links to immigration enforcement, and for restoring <u>universal health coverage</u> and the right to health for children," they conclude.

**More information:** Editorial: Changing undocumented migrant children for NHS healthcare: implications for child health, *Archives of Disease in Childhood* (2019). DOI: 10.1136/archdischild-2018-316474

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