

---

**Disabled Refugees and Asylum Seekers in Britain:  
Numbers and Social Characteristics**

Keri Roberts and Jennifer Harris

**NLCB 1816 05.01 KR/JHa**

---

## **ACKNOWLEDGEMENTS**

The authors are currently funded by the National Lottery Charities Board and the Josph Rowntree Foundation to conduct research entitled 'Disabled Refugees in Britain: entitlements to and needs for social and welfare services' in collaboration with the Refugee Council. The views expressed in this piece are solely the authors, who wish to thank all those organisations who participated in the research.

## CONTENTS

	<i>Page</i>
Introduction	1
Existing data source	1
<i>Literature sources</i>	1
<i>Government and other official statistics</i>	2
Original data	2
<i>Method</i>	3
The initial sample	3
The sub-set	5
Interview data	11
Other data	15
<i>Citizens Advice Bureaux</i>	15
<i>Medical Foundation for the Victims of Torture</i>	15
<i>A London Social Service Department</i>	16
Conclusion	16
References	18

## LIST OF GRAPHS AND TABLES

	<i>Page</i>
<u>Graphs</u>	
Graph 1: Number of disabled refugees/asylum seekers reported	4
Graph 2: Countries of origin	6
Graph 3: Age profile of individuals	7
Graph 4: Impairments	8
Graph 5: Year of arrival in Britain	9
Graph 6: Immigration status	10
Graph 7: First languages spoken	11
<u>Tables</u>	
Table 1: Somali organisation: self reported conditions/impairments	13

**DISABLED REFUGEES AND ASYLUM SEEKERS IN BRITAIN:  
NUMBERS AND SOCIAL CHARACTERISTICS**

**Introduction**

Demographic data related to refugees and asylum seekers living in Britain are hard to obtain (London Research Centre, 1999) and information concerning disabled people within refugee populations is rarely found. This absence of data is replicated internationally as

*No one knows how many of the world's 15 million refugees suffer physical or mental disability.*

(Boylan, 1991, p. 4)

Indeed, even the United Nations High Commission for Refugees is unable to give figures for the number of disabled refugees who have been resettled under its programme for refugees with special needs (UN, 2000). This lack of data means that disabled refugees and asylum seekers constitute a largely invisible population whose social needs and circumstances are often unknown.

As part of the research project '*Disabled Refugees in Britain: needs for and entitlements to social and welfare services*' researchers at the Social Policy Research Unit, University of York have begun to investigate the numbers and social characteristics of disabled refugees and asylum seekers living in Britain. This short discussion paper summarises figures gained from existing data sources as well as presenting the findings from a quantitative survey of disability and refugee community groups in Britain.

**Existing data sources**

*Literature sources*

Although there has been little previous research concerning disability among refugee communities in Britain, research based on such communities occasionally provides information about disabled refugees. For example, an Inner London study by the Refugee Employment and Training Centre (1991) established contact with eleven refugee communities (Turkish/Kurdish; Tamil; Somali; Iraqi; People from Vietnam; Iranian; Eritrean; Ethiopian; Ugandan; Chilean and Oromo) and noted that:

*All communities commented on ... disability issues. In communities where torture, war, famine, invasions and attacks had taken place there were high levels of disabilities caused by this. In few communities were all disabled registered as such and many were not aware of the benefit entitlement which they have or the reduced responsibilities to seek work that they might accrue should they decide to register.*  
(p.35)

Carey-Wood *et al.* (1995) found that ten per cent of their sample of 263 people (of various nationalities) with refugee status or exceptional leave to remain reported ‘*some sort of disability sufficient to affect their daily life*’ (p.77). Girbash (1991) reported that 4.5 per cent of Vietnamese refugees living in Manchester were disabled, while Duke and Marshall (1995) reported that three per cent of refugees from Vietnam who arrived in Britain after 1982 were chronically sick or disabled.

#### *Government and other official statistics*

Although the Home Office regularly publishes Asylum Statistics at a national level giving details of the numbers applying for asylum and their country of origin, it does not collate or systematically record details of impairments or disability. Likewise the new National Asylum Seekers Support Service does not currently record impairments within its database. This means that there is currently no governmental source of data on disabled refugees or asylum seekers in Britain.

Prior to the Immigration and Asylum Act 1999, when asylum seekers were largely supported by the Department of Social Security and Social Services Departments, limited data concerning disabled refugees and asylum seekers had been available. Records of Income Support payments to eligible asylum seekers (a minority, as those who applied in country were not eligible for IS) indicated if the recipient was receiving the Disability Premium. In November 1999, some 49,000 asylum seekers were receiving Income Support, of which c.2,500 received the disability premium.<sup>1</sup> This would suggest that five per cent of asylum seekers receiving income support at this time were disabled. Unfortunately, the DSS has never been able to identify refugees amongst recipients of Disability Living Allowance and social service departments have similarly been found to be unable to systematically identify disabled asylum seekers or refugees amongst their clients.

#### **Original data**

Given the lack of data concerning the numbers of disabled refugees or asylum seekers living in Britain,

---

<sup>1</sup> Figures obtained through personal correspondence from DSS.

the need for new data collection was evident. In addition to written requests for the inclusion of disability and impairment data on the NASS database, the researchers conducted a quantitative survey which aimed to produce a minimum estimate of the numbers of disabled refugees and asylum seekers living in Britain in 2000.

### *Method*

An initial screening questionnaire was distributed to 300 organisations including 170 refugee community groups identified from a list provided by the Refugee Council, and 130 organisations of disabled people. The latter received the mailing via the British Council of Disabled People. Additionally, calls for information regarding the numbers of disabled refugees and asylum seekers in Britain were placed on the project's website (<http://www.york.ac.uk/inst/spru>) and in the National Association of Citizen Advice Bureaux newsletter.

The initial screening questionnaire simply asked for information regarding the number of disabled refugees and asylum seekers known and a question about willingness to provide supplemental information. On receipt of a completed questionnaire which included an agreement to further involvement, organisations were asked to participate further in one of two ways. Organisations who were in contact with less than 25 disabled refugees or asylum seekers were asked to complete a supplemental questionnaire which requested demographic details including age, gender, country of origin, impairment type, condition, immigration status and year of arrival in the UK. Those organisations which indicated that they knew more than 25 disabled refugees or asylum seekers were contacted to see if they were willing for a researcher to visit them to gather data directly from them. This strategy was adopted as it would be unrealistic for such organisations to complete the supplemental questionnaire relating to large numbers of individuals.

In addition, a single social service department in London provided demographic data relating to disabled refugees and asylum seekers known by case workers within its disability and asylum teams and the Medical Foundation for the Care of Victims of Torture provided data on levels of impairment experienced by the people on its active client list.

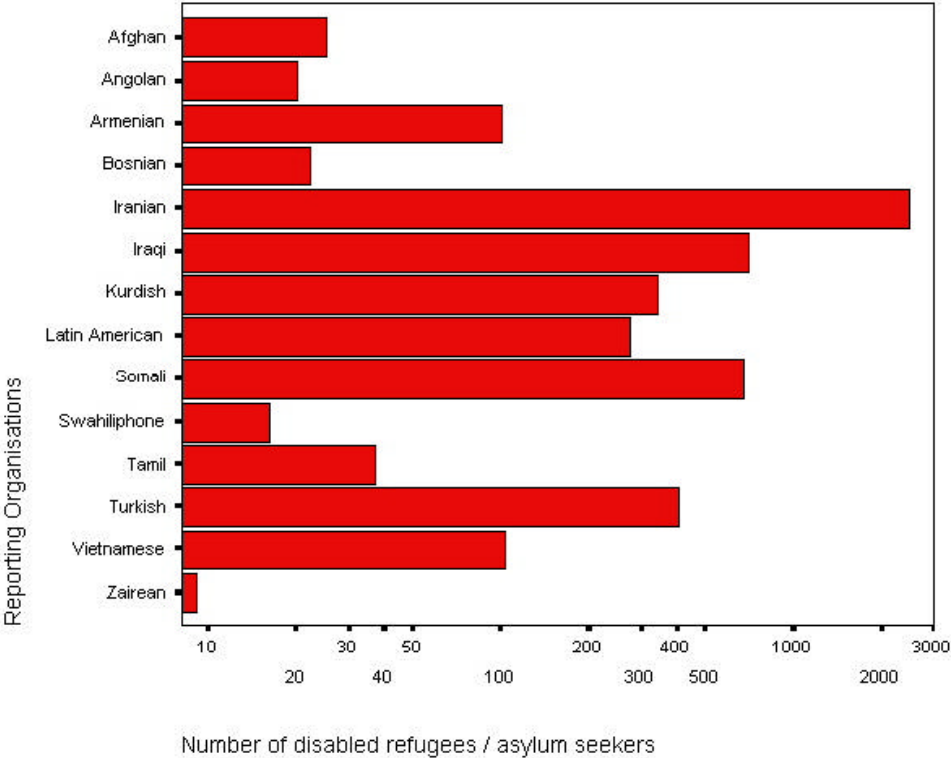
### **The initial sample**

Following reminders, the initial screening questionnaire achieved a final response rate of 34 per cent - a satisfactory rate given the often extremely high workloads found in refugee and disabled people's organisations. The responses on these questionnaires indicated that 44 organisations (12 disability

organisations and 32 refugee organisations) were in contact with a total of 5,312 disabled refugees or asylum seekers. A further 45 disability organisations and 12 refugee organisations reported that they knew no disabled refugees or asylum seekers.

Graph 1 illustrates the number of disabled refugees and asylum seekers reported by organisation type. The organisations have been grouped by national or linguistic origins.

**Graph 1: Number of disabled refugees/asylum seekers reported**



The graph illustrates that Iranian organisations reported contact with the largest number of disabled refugee or asylum seekers (2506), followed by Iraqi (705), Somali (673), Turkish (400), Kurdish (340), Latin American (273), Vietnamese (103), Armenian (100), Tamil (37), Afghan (25), Bosnian (22), Angolan (20), Swahiliphone (16), and Zairean (9) organisations. Additionally, disability organisations reported contact with 83 disabled refugees or asylum seekers from various countries around the world.



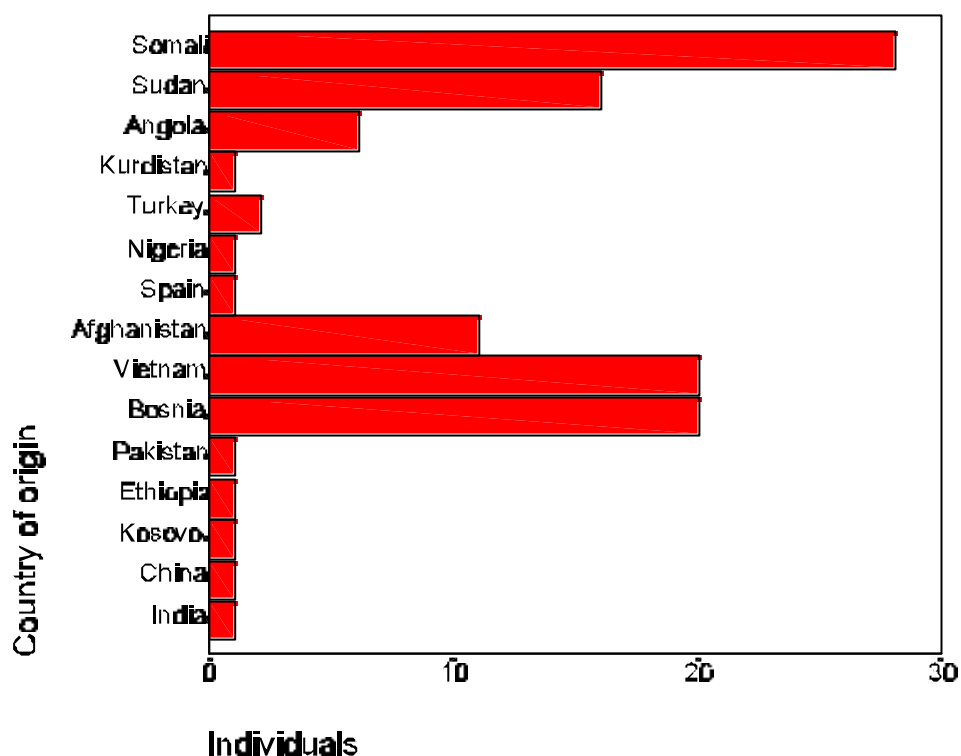
There is no suggestions that this data represents a full count of the disabled people amongst refugee and asylum seeking populations in Britain. We are aware that not all refugee and disabled people's organisations received the screening questionnaire, and that many chose not to return it. Furthermore, we accept that some disabled refugees and asylum seekers are in contact with neither a refugee or disabled people's organisation. This is particularly likely to be the case amongst recent arrivals or people from groups for which few refugee community organisations have been established in Britain (e.g. Roma from the Czech republic). We also accept that other disabled refugees and asylum seekers have hidden impairments. Nevertheless, Graph 1 does provide at least, a baseline figure in the absence of full information, about the large number of disabled refugees and asylum seekers who are resident in this country. The 5,312 disabled refugees and asylum seekers represented by this graph constitute by far the most up to date figure concerning the number of disabled refugees in Britain. Graph 1 also highlights the diverse countries of origin of those disabled refugees and asylum seekers.

It is nevertheless worth noting that by the end of 1999 the United Nations High Commissioner for Refugees (UNHCR) estimated that there were some 265,600 refugees and asylum seekers in the United Kingdom (UNHCR 2000, Table 2.1 ). If the prevalence of disability found by either Duke and Marshall (1995) (3 per cent) or Carey-Wood et al (1995) (10 per cent) was replicated in this population, then the total number of disabled refugees and asylum seekers living in Britain would be between 8,000 and 26,500. Likewise if the five percent figure previously mentioned in connection with Disability Premiums on Income Support is accurate, then this would suggest that there are some 13,000 disabled refugees and asylum seekers in Britain. The minimum estimate of the numbers of disabled refugees and asylum seekers living in Britain produced by the initial screening questionnaire (5,312) should therefore be viewed in the light of these figures.

### **The sub-set**

Supplemental questionnaires were received from 13 organisations, providing demographic details relating to 111 individual adult disabled refugees and asylum seekers from 15 countries. These 111 individuals constitute a small sub-set of the 5,312 disabled refugees originally identified in the screening questionnaire. While the characteristics of these 111 individuals, particularly their country of origin, reflects those organisations which chose to respond to the supplemental questionnaire, the following analysis does provide a useful insight into the demographics of disabled refugees and asylum seekers living in Britain. Graph 2 illustrates the countries of origin for these 111 individuals.

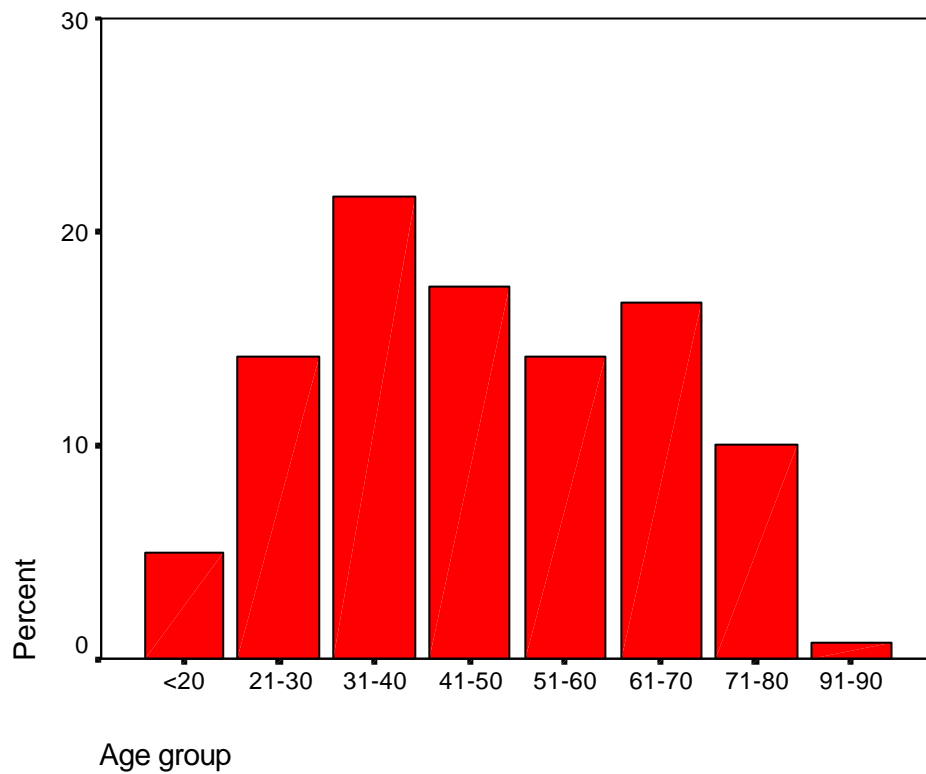
**Graph 2: Countries of origin**



Over 60 per cent of the 111 people within the sub-set came from just three countries Somalia (28 people), Vietnam (20 people) and Bosnia (20 people). There were also 16 people from Angola, 11 from Afghanistan, and many individuals from a wide range of other countries. Whilst this pattern of countries of origin largely reflects the background of the organisations which responded to the supplemental questionnaire, it does provide evidence of the diversity of countries from which disabled refugees and asylum seekers come to Britain.

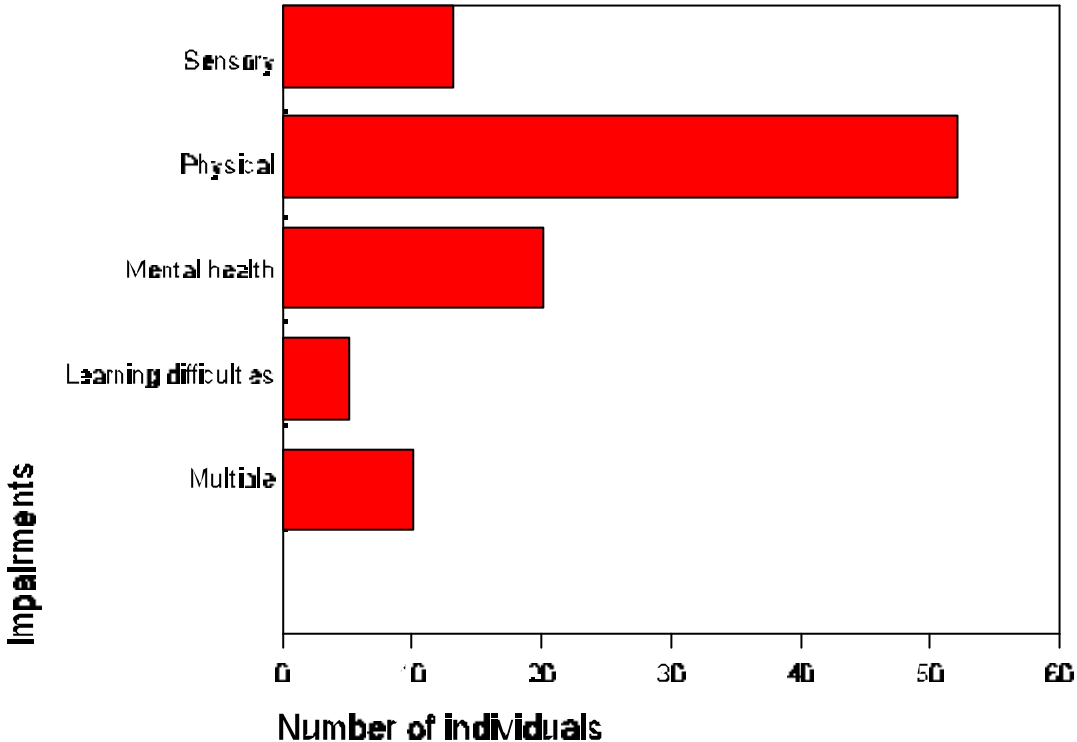
Sixty per cent of the sub-set were male and 40 per cent were female. Adults of all ages were represented, although as Graph 3 illustrates the largest contingent (22 per cent) were those in the 31-40 age group. The second largest age group was 41-50 years (18 per cent), although it is also worth noting that over a quarter of the sample (27 per cent) were aged over 60, including one individual aged 91.

**Graph 3: Age profile of individuals**



The refugees and asylum seekers in the sub-set experienced a range of impairments, although physical impairments were most commonly reported. Fifty-two per cent of the individuals experienced a physical impairment, whilst twenty per cent experienced mental health problems. Sensory impairments were experienced by 13 per cent and learning difficulties by five percent. Finally ten per cent of the people in the sub-set experienced multiple impairments. Graph 4 illustrates impairments among the disabled refugees and asylum seekers in the sub-set and highlights the need to acknowledge the diversity of impairments experienced by people within refugee populations.

**Graph 4: Impairments**

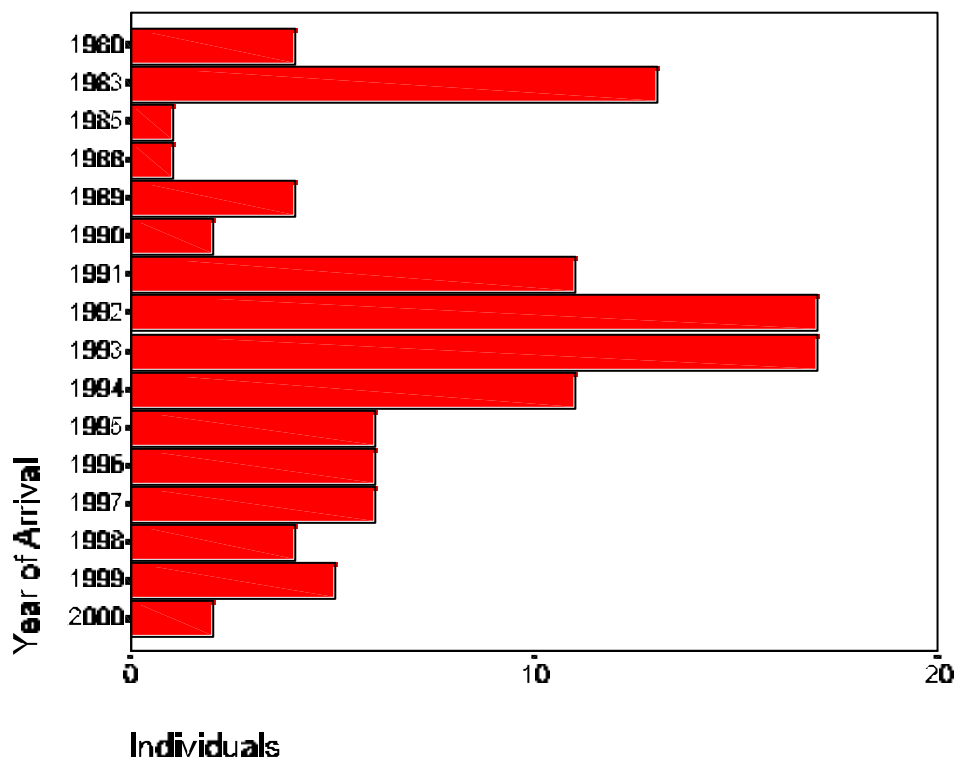


Information regarding the conditions associated with these impairments, or the cause of an impairment, was provided for 64 per cent of the people within the sub-set. Eighteen people had contracted polio and sixteen people had experienced traumatic injuries; in 11 cases these were directly attributed to either torture or war injuries. Nine individuals had had strokes and seven had arthritis. The complications of diabetes had resulted in impairments for six people and four people had lost their sight through either glaucoma or tunnel vision disease. Three individuals had suffered cancer and four had

been diagnosed as having schizophrenia. One individual had muscular dystrophy and another epilepsy. Additionally, a number of people were reported to have been born with impairments. The variety of experience reported here illustrates the need to avoid assumptions regarding the cause of impairments amongst refugees and asylum seekers. As with the general population, impairments are associated with a wide range of circumstances and conditions.

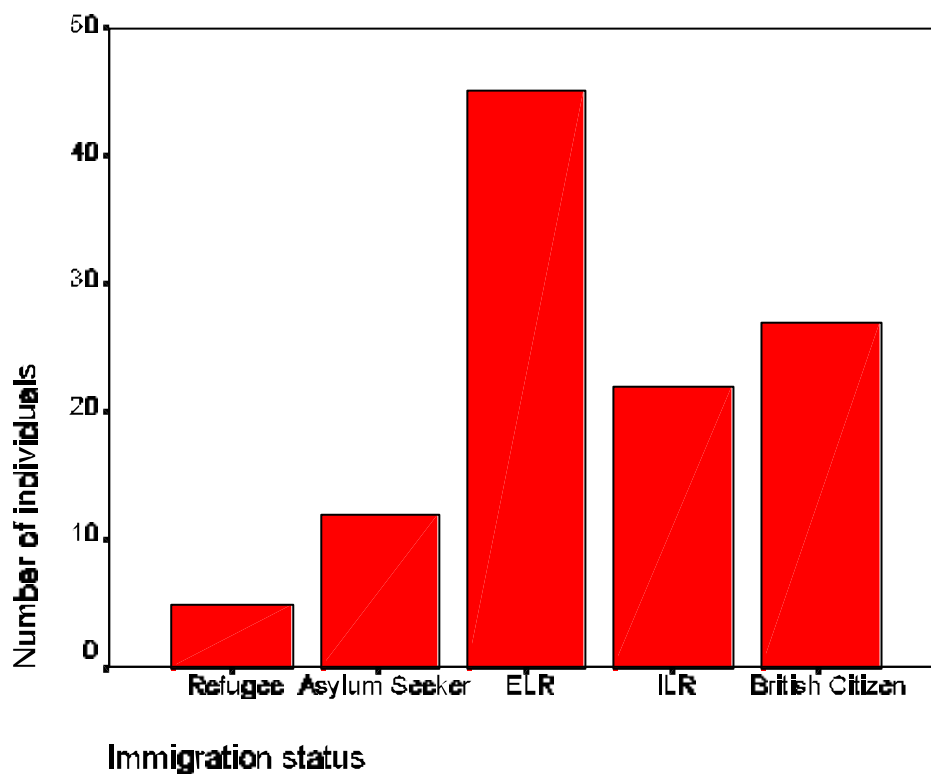
The 111 individuals for whom demographic data was available had all arrived in Britain since 1980, with a peak in 1983 and further peaks in 1992 and 1993 (Graph 5 - Year of arrival in Britain). All those arriving prior to 1986 were refugees from Vietnam, and all those who arrived in 1989 and 1990 were from Somalia. Eight of the eleven people who arrived in 1991 were from the Sudan and over half those who arrived in 1992/3 were from Bosnia. More recent arrivals were from a variety of countries. As might be expected, this pattern reflects those years in which large numbers of people from these countries arrived in Britain as refugees or asylum seekers. For instance, refugees from Vietnam primarily arrived in Britain between late 1979 and 1983 (Dalglish, 1989) and 1992 is the year in which Bosnia declared itself independent from Yugoslavia. The resulting war led to 5,635 people claiming asylum in Britain having fled Bosnia and other parts of the Former Yugoslavia during 1992 alone (Woodbridge *et al.*, 2000).

Graph 5:  
Year of arrival in Britain



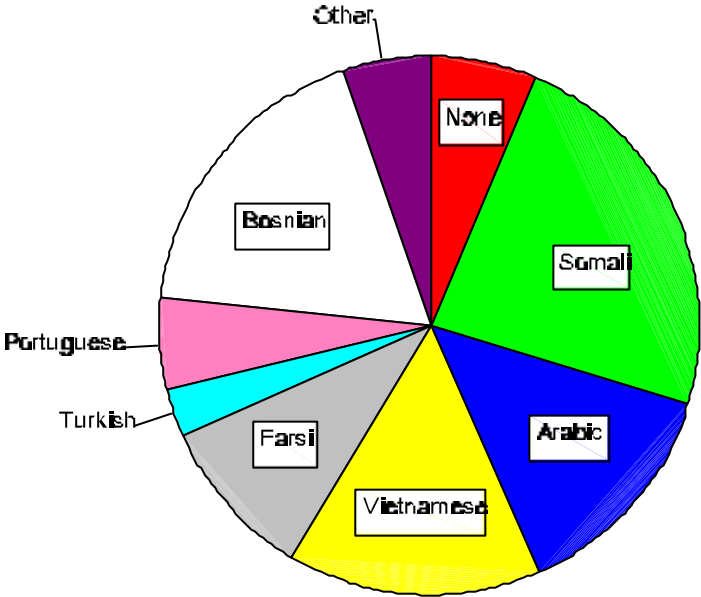
The 111 individuals currently held a variety of immigration statuses ranging from asylum seeker, through exceptional leave to remain (ELR), indefinite leave to remain (ILR), refugee, to British citizen. All, including those with British citizenship, had originally entered this country as refugees or asylum seekers. Graph 6 illustrates the numbers with each type of immigration status. It shows that the majority of those for whom data were available had received exceptional leave to remain in the UK (45 people), while a further 27 had obtained British citizenship. Twenty-two people had indefinite leave to remain in the UK and twelve were asylum seekers. Only a minority (five people) had been granted refugee status. Over half those with ELR were from Somalia or Bosnia, while former residents of Vietnam and the Sudan formed the majority of those who had obtained British Citizenship. As with year of arrival, this pattern of immigration statuses largely reflects that found amongst non-disabled refugees. For instance between 1991 and 1999, 24,715 people were granted refugee status, compared to 51,255 who received exceptional leave (Woodbridge *et al.*, 2000).

**Graph 6: Immigration status**



The sub-set of 111 people included individuals who spoke eleven separate first languages and seven individuals who could not speak. Graph 7 illustrates the range of languages spoken showing that over half the sample spoke either Somali, Bosnian or Vietnamese. The languages included within the ‘other’ category are English, Cantonese, Bravanese and Spanish. It should also be noted that 58 per cent of the sub-set spoke a second language and 11 individuals spoke three or more languages.

**Graph 7: First languages spoken**



**Interview data**

Seven organisations which knew of more than 25 disabled refugees or asylum seekers agreed to be interviewed by a researcher. A key purpose of these interviews was to obtain demographic characteristics of the disabled refugees and asylum seekers, without burdening the organisations with long forms to complete. It is acknowledged that organisations which know large numbers of disabled refugees or asylum seekers often find it difficult to provide individualised data due to the combination of high workloads, low resources and a lack of computerisation. All the refugee organisations visited were in London and they included two Kurdish organisations, an Iraqi organisation, a Vietnamese organisation, a Somali organisation, a Tamil organisation and an Iranian organisation. In total these organisations provided data relating to around 900 disabled refugees and asylum seekers. These individuals are a sub-set of the 5,312 disabled refugees originally identified in the screening questionnaire.

*Kurdish Organisation 1:* This organisation was in contact with around 120 disabled refugees or asylum seekers who were predominately (c. 80 per cent) male. The majority were aged between 20 and 45 years, although there were some disabled elders in their community. Among the men, many of those aged under 45 had physical impairments which had arisen as a result of torture. Others had sustained impairments as a result of war-related injuries either through combat or as civilian casualties. A small number of women had also been permanently injured by bullets, mines or bombs. Many people were amputees. Both men and women were represented amongst the older disabled refugees or asylum seekers and the majority were experiencing age-related impairments, although some of the men were victims of torture or had sustained war injuries. The most common first language was Sorani, a dialect of Kurdish, and many arrived in Britain in 1992, although arrivals continue today.

*Kurdish Organisation 2:* The second Kurdish organisations was in contact with around 150 disabled refugees and asylum seekers and again they were predominately (up to 90 per cent) male. The age structure of those known was highly skewed towards those aged between 20 and 43 years and virtually all had acquired their impairments as a result of torture or war-related injuries. Again many people had lost limbs. Sorani dialect was the most common language and many of those known by this organisation were referred to Kurdish Organisation 1.

*Iraqi Organisation:* This Iraqi organisation was in contact with around 350 disabled refugees, 250 of whom primarily experienced mental illness. Approximately a hundred people had a physical impairment. Although some of these people had been born with impairments, the majority had again acquired impairments through torture and war-related injuries. Once again many people were amputees. Less than ten people who had visual impairments were known to the organisation and only a few who had learning difficulties were known. The gender balance was fairly equal with similar numbers of men and women. The age distribution was also broader, although a majority were adults of working age. Among the small number of older disabled refugees and asylum seekers, chronic health problems were the most common impairment, although this group also contained a handful of younger people. The organisation serves people from various ethnic groups originating in Iraq including Arabs, Kurds and Syrians, consequently Arabic and Kurdish (both Sorani, [60 per cent] and Badinan, [40 per cent] dialects) are used as first languages.

*Vietnamese Organisation:* This organisation estimated that it was in contact with around 65 disabled refugees, of whom a majority were women. Over 80 per cent were aged over 50 and impairments arising from aging and chronic health problems predominated. For instance, strokes and rheumatism



were common conditions. Ten disabled refugees were under 50 years old and three of these people were males who had Down's Syndrome. This organisation also knew one deaf person and a small number of people who had acquired physical impairments as a result of war related injuries or carrying excessive loads as young people. Vietnamese is the most common first language, although knowledge of Cantonese is fairly wide spread. Most members of the community had arrived in the UK between 1978 and 1983.

*Somali Organisation:* Unusually, this organisation was able to provide some statistics relating to the disabled refugees and asylum seekers known by its staff. Out of a total of 479 households using the service in the year up to August 2000, 57 per cent of the households (275 households) included a disabled person or someone with a long term health problem. Table 1 provides details of self reported conditions (some people experienced more than one condition). It shows that while chronic ill health was common, some people had acquired impairments as a result of torture or war-related injuries.

**Table 1: Somali organisation: self reported conditions/impairments**

<i>Condition or impairment</i>	<i>Number of reported incidences</i>
Arthritis or rheumatism	60
Mental distress or traumatic stress	41
Asthma	31
Diabetes	30
Leg problems	26
Back problems	24
Visual impairment	18
Heart conditions	14
Renal problems	13
High blood pressure	12
Tuberculosis	12
Epilepsy	11
Paralysis	9
Bullet wounds	8

<i>Condition or impairment</i>	<i>Number of reported incidences</i>	
Child development problems	8	
Osteoporosis	7	Continued/...
Polio	5	
Use of prostheses	4	
Hearing impairment	5	
Head wounds	5	
Respiratory problems	3	
Neurological problems (including epilepsy)	3	
Strokes	3	
Learning difficulties	5	
Others	17	
Total of reported incidences	374	

One hundred and three individuals had entitlement to either Disability Living Allowance or Attendance Allowance and a further 55 people had made claims for these benefits. Nineteen people appeared to meet the disability criteria for these benefits but were unable to claim due to the Immigration and Asylum Acts which deny asylum seekers access to disability benefits. The disabled people known to this organisation included more women than men and people of all ages. The majority of people spoke Somali, although some people also had a knowledge of English, Italian or Arabic. Most people had arrived in the UK during the last ten years.

*Tamil Organisation:* This organisation knew about 25 disabled refugees and asylum seekers including a mix of men and women of all ages. Among the younger adults, torture or war-related impairments were most common, whilst older people predominately experienced chronic health problems. Tamil refugees and asylum seekers have been arriving in the UK from Sri Lanka since the mid 1980's.

*Iranian Organisation:* While this organisation was able to say that it had dealt with over 3,000 enquiries about disability issues during 1999/2000, it was unable to provide an accurate estimate of the number of disabled refugees and asylum seekers known. The majority of disability-related enquiries

were associated with mental health problems and less than ten per cent with physical impairments. Severe back problems, epilepsy and limb amputations were common, often as a result of torture. While a majority of people spoke Farsi, others used Kurdish, Turkish or Afghan. Many people had arrived in the UK following the Islamic Revolution of 1979 and the Iran-Iraq war in the 1980's.

### **Other data**

The material presented in this section of the report relates to disabled refugees and asylum seekers who were identified by means other than through the initial screening questionnaire. These individuals therefore represent additional disabled refugees and asylum seekers beyond the minimum estimate of 5,312 previously provided.

#### *Citizens Advice Bureaux*

Three Citizens Advice Bureaux responded to a call for information regarding disabled refugees and asylum seekers. A CAB in Wales reported that they were assisting two male disabled refugees who both had physical impairments and were in their early 20's. The men were from Somalia and Iran and had arrived in the country within the last two years. One man had received exceptional leave to remain whilst the other was an asylum seeker. A London CAB reported that during a client profiling exercise they collected details from 503 people. Eighty-eight of these people identified themselves as refugees or asylum seekers and of these eight per cent responded positively to the question 'Do you consider yourself to be disabled?'. Just over one per cent also reported that they were entitled to Disability Living Allowance. Finally a second CAB in London reported that between 20-30 per cent of the 500 clients they see a year at an HIV/AIDS specialist centre are refugee or asylum seekers. Many of these people experience physical or mental impairments as a result of HIV or AIDS. The majority of clients are from west and east Africa, for instance countries such as Sierra Leone, Ethiopia, Eritrea and Uganda

#### *Medical Foundation for the Victims of Torture*

The Medical Foundation for the Victims of Torture was not included in the initial sample of 300 refugee and disabled people's organisations, however an opportunity arose to meet with two senior members of staff. During this meeting information regarding the numbers of disabled refugees and asylum seekers was provided. The Foundation has seen some 20,000 clients since 1985, and has an active client list of some 1,000 individuals. All of these people are the victims of torture and 99 per cent are asylum seekers or refugees. In addition to the mental health difficulties experienced by every person on the active client list, over 80 per cent were thought to have some form of physical or sensory impairment resulting from torture. In many cases these impairments would be permanent. Around 20 per cent of

clients had suffered some hearing or sight loss, often as a result of beatings around the head. Similarly around 20 per cent had developed epilepsy following head injuries sustained during torture. Physical impairments were extremely common, particularly limb injuries and severe back problems, although only 1-2 per cent of clients were wheelchair users. The Foundation sees clients from nearly 90 countries, although currently 40 per cent are from Middle Eastern countries including a large number of Kurds from Turkey, Iran and Iraq. Some 40 per cent of the Foundation's current clients are from Africa (e.g. Algeria and Zaire), and 15 per cent from Europe. Amongst this last group, are refugees and asylum seekers from the former USSR, and Roma people from Slovakia, Poland and Romania. Just five per cent of clients are currently from South America.

#### *A London Social Service Department*

A number of London Social Service Departments were approached and asked to provide data regarding disabled refugees and asylum seekers. Only one Borough thought that it was able to systematically identify this group, although subsequent investigations proved that this was not the case. As an alternative, members of staff within disability and asylum teams were asked to complete forms providing demographic data relating to disabled refugees and asylum seekers known to them. To date, data relating to 21 individuals (including nine children) has been received. Apart from the children, data relating to seven people aged between 21 and 50, a 55 year old and 75 year old was provided. Six of the people were from Sri Lanka, three from Vietnam, two each from Iraq, Nigeria and Uganda and a single person from Somalia, Burundi and Zaire. In three cases, the social service department was not aware of the individual's country of origin. Eight individuals had physical impairments, eight had hearing impairments, a single person had a visual impairment and four people had multiple impairments. All had arrived in the UK since 1993, with half arriving since 1998. Half of the people were asylum seekers and only two had received refugee status. Six people had either indefinite or exceptional leave to remain in the UK and in three cases the case workers were unaware of the individual's immigration status.

#### **Conclusion**

Although the data presented in this report is of varying quality, it does constitute the most up to date body of data currently available regarding the demographic characteristics of disabled refugees and asylum seekers living in Britain. It provides significant evidence that thousands of disabled refugees and asylum seekers are resident in this county and that there is considerable diversity within the population with regard to a whole range of social characteristics. Disabled refugees and asylum seekers originate from many different countries and hold a variety of immigration statuses. This reflects not only the diversity of nations around the globe from which refugees arrive, but also the plethora of legal statuses

granted to people who have fled from their country of origin because of fear and persecution.

Within the group of disabled refugees found by our supplemental questionnaire people from Vietnam, Somalia and Bosnia predominate. The disabled refugees experience many different kinds of impairments resulting from chronic ill health, accidents, torture, war injuries and infections. Many of those from Vietnam experience impairments and conditions commonly found amongst older people (which reflects the age structure of a refugee community which largely arrived some 20 years ago). War and torture-related injuries were particularly common among refugees from the Kurdish community. Polio, a condition which has been virtually eradicated in Britain, had caused impairment for refugees from Afghanistan, Bosnia, Pakistan, Somalia, Turkey and Vietnam. The disabled refugees in the sub-set spoke 11 different languages as their first language and multi-lingualism was common. They had all arrived in Britain after 1980 with the Vietnamese and Somalis having the longest history of residence in this country and arrivals from Sri Lanka, Afghanistan and Angola in 2000. This illustrates a continuity which suggests that disabled people are present within all refugee and asylum-seeking populations.

While it is recognised that the high degree of diversity found in this survey probably contributes to the fact that disabled refugees and asylum seekers currently remain an invisible group within society, it is argued that such diversity does not negate the need for the collection of accurate demographic data relating to this group. Indeed, the presence of diversity can be seen as a compelling force for the collection of accurate demographic data. With an increasing awareness of disability within society as a whole, and a governmental commitment to combatting disadvantage (Home Office Communication Directorate, 2000), it seems crucial that demographic data collection relating to refugees and asylum seekers should in the future incorporate a focus upon impairment. Commentators agree that service providers are largely ill-informed about refugees and their specific needs, which makes it *'difficult for them to respond and easy for them to ignore the issue'* (Robinson, 1998, p. 153). The current absence of any reference to impairment or disability within demographic data concerning refugees and asylum seekers hinders the development of disability-aware refugee services and policies. Furthermore, in the absence of disability awareness, it increases the likelihood that refugee services and policies will fail to meet the needs of disabled refugees and asylum seekers: an issue which other work within the research project *'Disabled Refugees in Britain: needs for and entitlements to social and welfare services'* continues to address. As such it is hoped that this report will prove both timely and informative, and will raise awareness of the need for systematic demographic data collection in respect of this potentially vulnerable population.

## References

Boylan, E. (1991) *Women and Disability*, London: Zed Books.

Carey-Wood, J., Duke, K., Karn, V. and Marshall, T. (1995) *The Resettlement of Refugees in Britain*, Home Office Research Study 141, London: HMSO.

DalGLISH, C. (1989) *Refugees from Vietnam*, London: Macmillan.

Duke, K. and Marshall, T. (1995) *Vietnamese Refugees since 1982*, Home Office Research Study 142, London: HMSO.

Girbush, C. (1991) *Manchester Vietnamese Employment and Training Survey*, Manchester: The Centre for Employment Research, Manchester Polytechnic.

Home Office Communication Directorate (2000) *Human Rights Act: An introduction*, London: Home Office Communication Directorate.

London Research Centre (1999) 'Refugee Demographic Data Sources', *Population Advice Note 98-5*, pp. 3-7.

Refugee Employment and Training Centre (1991) *Employment and Training of Refugees*, A report for CLINTEC (The City and Inner London Training and Enterprise Council), London: Refugee Council.

Robinson, V. (1998) 'The importance of information in the resettlement of refugees in the UK', *Journal of Refugee Studies*, 11, 2, 146-60.

UN (2000) <http://www.unhcr.ch/resettle/stats.htm> (6/12/2000).

UNHCR (2000) *Refugees and others of concern to UNHCR, 1999 Statistical Overview*, Geneva: UNHCR Registration and Statistics Unit (<http://www.unhcr.ch/statist/99oview/cover.pdf>).

Woodbridge, J., Burgum, D. and Heath, T. (2000) *Asylum Statistics United Kingdom 1999*, London: Home Office.