Co-Producing transferable delivery models and solutions to health and care inequalities experienced by Refugee, Asylum Seeking and Migrant Populations (2024-2027)

#MigRefHealth

Margaret.Greenfields@aru.ac.uk

UKRI Arts and Humanities Research Council

CORE AIM

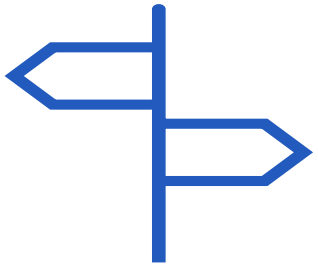
To generate an **evidence-based, co-designed** conceptual framework for **transdisciplinary interventions** in health care to support **refugees, asylum seekers and migrants**, that allow **community assets** to be efficiently **integrated** so as to support **cost-efficient, accessible, scalable services,** delivered locally and regionally by ICSs and their key partners

INCLUDING:

Identifying and building opportunities for wider community impact through KE/ transferability of learning on how holistic approaches to health and wellbeing can best target health inequalities

ACCOMMODATION

FOOD/NUTRITION



ACCESS TO (DIVERSE) SUPPORT SERVICES

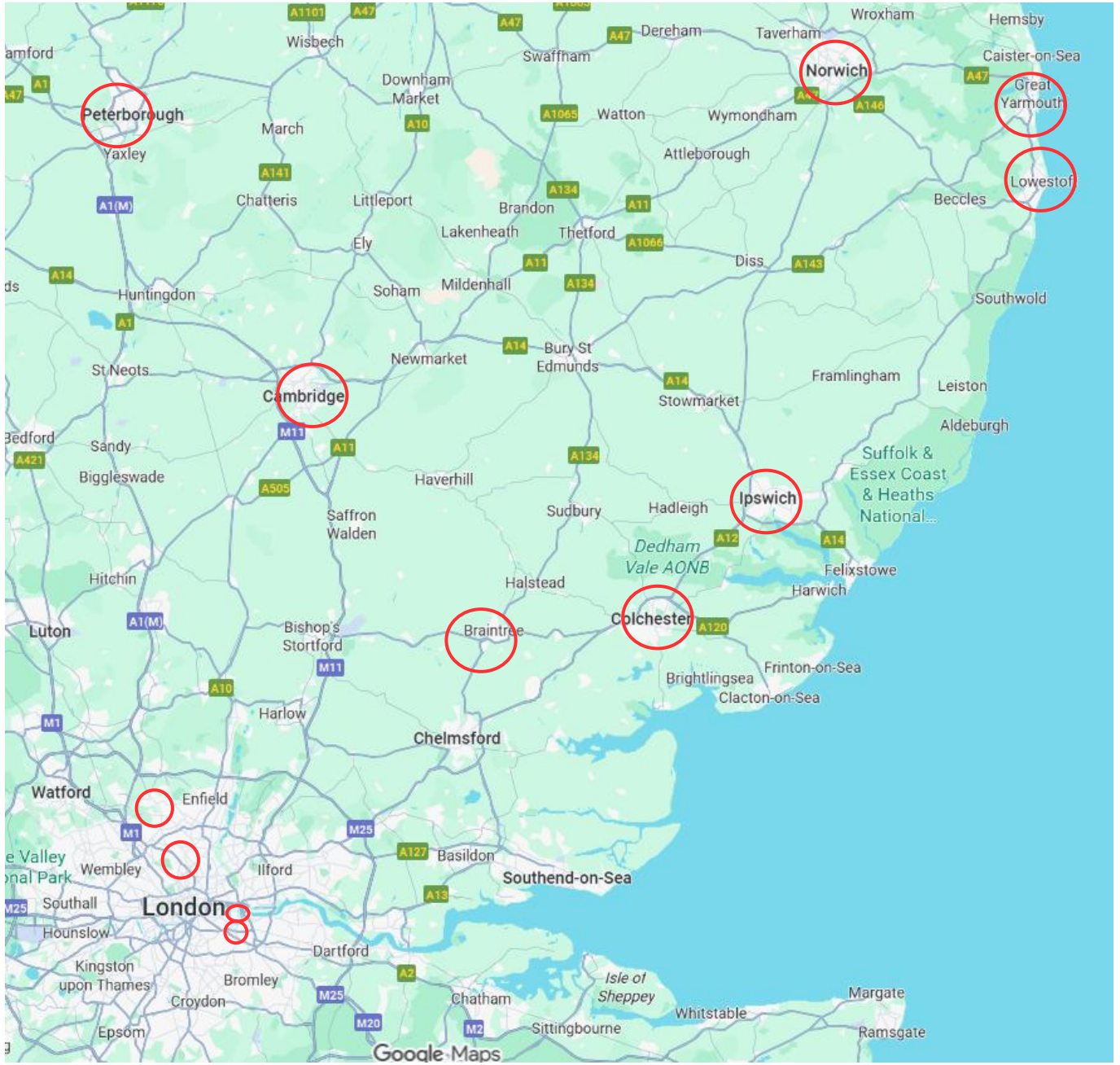
Three Regions

Twelve field sites:

- Colchester
- Wethersfield
- Lowestoft
- Ipswich
- Norwich
- Gt Yarmouth
- Peterborough
- Cambridge

- Islington
- Barnet

- Lewisham
- Greenwich



Arts and Humanities Research Council

Community Partners

Lead Researcher	Role	Organisation
Tamara Joseph	Co-investigator	Barnet Citizens - Citizens UK
Catherine Walston	Co-investigators	Cambridge Refugee Resettlement Campaign
Louise Gooch, Gill Searl and Farsh Raoufi	Co-investigators	Local Government East
Louise Humphries, Ligia Macedo and Georgia Almkvist O'Brien	Co-investigators	GYROS
Alan Robertson Abigail Oyedele	Co-investigators	Lewisham Refugee & Migrant Network Citizens UK Greenwich
Sue Lukes	Co-investigator	Migration Work CIC
Kirit Sehmbi	Co-investigator	The Queen's Community Nursing Institute

Additional advisory partners are Essex County Council and New Citizens Gateway

4 Key Groups...

- **Syrian**
- **Afghan**
- **Ukranian**
- **Hong Kongers**

....Plus two other nationalities in each field site

(nb: Weathersfield treated as a discrete /outlier site)

- 1 x EU
- 1 x non-EU

- *In practice* attendees have self-identified as of the following nationalities/communities....

Afghan	Bulgarian	Gambian	Kuwaiti	Persian	Somalian	
African	Chinese	Hong Kong	Latvian	Polish	Spanish	Uzbeck
Albanian	Congolese	Indian	Libyian	Portuguese	Sudanese	Vietnamese
Algerian	Egyptian	Iranian	Lithuanian	Portuguese /Brazilian	Syrian	Yemeni
Bangladeshi	Eritrean	Italian	Nigerian	Romanian	Turkish	
Bengali	Ethiopian	Kurdish	Pakistani	Russian	Ukrainian	

Bangaldeshi	Portugal
Ethiopia & Sudan	Portuguese with 3rd country origin
Indian	Romania - Roma
Iranian	Romanian
Italians	Somalis
Latvian/Lithuanian	Spanish
Nigeria	Sudanese
Pakistan	Vietnamese
Polish	

Project statistics (as of mid-June 2026)

- 21 community co-researchers (CCRs) - speaking 10 community languages (mother tongue)
- 85 walking interviews
- 21 one-on-one interviews (Wethersfield residents/former residents)
- 77 Community Fora (CFs) across our 12 field-sites.
- In CFs 2, 3, 4 , 6, 7, 8, 9 and 10 = 1048 participants (633 unique participants), more attendance figures from validation workshops to come
  - Over 1300 professional photographs capturing events/community assets (from 10 sites),
  - 10 discrete creative methods .
- CFs 1 & 5 & 11 [the latter commencing in May 2026] have had 250+ stakeholder participants
- Interactive map v1 containing over 5500 assets plotted.
- Literature scoping review has reduced over 7900 references (incl grey literature) to <85 for final screening, with subsets by theme.

Methods

Literature Review

Policy Review + Public Health Infrastructure Mapping

Walking Interviews - undertaken with trained CCRs

Community Forums organised in each field site – 72 currently completed + 25 stakeholder events

Deep-Dive sessions with 'harder to reach' populations (targeted at specific communities – eg Afghans, Hong-Kongers, Syrians/Romanians)

Themed CFs e.g. food/accommodation/health services

Interviews with stakeholders (health predominantly)

Feedback and validation with stakeholders + community members (ongoing)

One-to-One interviews (Wethersfield residents/ex-residents - ongoing)

Data validation sessions (stakeholders/communities) ongoing

Co-Design sessions for exhibition selection – ongoing

Creative workshops – methods:

Storytelling

Theatre/music

Photo/object elicitation

Storyboarding/'River of life'

Zine-Making

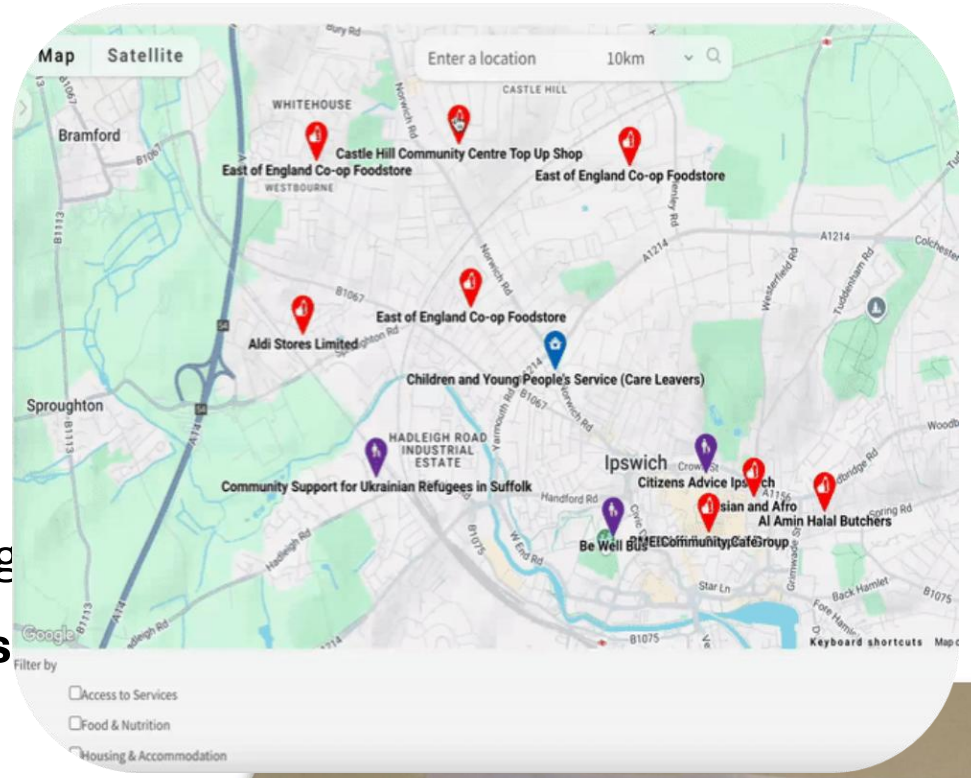
Cooking

Gardening, Art and Green Space days for men from Weathersfield Camp

Interactive Asset Map (v1 +V2 in progress)

UKRI Arts and Humanities Research Council

Asset-Mapping



- **Asset mapping** – (Community + Stakeholder input) V1
- **Counter-cartography** (countermapping - a practice of creating maps that **challenge dominant power structures and narratives**, often in support of marginalized or dispossessed groups)
- V2 of the map highlights assets flagged by community members which may be **'under-the-radar'** of service providers
- The mapping exercise and KE of good practice examples in turn feeds into **co-/re-design of services** to enhance accessibility for R/AS/M and potentially wider excluded or vulnerable groups

Arts and Humanities Research Council

What comes next?

Validation of findings (each field-site

– 4 undertaken to date in EoE)

Collaborative identification of ‘best practice’ examples of services used by R/AS/M to support well-being (eg community pantries; one-stop shops etc).

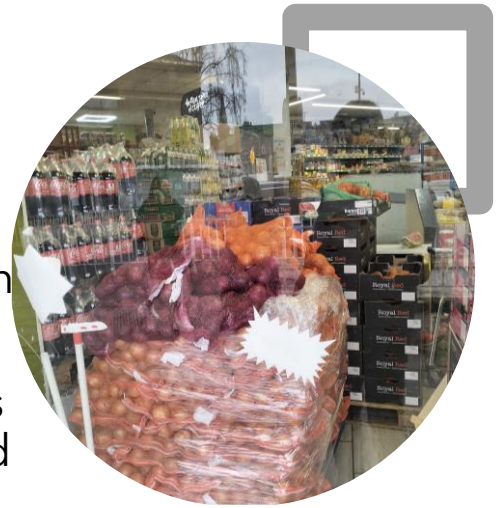
SROI/Economic evaluation of selected best practice examples

KE across field-sites taking account of site-specific elements in urban/rura/coastal areas (eg geography/population/public transport)

Exhibitions across field-sites (Autumn/Winter 2026)

Moving to further Dissemination and Engagement phase with political and policy stakeholders in late summer/autumn 2026

Nb: Political context (and recent changes post May elections with Reform/Restore administrations in 2 field-site areas) and devolution/NHS/ICB reorganisation as a ‘wild card’



Arts and Humanities Research Council

Project publicity

#MigRefHealth

www.migrefhealth.co.uk