

Submission by Nasc, the Migrant and Refugee Rights Centre to the Department of Children, Equality, Disability, Integration and Youth to inform the National Strategy for Women and Girls

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Nasc

Migrant & Refugee Rights

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About us:

Nasc, Migrant and Refugee Rights Centre is a nongovernmental organisation based in Cork City, Ireland. Nasc, the Irish word for 'link', empowers migrants to realise and fulfil their rights. Nasc works with migrants and refugees to advocate and lead for change within Ireland's immigration and protection systems, to an inclusive and equal Ireland that realises the rights of all migrants and refugees.

Since Nasc's doors first opened in May 2000, tens of thousands of people have sought our help and support to navigate complex immigration and asylum processes in Ireland. Our Advocacy and Information service is our largest service, providing direct support to between 1,000 and 1,300 people annually. A secure immigration status is the foundation stone for integration in the State and is key to accessing employment, education and public services including health services. Access to free and expert information and advocacy on immigration rights is an essential component of integration for our migrant communities.

Nasc's wide-ranging services include a Women's Programme which supported over 160 women in 2023 with a range of needs including language skills, wellbeing, and employment supports. The 'Connect' project supports children and young people, while the 'New Beginnings' project works with families in the period after family reunification and transitions from direct provision. Our Ukraine Response team provides Ukrainian language information and advocacy to beneficiaries of temporary protection. In addition, our Community Sponsorship and Complementary Pathways programmes work with communities preparing to welcome refugee newcomers resettling in their towns and villages or universities and workplaces. This submission is directly informed by this work. We have aimed to identify issues disproportionately impacting Ireland's female migrant, asylum seeking and ethnic minority communities.

Background:

Nasc welcomes the opportunity to contribute to the updated National Strategy for women and girls. Since the last National Strategy for Women and Girls (2017 - 2020), many of the issues faced by migrant populations in Ireland have been exacerbated. The implementation of the last National Strategy was met with a lack of prioritisation and clarity from the Government, a lack of an intersectional approach, and a lack of opportunity to amend strategy actions and respond to emerging needs, as required. (1)

By working extensively with women populations from migrant backgrounds, Nasc has gained a deep understanding of the pressing issues and opportunities for migrant women and girls in Ireland. In 2020 non-EU women and girls represented 3.5% of the resident female population in Ireland.² We know that many migrant women in Ireland experience a double disadvantage – for example, those with young children are often at increased risk of economic dependency, social isolation and loneliness, which can lead to negative integration and health outcomes. Lack of access to affordable childcare, or lack of fluency in English often hinders women from accessing formal education, finding work or even from getting involved in community activities. This leaves migrant and refugee women excluded and leaves a huge reservoir of skills being missed out on in our communities across Ireland.

1. Centre for Effective Studies. Realising the promise of national equality policy. 13 July 2023. Available at: <https://assets.gov.ie/263523/64481c7e-eeb8-46a0-b09f-8c27e3864978.pdf>

By working extensively with women populations from migrant backgrounds, Nasc has gained a deep understanding of the pressing issues and opportunities for migrant women and girls in Ireland. In 2020 non-EU women and girls represented 3.5% of the resident female population in Ireland. (2) We know that many migrant women in Ireland experience a double disadvantage – for example, those with young children are often at increased risk of economic dependency, social isolation and loneliness, which can lead to negative integration and health outcomes. Lack of access to affordable childcare, or lack of fluency in English often hinders women from accessing formal education, finding work or even from getting involved in community activities. This leaves migrant and refugee women excluded and leaves a huge reservoir of skills being missed out on in our communities across Ireland.

In response to the needs of migrant women, many of whom struggle to find a place in their communities after their arrival in Ireland, Nasc set up the Gateway Project, which has now developed into a full Women's Programme supporting over 160 women annually. Participants can access classes related to language skills, financial literacy, seeking employment, mental health, cooking and crafting, as well as supports tailored to their own specific needs and goals such as childcare, eldercare, or assistance with precarious housing.

2. ESRI, Migrant women in Ireland may face a 'double disadvantage'. September 14 2022. Available at: <https://www.esri.ie/node/9203>

In 2023 Nasc's Women's Programme expanded to include a three-year The Women's Empowerment Project, which supports the self-advocacy, political engagement and rights of women in Ireland's Direct Provision system. A Steering Group of four women living in Direct Provision decided on the priorities for the project. The twelve women selected to participate in the project for the three years are passionate about positive integration, advocacy and community development, and have led the strategic direction of the project thus far, with the support of Nasc. They have become important advocates in their communities, in Direct Provision, for the rights and integration of migrant women.

Socioeconomic exclusion

i. Access to employment

Challenges in accessing and advancing in the labour market perpetuate isolation among migrant women and girls. Affordable and accessible childcare remains a critical determinant for workforce access, especially for migrant women who often lack family support networks in Ireland.

Other barriers include limited opportunities for training and education (such as English language courses), as well as the absence of social or professional networks that are vital for career development. Migrant women may also lack the cultural and contextual knowledge needed to effectively prepare resumes, applications, and interviews, putting them at a disadvantage when seeking employment. Administrative obstacles, such as navigating

work permits, opening bank accounts, and obtaining driving licenses, further hinder their access to the labour market.

Data from the Economic and Social Research Institute shows that migrants in Ireland are more likely to be employed in low-quality jobs and are 21% less likely to join trade unions or staff associations compared to Irish nationals.(3) Discrimination from employers and the lack of recognition for skills and qualifications acquired outside Ireland are significant issues. For instance, a qualitative report by AkiDWA found that women seeking international protection often end up working in the care sector, regardless of their qualifications in other fields. (4) Research also indicates that non-EU migrant women in Ireland earn 11% less than migrant men and 30% less than Irish national men. (5)

Recommendations:

1. Establish job placement and mentorship programs specifically designed for migrant women, focusing on industries that match their skills and qualifications. These programs should partner with employers to facilitate apprenticeships, internships, and on-the-job training opportunities.

3. Economic and Social Research Institute, Government of Ireland - Department of Children, Equality, Disability, Integration and Youth. Wages and working conditions of non-Irish nationals in Ireland. Laurence J., Kelly E., McGinnity F., Curristan S. 19 January 2023. Available at:

www.esri.ie/publications/wages-and-working-conditions-of-non-irish-nationals-inireland

4. AkiDwa. July 2022. Unlocking the Potential of Women Seeking International Protection. Available at: <https://www.akidwa.ie/assets/uploads/media-uploader/nv-women-seeking-international-protection-1-compressed1715436254.pdf>

5. Eurostat. EU - Labour Force Survey 2022. 25 November 2022. Available at:

<https://ec.europa.eu/eurostat/documents/203647/15476179/EU+LFS+DOI+2022.pdf>

2. The state should increase funding to ensure affordable and accessible childcare, particularly in communities with high numbers of migrant families.
3. Develop flexible childcare options that accommodate non-standard work hours, a common situation for migrant women who may work in sectors like healthcare or hospitality.
4. Increase funding for English language courses and vocational training tailored to migrant women's schedules, including evening and weekend classes.
5. Provide language classes that also integrate practical skills, such as resume writing, job application processes, and interview preparation, focusing on the specific requirements of the Irish labour market.
6. Simplify and expedite the process for recognising international qualifications.
7. Establish partnerships between educational institutions and employers to create "bridging" courses that help migrant women upskill or adapt their existing qualifications to Irish standards, ensuring they have pathways to work in their trained fields.

ii. Access to safe, stable housing

For many women in Ireland, their immigration status determines their ability to access long-term housing supports such as access to rent subsidies and social housing. This not only impacts those who are undocumented, but also those on employment permits and EEA nationals who do not have evidence of employment or self-employment in the State.

In Nasc's experience, local authorities may refuse emergency accommodation to those who do not meet the criteria set for long-term housing supports, even though these supports have a different legal basis. The long-term impacts of these challenges can be deeply damaging to migrant women's wellbeing and integration.

In January 2024, almost 6,000 people with international protection status were still living in the International Protection Accommodation System (IPAS). (6) This means that approximately 22% of the residents were entitled to live independently in the community but could not move out, compared to 14% in 2020.(7) The lack of affordable and accessible housing options in their local communities means that thousands of women are likely to remain stuck in Direct Provision accommodation centres, with no clear timeline for when they can transition to independent living. This prolonged stay undermines their ability to establish roots, pursue employment, and integrate fully into Irish society.

Recommendations:

1. Establish a national housing pathway for those transitioning out of IPAS, with defined timelines and targets for moving individuals into independent housing. This should include an emergency fund to support migrants struggling with rental deposits or temporary housing costs.

6. Economic and Social Research Institute. 10 June 2024. Access to autonomous housing for beneficiaries of International Protection in Ireland. Available at: <https://www.esri.ie/node/9992>

7. Ibid.

2. Incorporate built-in support services, such as job readiness programs, mental health resources, and language classes, within centres to facilitate integration from the outset.

3. Stop the practice of relocating individuals who have already established roots in particular communities. Transferring residents disrupts their progress, connections, and integration efforts, further delaying their transition to independent living.

4. Ensure that information on housing rights, application processes, and available supports is provided in multiple languages and accessible formats, such as videos or easy-to-read guides. This should be distributed widely in Direct Provision centres, community hubs, and online platforms.

iii. Women and girls in direct provision or with irregular migration statuses

Many of the women and girls residing in the institutionalised accommodation settings of direct provision (8) experience prolonged socioeconomic exclusion, limiting their opportunities for integration and self-sufficiency. The socioeconomic exclusion experienced by women in direct provision is further exacerbated when their children face poverty, as women often bear the primary responsibility for their care and wellbeing.

Currently, children and young people in international protection accommodation receive only €29.80 per week.

8. Department of Children, Equality, Disability, Integration and Youth of. 26 February 2021. White Paper on Ending Direct Provision. Available at: <https://www.gov.ie/pdf/?file=https://assets.gov.ie/124757/ef0c3059-b117-4bfa-a2df-8213bb6a63db.pdf#page=null>

Currently, children and young people in international protection accommodation receive only €29.80 per week. This minimal payment prevents them from participating in extracurricular activities enjoyed by their peers, increasing their risk of social stigma.⁽⁹⁾ Despite funds of up to €4.7 million secured to introduce a child benefit-equivalent allowance in Budget 2024, children in the International Protection system remain one of the few groups not to receive additional support to counteract the rising cost of living. Budget 2025, announced in October 2024, allocated €8.1 million ⁽¹⁰⁾ for this payment's rollout. The swift implementation of this payment is crucial to alleviate the financial strain on families in international protection and to ensure that these children have equal opportunities to participate in social and educational activities.

The intersection of poverty and social exclusion disproportionately impacts women, particularly migrant women, who often shoulder the responsibility of child-rearing. As primary caregivers, these women face added pressure when living in conditions of poverty, which in turn affects their ability to access support services. This is especially true for those with irregular migration status, those who are undocumented, or those working in stigmatised or unregulated industries. These women may be hesitant to seek assistance due to fears of exposure or

9. Working Group to Report to Government on Improvements to the Protection Process, including Direct Provision and Supports to Asylum Seekers, Final report ('McMahon report') (June 2015) 175.

10. Government of Ireland. Minister O' Gorman welcomes record €837m investment from Budget 2025. Available at: <https://www.gov.ie/en/press-release/5c052-minister-ogorman-welcomes-record-837m-investment-from-budget-2025/#:~:text=International%20Protection,-%E2%80%A2&text=%E2%82%AC8.4m%20has%20been,integration%20and%20reducing%20child%20poverty.>

discrimination. For instance, a study of female sex workers attending the HSE Women's Health Service (WHS) revealed that those working in brothels and escort agencies were overwhelmingly migrants, (11) often with limited English skills and minimal support networks. Many took up sex work as a last resort for survival. The combination of societal stigma, isolation, and language barriers further limits these women's access to healthcare and integration services.

Recommendations:

1. **Implement the International Protection Child Payment:** Expedite the rollout to ensure children in international protection receive adequate financial support.
2. **Allocate Additional Funding to Community Groups:** Support grassroots and voluntary organisations promoting social cohesion with multi-annual grants to allow for the development of long-term strategies.
3. **Enhance Accessibility of Information:** Ensure community events and integration support information is available in multiple languages and accessible formats.
4. **Promote Women's Health Services Across Languages:** Increase accessibility and awareness of public Women's Health Services by offering information and services in multiple languages.

11. Approximately 94 percent of those engaged in sex work in Ireland are migrant women. See National Women's Council of Ireland. 21 June 2021. Defending the right not to be bought or sold for sex. Available at: <https://www.nwci.ie/learn/article/breakt/%C2%A0www.wunrn.com/P194>

5. Provide Specialist Support for Sex Workers: Develop dedicated sexual and mental health services, including peer support systems, and implement improved identification procedures for trafficking victims.

iv. Beneficiaries of Temporary Protection (BoTPs)

Women and girls from Ukraine are increasingly at risk of poverty following government changes to income and accommodation supports for Beneficiaries of Temporary Protection (BoTPs) in March 2024. Of particular concern is the introduction of a 90-day stay limit for newly arriving BoTPs in Ireland, after which they must find alternative accommodation. This policy raises significant risks of exploitation and homelessness, especially for women and children, once they have exhausted the 90-day stay at the Designated Accommodation Centres (DACs). As of October 2024, 42% of DAC residents were female, and 67% of the 189 household groups included at least one child, (12) illustrating the vulnerability of these families. Moreover, BoTPs are currently excluded from accessing the Housing Assistance Payment (HAP), further disadvantaging them in securing independent and affordable housing options.

Since September 2024, BoTPs in full-board accommodation have had their social welfare payments replaced with an allowance of €38.80 for adults and €29.80 for children, which

is also subject to an income test. These reduced payments are likely to disproportionately impact Ukrainian single mothers and their children, limiting opportunities for women to engage in education and employment. For the over 17,800 Ukrainians enrolled in further education as of June 2024, (13) the withdrawal of state supports may make continuing their studies unaffordable, particularly for single parents who are already struggling with limited access to childcare in Ireland. The reduced financial support and lack of childcare options further hinder their ability to secure employment, creating a cycle of dependency and vulnerability.

The uncertainty surrounding immigration status for BoTPs post-4th March 2025 has generated widespread insecurity and anxiety among Ukrainian women and girls. Many beneficiaries of Temporary Protection lack a sense of stability and security in Ireland, and the absence of clear information regarding their long-term status exacerbates their precarious situation. Reduced payments and limited state support hinder their ability to establish roots and pursue long-term integration, affecting their ability to upskill and seek meaningful employment opportunities. For example, single mothers who have been utilising state supports to pursue higher education or vocational training may be forced to abandon their plans if their immigration status remains uncertain or their financial support continues to decline.

13. Central Statistics Office. Arrivals from Ukraine in Ireland Series 13. 24 June 2024. Available at: [Arrivals from Ukraine in Ireland Series 13 - Central Statistics Office](#)

Recommendations:

1. Amend the eligibility criteria for HAP to include BoTPs, ensuring that Ukrainian women and families can access affordable rental housing. This change would help prevent homelessness and exploitation, providing a stable foundation for these families to rebuild their lives in Ireland. In the meantime, provide certainty on the future of the Accommodation Recognition Payment.
2. Develop a clear and transparent pathway to long-term residency or citizenship for Ukrainian BoTPs, ensuring that information on this process is communicated well in advance of the 4th March 2025.
3. Reinstate Disability Allowance, Carer's Allowance and non-Contributory Pension social welfare payments for BoTPs at a higher rate to ensure they have sufficient means to cover basic living costs, and remove income testing to reduce barriers to accessing these supports. This will be particularly important for women who are limited in their opportunities to access employment because of their caring responsibilities, disability or age.
4. Ensure that BoTPs living in State accommodation are not relocated without consideration of their established social and educational networks, preventing further disruption to their lives.

Healthcare

Migrant women in Ireland face significant barriers to accessing quality healthcare, stemming from communication difficulties, cultural differences, and systemic obstacles. The healthcare system often lacks the resources and training needed to provide culturally sensitive and trauma-informed care, resulting in disparities in health outcomes for migrant communities. A study of General Practitioner (GP) trainees in Ireland published in 2011 found that the majority felt unprepared to serve an ethnically and culturally diverse population, indicating systemic gaps in addressing the specific healthcare needs of migrant women. (14)

Refugee and asylum-seeking women who have experienced sexual violence are particularly vulnerable and face additional challenges when seeking healthcare in Ireland. For those who arrive in the country with histories of trauma, including rape, sexual assault, or trafficking, and often experiencing post-traumatic stress disorder (PTSD), depression, or anxiety as a result, the current healthcare system is often unequipped to address their specific needs:

- The availability of trauma-informed care tailored to the needs of refugee and asylum-seeking women is inadequate. While some NGOs and community organizations offer assistance, the lack of comprehensive and integrated services within the public healthcare system remains a major gap. Many women, especially those living in Direct Provision or emergency accommodation centres, are left with minimal resources to support their recovery.

14. Pieper HO, MacFarlane A. "I'm worried about what I missed": GP registrars' views on learning needs to deliver effective healthcare to ethnically and culturally diverse patient populations. *Educ Health (Abingdon)*. 2011 Apr;24(1):494. Epub 2011 Apr 13. PMID: 21710416.

- The lack of specialised mental health services that can address the intersection of sexual violence, trauma, and displacement leaves many women without the support they need. This is exacerbated by the lack of counselling or psychology services available in non-EEA languages.
- Cultural stigma surrounding sexual violence and the fear of not being believed or understood often prevent women from disclosing their experiences. Additionally, without access to professional interpreters trained in handling sensitive issues like sexual violence, many women struggle to communicate their needs or feel uncomfortable sharing their trauma with healthcare providers. This results in untreated mental and physical health issues and further isolates these women from essential services.

FGM is another critical issue affecting migrant women, particularly those from Sub-Saharan Africa, the Middle East, and other regions where the practice is still prevalent. Women and girls who have undergone FGM face both immediate and long-term health consequences, including chronic pain, complications during childbirth, increased risk of infections, and severe psychological trauma. However, Ireland's healthcare system faces several challenges in addressing these needs. Although FGM is illegal in Ireland, there is a lack of specialised healthcare professionals who can provide medical and psychological care for women affected by the practice. Women who have experienced FGM often require surgery, specialised gynecological care, or counselling, but the availability of these services remains limited, especially for those living in remote areas or in Direct Provision centres.

Recommendations:

1. Introduce specialised training programs for healthcare providers focusing on trauma-informed approaches that address the needs of refugee and asylum-seeking women who have experienced sexual violence. This training should include skills for managing trauma disclosures, providing culturally sensitive care, and using interpreters appropriately to create a safe environment for survivors.
2. Establish services specifically designed for women who have experienced FGM, with healthcare professionals trained in providing both physical and psychological care related to the practice.
3. Increase investment in professional interpretation services that are trained to handle sensitive issues like sexual violence and FGM. This would ensure that migrant women feel comfortable and safe disclosing personal health issues and accessing appropriate care.
4. Increase the availability of culturally competent mental health services for refugee and asylum-seeking women, particularly those who have experienced trauma or sexual violence. This should include accessible counselling services that are available in multiple languages and tailored to the needs of women in Direct Provision and emergency accommodation centres.
5. Promote public awareness campaigns within migrant communities to educate women on their healthcare rights and the available services for survivors of sexual violence and FGM. These campaigns should be conducted in multiple languages and delivered through trusted community leaders and organisations.

i. Language and administrative barriers

Access to interpretation services in Ireland remains a significant barrier for many migrants. While the Health Service Executive (HSE) provides free interpretation services upon request at hospitals, there is a lack of clarity regarding the extension of this service to primary healthcare settings such as General Practitioners (GP) clinics. In these settings, the cost of hiring an interpreter is often borne by the patient or the GP, which can create affordability and accessibility issues, particularly for low-income and vulnerable migrant populations. This gap in service provision impacts migrants' ability to access primary healthcare and can lead to poorer health outcomes.

Additionally, awareness among healthcare practitioners about accessing interpretation services through their Community Health Organisation (CHO) guidelines is inconsistent. Many GPs remain unfamiliar with these protocols, resulting in unequal access for migrant patients who need language support.

A positive step was taken in March 2022 when the HSE introduced a centralised booking service specifically for Ukrainian and Russian interpretation in response to the Ukraine conflict. This service allowed GPs to request interpreters either by phone or in person, funded centrally by the HSE. Such measures demonstrate the effectiveness of centralised, publicly funded interpretation services and highlight the potential for expanding similar models to benefit all migrant communities.

Administrative barriers also hinder access to healthcare for migrant women and girls, particularly the requirement of a Personal Public Services Number (PPSN) for medical card applications. Many migrants face delays in obtaining a PPSN due to the complex documentation requirements set by the Department of Social Protection (DSP). Non-EU migrants must provide a passport, proof of address (such as a utility bill, rent contract, or official letter), and a valid reason for needing a PPSN. This last requirement, particularly, can be challenging for individuals unfamiliar with the system, as they must provide specific documentation, such as a partially completed medical card form.

Changes in DSP's application process, including the move toward an online portal, further complicate access. In-person applications, which previously allowed immediate or expedited issuance of PPSNs, are now limited. This shift presents significant barriers for those with limited English proficiency, digital literacy challenges, or unmet literacy needs.

Recommendations:

1. Ensure free interpretation services are available in all primary healthcare settings. Train healthcare providers in each CHO area to increase awareness and streamline the interpretation service request process.
2. All publications from government departments and agencies should be provided in Plain English to ensure they are easily understandable. Allocate additional resources to translate these documents into multiple languages, making them accessible and culturally appropriate for diverse communities.

3. Allow migrants to request in-person appointments at DSP offices when needed. This would help address issues of digital literacy and language barriers, ensuring migrants can access essential services.

4. Allocate additional resources to DSP to reduce delays in processing PPSN applications. This would help migrants access healthcare services and other support systems more promptly, improving their overall integration and wellbeing.

ii. Maternal and reproductive health

While Ireland has a relatively low maternal and perinatal death rate, migrant women are disproportionately disadvantaged, with mothers of African backgrounds. (15) In recent years, 31% of maternal deaths were among women born outside of Ireland, despite representing. (16) These statistics highlight the urgent need for targeted interventions to reduce inequalities in maternal care.

Furthermore, pregnant women in Direct Provision are subject to significantly higher rates of HIV, lack of preconception folic acid use, cervical cancer screening, low birthweight and unplanned pregnancies. (17) Access to

15. HSE Healthcare Pricing Office. October 2022. Perinatal Statistics Report. Available at: https://www.hpo.ie/latest_hipe_nprs_reports/NPRS_2020/Perinatal_Statistics_Report_2020.pdf

16. University College Cork. October 2023. Confidential Maternal Death Enquiry in Ireland Available at:

https://www.ucc.ie/en/media/research/nationalperinatalepidemiologycentre/documents/Maternal_DeathEnquiryReport2019-2021.pdf

17. ee SA, Compton A, McGuirk G, Franciosa T, Foley MP, Kennelly MM, Turner MJ. Medical and social needs of pregnant asylum-seekers in Direct Provision. *Ir Med J.* 2023 Aug 17;116(7):808. PMID: 37606235.

termination services also remains limited for some migrant women and girls, particularly those living outside urban areas or women and girls applying for international protection. These factors are compounded by the limited availability of culturally competent healthcare services and interpretation support, leaving many migrant women unable to fully access the maternal health services they need.

Recommendations:

1. Strengthen maternal and reproductive healthcare provision in community and hospital settings outside of major urban centres. This includes increasing access to antenatal care, HIV treatment, and screening services in rural and remote areas.
2. Introduce culturally sensitive maternal health programs specifically aimed at migrant women, particularly those in Direct Provision. This should include tailored services such as nutrition support, and access to multilingual antenatal classes and materials.

iii. Mental Health Care

Ireland's mental health system faces significant challenges in meeting the needs of the general population, with long wait times, understaffed services, and regional disparities in access to care. The Irish mental health system is currently struggling to meet increasing demand, as shown by the ongoing under-resourcing of community mental health teams and the lack of adequate support for those with mild to moderate mental health conditions. The knock-on effect is a

scarcity of accessible and timely mental health care options for everyone, which is further exacerbated for migrant populations, who face additional barriers linked to language and cultural differences, and who may be less likely to be able to access care or treatment outside of the public system.

Those who seek protection in Ireland are also subject to psychologically challenging experiences due to the lack of access to, or clear timeline towards, safe, independent accommodation. It threatens the sense of security, stability, support network and integration of many women and girls. As well as the long-standing failures in standards and safety in the Direct Provision system, (18) recent years have seen an increase in violent attacks and anti-immigrant demonstrations on accommodation earmarked or occupied by people seeking asylum - this of course poses an increasing challenge to good mental health outcomes for migrant women and girls. (19)

Many accommodation centres located in rural areas are without transport links, making it more difficult to arrange access to GPs and other health appointments. While private transport services are often provided for appointments that are taking place over two kilometres from the centre, this does not meet the needs of some migrant women and girls. For example, having to walk two kilometres on a rural road while ill, heavily pregnant or with a disability leaves many women in an unsafe or unmanageable situation.

18. Department of Children, Equality, Disability, Integration and Youth of. 26 February 2021. White Paper on Ending Direct Provision. Available at: <https://www.gov.ie/pdf/?file=https://assets.gov.ie/124757/ef0c3059-b117-4bfa-a2df-8213bb6a63db.pdf#page=null>

19. RTE. Mapped: The fires linked to accommodation for migrants. 26 July 2024. Available at: <https://www.rte.ie/news/primetime/2024/0207/1431003-mapped-the-fires-linked-to-accommodation-for-migrants/>

For migrant women and girls, these systemic issues are amplified by their unique circumstances. Access to counselling or mental health support services in languages other than English is limited. Those who do not speak English fluently may struggle to express complex emotions or trauma accurately, which can hinder the effectiveness of therapy. Even where interpretation is provided, this can create a barrier in the therapeutic relationship.

Recommendations:

1. Increase funding for community-based mental health teams and psychological support services to reduce wait times for the general population and ensure resources are available for migrant populations.
2. Develop migrant-specific mental health services, including trauma-informed care tailored for women and girls who have experienced displacement or violence.
3. Train mental health professionals in culturally competent care and trauma-informed practices that take into account the unique experiences of migrant women and girls.
4. Facilitate training that helps healthcare professionals understand the impact of using interpreters in therapy sessions and provides them with strategies to ensure the process remains as effective and confidential as possible.
5. Increase efforts to provide information on mental health services and rights in multiple languages, and develop services to ensure that migrant women and girls can access mental health treatment in their preferred language.

Political Participation

i. Awareness of rights

The lack of political participation and representation of migrant women in Ireland highlights and perpetuates a long-standing failure in Government policy and society to meet migrant women's needs. Many migrant women have not been made aware that they have electoral rights in Ireland, or do not know how to exercise them. Nasc welcomes the updated registration system on the Check The Register website, which has increased accessibility by facilitating online registration at any time. (20)

Nasc has campaigned for many years to promote migrant political participation through voter registration drives, hustings and information sharing events, including the successful campaign for the inclusion of voter registration forms in Citizenship Packs. (21) Nasc's Women's Empowerment Project has thus far heavily focused on promoting electoral rights awareness among women in the International Protection system, as well as practical support regarding voter registration. Provision of targeted information for migrant women regarding their political and civic rights is key to promoting their political participation.

Recommendation: Allocate additional resources for initiatives which raise awareness of electoral rights, targeted at those in the International Protection system and other migrant women.

20. Government of Ireland. Improvements to voter registration process launched today as new Check the Register campaign begins. 6 November 2022. Available at: www.gov.ie/en/pressrelease/a24a6-improvements-to-voter-registration-process-launched-today-as-new-checkthe-register-campaign-begins/

21. Nasc, the Migrant and Refugee Rights Centre. Citizenship & Political Participation. Available at: <https://nascireland.org/campaigns/citizenship-political-participation>

ii. Electoral candidacy barriers

Irish political parties generally do not have proactive strategies to increase migrant women's voting registration and election candidacies. (22) The importance of public office mentoring programmes for ethnic minorities, and initiatives to support selection of ethnic minority candidates, was highlighted in the Government's National Action Plan Against Racism, published in 2023. (23) The Programme for Government published in 2020 also pointed to the need to support local authorities in improving gender and ethnic representation in local elections. (24)

In 2024 migrant women accounted for 49% of the local election candidates from a migrant background, up from 35% in 2019. Of those elected in 2024 who were from a migrant background, 55% are women. (25) Sadly, 74% of female migrant candidates reported being victimised by political violence such as racism and harassment, compared to 69% of male candidates. A 2024 report from the Dáil Taskforce on Safe Participation in Political Life further reflects the realities of migrant women's exposure to gendered abuse and intimidation from small sections of the Irish public, both online and while campaigning. (26)

22. Immigrant Council of Ireland. The Experience of Migrant Candidates in the 2019 Local Elections Migrant Electoral Empowerment Report. Lima V. 1 December 2019. Available at: https://www.immigrantcouncil.ie/sites/default/files/2021-09/Migrant%20candidates%20experience_LA2019.pdf

23. Government of Ireland: Department of Children, Equality, Disability, Integration and Youth. National Action Plan Against Racism. 21 March 2023. Available at: <https://www.gov.ie/pdf/?file=https://assets.gov.ie/25014/7/ff9dea67-ef0a-413e-9905-7246b5432737.pdf#page=null>

24. Government of Ireland: Department of An Taoiseach. Programme for Government: Our Shared Future. 29 October 2020. Available at: www.gov.ie/en/publication/7e05d-programme-for-government-our-shared-future/

25. Immigrant Council of Ireland. 05 April 2024. Strength in Diversity II - Experiences of election candidates of a migrant background in the Irish local elections 2024. Available from: https://www.immigrantcouncil.ie/sites/default/files/2024-09/Strength%20in%20Diversity%20II%20Final_o.pdf

26. Dáil Taskforce on Safe Participation in Political Life. May 2024. Available at: https://data.oireachtas.ie/ie/oireachtas/parliamentaryBusiness/other/2024-05-15_task-force-on-safe-participation-in-political-life_en.pdf

Recommendation: Allocate additional resources for initiatives which encourage political participation of migrant women in elections. These initiatives should be responsive to the risk of intersectional harassment, (27) and meet the needs of women in rural areas, as well as those with childcare responsibilities.

Domestic violence

Migrant women face multi-faceted and complex barriers when attempting to report and survive domestic violence in Ireland. These barriers range from language difficulties and insufficient knowledge of the legal and immigration systems to fear of deportation and economic dependency. (28) As a result, migrant women are at a disproportionately high risk of enduring prolonged abuse without accessing the support and protection they need.

The language barrier and lack of access to interpretation supports can make it difficult for migrant women and girls to effectively communicate their situation to authorities, healthcare providers, or support services. Even when interpreters are available, there may be concerns about confidentiality, particularly if interpreters are sourced from their own communities. Fear of stigma and shame within their own communities can prevent women from seeking help.

27. National Women's Council of Ireland. Women Beyond the Dáil: More Women in Local Government. 14 November 2019. Available at:

www.nwci.ie/index.php/learn/publication/women_beyond_the_dail_more_women_in_local_government

28. International Organization for Migration. 24 November 2023. Research into the Policing Response to Domestic, Sexual and Gender-Based Violence in Migrant Communities. Available at:

<https://ireland.iom.int/sites/g/files/tmzbd1826/files/documents/2023-11/research-into-the-policing-response-to-domestic-sexual-and-gender-based-violence-in-migrant-communities-3.pdf>

Migrant women whose immigration status is dependent on their abuser are often fearful of reporting domestic violence due to perceived risk of deportation or losing their right to stay in Ireland. Our experience of supporting victims of domestic violence shows us that abusive partners and spouses will use threats of non-cooperation with immigration permit renewal, theft of documents or threats to have the abused partner deported in order to exercise control.

Ireland currently lacks statutory provisions for the regularisation of immigration permissions for those whose relationships break down due to domestic violence. (29) While the Department of Justice has a discretionary policy (30) allowing some victims of domestic violence to apply for independent immigration status, undocumented women or those without recent immigration permission remain excluded. This exclusion leaves many vulnerable women in a precarious and legally uncertain situation.

Our experience of working with victims of domestic abuse regularising their immigration permission shows that women have experienced insensitive or retraumatising interactions when engaging with officials. For example, they may be asked to provide documents pertaining to the perpetrator or attend immigration appointments with the perpetrator, putting their safety and well-being at risk.

29. The sole exception to this is the European Community (Free Movement of Persons) Regulations 2015 which transposes Directive 2004/38EC into Irish law.

30. Department of Justice, Victims of Domestic Violence Immigration Guidelines. Available at: <https://www.irishimmigration.ie/wp-content/uploads/2024/01/Victims-of-Domestic-Abuse-Immigration-Guidelines-Dec-2023.pdf>

Economic dependence on the perpetrator is another significant barrier, as many migrant women may have limited access to independent financial resources or social welfare supports. In cases where migrant women do qualify for social welfare, they often face delays or administrative barriers in accessing these supports, making it difficult to secure emergency or long-term accommodation.

Access to shelters and refuge services is limited due to high demand. Figures from March to August 2020 show that 1,351 requests for refuge during that period were refused because services were full leaving, on average, eight people per day to be turned away from refuge services due to capacity issues. (31) For migrant women, particularly undocumented and Roma women, the situation is even more precarious, as they may not qualify for the social welfare payments needed to secure these services.

Recommendations:

1. Introduce expedited processing times for domestic violence cases involving migrant women to ensure women and their children have immediate access to social welfare benefits, housing supports, and other essential services. Temporary permissions should be considered for complex cases where expedited processing is not possible.
2. Create statutory provisions that guarantee pathways to secure immigration status for all migrant women who are survivors of domestic violence, regardless of their current immigration status. This should include undocumented women who are particularly vulnerable to exploitation and abuse.

31. Justice Committee Enquiry, Dáil Éireann, 3 November 2021. Available at: https://data.oireachtas.ie/ie/oireachtas/committee/dail/33/joint_committee_on_justice/submissions/2021/2021-11-03_opening-statement-mary-mcdermott-ceo-safe-ireland_en.pdf

3. Expand funding for women's shelters and refuge services to increase capacity and reduce the number of women turned away due to lack of space. Emergency accommodation should be accessible to all women, regardless of their immigration status or eligibility for social welfare payments.

4. Ensure that all relevant information on rights, services, and reporting mechanisms for domestic violence is available in multiple languages and in accessible formats. This includes providing plain-language guides on accessing support services, applying for immigration permissions, and understanding legal rights.

5. Adequate training should be put in place for officials in the Immigration Service, Department of Social Protection and An Garda Síochána, to ensure that women and girls victims of violence encounter sensitive and respectful services.
