

# Swedish Red Cross

## Swedish Red Cross' actions during COVID-19 to support migrants

The Swedish Red Cross scaled up and adapted its migration counselling service to become digital; the National Society offered online and in person support through six treatment centers for persons affected by war and torture; facilitated access to healthcare through its health referral clinic for undocumented migrants; established a national hotline to prevent isolation and loneliness and provide psychosocial support and accurate information. Swedish Red Cross also provided food relief and other in-kind support such as hygiene-kits; and engaged with people in immigration detention remotely. Local branches adapted to restrictions and recommendations to keep social activities, and meeting places open. Through its program for socially sustainable cities, the National Society made special efforts aimed to provide residents in socio-economically vulnerable areas (with a high range of migrants), with confirmed and secure information, support to break isolation, alleviate anxiety and promote health and food distribution.

### Case study 1: Seeking support following release from detention

During the spring of 2020, reports began to come from the Swedish Red Cross' local branches that people who had been released from detention were seeking support. People were released from the detention center without financial support from either the Swedish Migration Agency or the Social Services and without solutions to address the lack of housing amongst this group fully in place.

In dialogue with the Swedish Migration Agency, Swedish Red Cross received confirmation that about 200 people had been released from the detention center to reduce the number of places and create more space inside the detention center. Due to the travel restrictions, those released could not be deported at the time and remained in the country without essential services.

A volunteer from one of Swedish Red Cross local branches in Stockholm said:

*"We have met many who have been released from detention without anywhere to go. They come out with medications but without a referral to a doctor, or even their own knowledge of those medications. We have examples of several who were released from detention, for instance, a woman in a wheelchair was released, she had nowhere to go and could not fend for herself. Those released are not allowed to keep their LMA... We meet those who want to go home but cannot because the borders are closed. It is an incredibly difficult situation... the authorities send people to us. The Swedish Prison and Probation Service has asked us to house undocumented persons. The social services also send people to us."*

Swedish Red Cross advisors in social rights and refugee reception established a humanitarian dialogue with the Swedish Migration Board and the National Board of Health and Welfare. The dialogue aimed to address the issues observed and to highlight that people released without support faced a situation of limbo, rendering it difficult to follow national guidelines and recommendations to reduce the spread of the virus. Dialogue is ongoing as the need to address barriers to basic services continue to exist.

## Case study 2: Support via cargo bikes – adapting programming in Malmö

A key operation of the local Swedish Red Cross branch in Malmö is providing shelter for people experiencing homelessness, mainly migrants, during the winter. The branch has run a soup kitchen and distributed clothes, food and other material assistance in a local park for several years. This summer, due to the COVID-19 pandemic and restrictions, the branch switched to a "take away" soup kitchen and moved operations to a square outside a church. But, when new restrictions came in autumn 2020, the branch had to halt the business due to large number of people gathering.

Rather than close down the services completely, a volunteer suggested the branch use cargo bikes for outreach. The delivery now takes place each Friday. Volunteers are responsible for preparing the goods and distribute bread, cakes and other food, as well as clothes and hygiene items. Most items are donated from local companies to support Malmö's homeless population.

With many businesses and organizational operations closed due to COVID-19-related restrictions, outreach via cargo bike been well received in the community. Christian, who is also a volunteer at the shelter, says that the outreach activities are also a good way to talk and provide support and information about, for example, where the shelter is located and its opening hours, to the community.



*Rather than closing the temporary accommodation services during COVID-19, a volunteer came up with the idea to convert the shelter's soup kitchen into an outreach project using cargo bikes to safely store and transport food, clothes and hygiene items people in need.*

### Case study 3: Voices from a Swedish Red Cross food-program during COVID-19

*"My husband has lost his job, but through god and Red Cross we are receiving food"*

At the end of March 2020, Sweden introduced restrictions to reduce the spread of infection during the COVID-19 outbreak and people were encouraged to keep a physical distance. Public gatherings were restricted and many social centers were closed. The effects of the measures introduced during the quickly affected people in an already socio-economically vulnerable situation more than the rest of the population.

In a Swedish city, the parish from the Swedish church which operated a centre serving food for families prior to the pandemic had to address increased needs while adapting to the restrictions. They reached out the local Swedish Red Cross branch. Rather than serving food, it was decided to distribute a food bag on a weekly basis, with highly nutritional items which would last longer than cooked food. The food bag would allow greater autonomy for people to cook their own food. The target group was families in vulnerable life situations due to the COVID-19 pandemic who could not cover their basic needs. Many of those accessing the food support were migrants in different situations. When interviewing 200 people accessing food support, 150 answered that their income was affected by the pandemic. They expressed that their economic situation was difficult before the pandemic but now many had lost jobs in the service sector, like restaurants or hotels. Over 100 were living in unstable housing conditions without contract, crowded with many people in one apartment or moving around between different places. A woman, undocumented explained her situation due to COVID-19:

*"The financial aspect is very low; the jobs have vanished. For instance, now, I am not working. Before I worked with cleaning jobs, receptions. It's so difficult, things are shutting down, for now it's really tough. We try to bring down our demands, making cuts in our finances, look for support such as the Redcross which offer food every week or two weeks. ... The support we have been missing has been support with housing, paying the rent and bills, and clothes provided. "*

### Case study 4: Impacts of COVID-19 on the future of a young migrant with temporary residency in Sweden

*"It's worse to be deported to Afghanistan than to get Corona ... I have never thought about it, I have not had time to think about myself and not to be infected or so.... I'm just thinking about getting a job to get a permanent residence permit."*

For unaccompanied minors covered by the new high school law, the COVID-19 pandemic has had consequences that affect their chances of obtaining a permanent residence permit. Interviews have been conducted with several young migrants who participate in Swedish Red Cross local branches' activities around the country, A.B. is one of them. He came to Sweden in September 2015. He started school in 2016 and attended an international high school program in plumbing and real estate services. A.B. became undocumented and homeless in 2018. He then got in touch with the local Swedish Red Cross branch who arranged housing for him and helped him to access food and livelihoods. When the new high school law entered into force, he could apply for a temporary residence permit. He graduated in June 2020, but in order to remain in Sweden he must obtain a full-time employment. Once accessing a stable job, he may apply for a permanent residence permit, otherwise he will receive a deportation decision again. A.B. describes how the pandemic has affected him:

*"Corona has had a huge impact. If I get a deportation decision, it's because of Corona. After I graduated, I did not get the job I was supposed to, what I have studied for. But I had to take a job. But they wanted to take advantage of me. I had to work with moving and cleaning. I worked from 8 to 22. They said I would work like that. That I could get a permanent job but that I would work 12 hours and only get paid 12 000 a month. Then I got another job in the restaurant business, but due to the restrictions they had to close. Now I have a part-time job at another restaurant. But they say every day that it is not certain that I will be able to continue working."*

## Case Study 5: Reflections from asylum seekers in an accommodation center in Sweden

Asylum seekers who arrive in Sweden with no options for private accommodation, nor the support of friends or relatives, are offered temporary accommodation, primarily in large accommodation centers, whilst awaiting the investigation of their asylum claim. When the pandemic started in March 2020, approximately 15,000 asylum seekers were accommodated in large housing facilities provided by the Swedish Migration Agency. The reflections below are from asylum seekers residing in a housing facility in the south of Sweden managed by the Swedish Migration Agency. Located in a rural area, the accommodation center is a temporary home for 500-600 asylum seekers from over 50 different countries.

Of those interviewed, no one knew for sure whether anyone in the center had been infected with COVID-19. There were accounts of people with cold symptoms, but without any test results confirming it as COVID-19. Several people expressed concerns over the overcrowding and poor sanitary conditions at the accommodation center and the risk it poses of acquiring and spreading COVID-19.

- *“At the accommodation center you cannot say that there is any protection. We have shared toilets, shared kitchen. There are four who sleep in the same room, so you are not so protected there. It is enough that one would be infected, the infection would spread quickly in the center.”*

The uncertainty of being an asylum seeker and prolonged waiting for a decision were described as enhancing stress. When talking about COVID-19 and the added burden it caused, one participant stated:

- *“We have so much else in mind to think about. Corona is not a priority to think about today. You think about what will happen when and if we get a residence permit.”*

Another respondent expressed how she felt depressed during this period and high levels of passivity had increased her mental ill-health. Her way out of her depression had been to engage in daily activities, to *keep myself busy*, as she explained. Many of the meaningful activities run by local NGOs had to close which impacted her.

- *“One of the activities here that has been stopped is the language cafe because of corona... I think because almost all the volunteers are old people. That’s why.”*

Several participants also described how the pandemic had an impact on their possibilities to meet up with friends and how diminished social interactions had a detrimental effect on the well-being of the people living at the centre.

- *“We have some living here, they are depressed, so depressed, and it helps the feeling that you are in between family, in between people that care about you, that are sharing your things. It really helps, but when you want to gather the Corona virus is there. No, you can’t gather.”*

There were other aspects of the restrictions due to the pandemic highlighted, such as the recommendation not to use the public transportation and the fear caused by these restrictions. As the accommodation center was located at a lengthy distance from the nearest city, it was expressed as a factor increasing the feeling of being excluded from the society. Not being able to use public busses contributes to this anxiety. Regarding access to health care services, it was expressed that health care services felt remote and that it would feel more accessible if services were offered more regularly on site.

- *“Maybe it would be the best if there would be a nurse or someone from a medical team that would be around here. Because I don’t know how many people who live here but there are a lot and if someone is here like all the time to give support that would be good”*

One of the participants concluded the whole situation with the uncertainty in being an asylum seeker and the Corona-pandemic:

- *“the only thing that would have mattered was that one had known what tomorrow might have offered and what would happen in the future”.*