



Refugee Council
of Australia

AUSTRALIA'S REFUGEE AND SPECIAL HUMANITARIAN PROGRAM

CURRENT ISSUES AND FUTURE DIRECTIONS (2007-08)

Views from the community sector



February 2007

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Cover photo: A Sudanese refugee shelters from a sandstorm in eastern Chad. UNHCR/H.Caux

1. Introduction

The Refugee Council of Australia (RCOA) welcomes the opportunity to present the following submission to the Minister for Immigration and Citizenship. As in previous years, the submission reflects the issues and concerns of the refugee sector as raised through a national consultation process. Consultation participants included community leaders and representatives from refugee communities, staff from the settlement and asylum sectors and community volunteers who work with refugees. Consultations were conducted in New South Wales, Northern Territory, Queensland, South Australia, Victoria and Western Australia, with 170 organisations participating. Specific discussions were also held with a number of key organisations, including the Office of the United Nations High Commissioner for Refugees (UNHCR), Amnesty International, National Council of Churches and the Federation of Ethnic Communities' Councils of Australia.

Recommendations regarding the size and composition of the Refugee and Special Humanitarian program have been made after close consideration of a number of key sources including UNHCR, Amnesty International, Human Rights Watch, Integrated Regional Information Networks (IRIN) and BBC.

The offshore component of Australia's Refugee and Humanitarian Program remains one of the most positive and well-resourced refugee resettlement programs in the world. By focussing on providing new opportunities for people trapped in protracted refugee situations, Australia continues to make a valuable contribution to global efforts to find durable solutions for refugees. In return, refugees resettled in Australia respond by making a wholehearted contribution to their new country and its future. Refugee resettlement remains an important nation-building exercise for Australia today, just as it was when the post-war resettlement program began in the late 1940s.

As with all positive enterprises, there remains room for improvement. This year's consultation process brought to light many ideas for how the offshore refugee program could be improved. These ideas are offered in a positive spirit, recognising that the resettlement program deserves wider national and international recognition for its many successes.

The onshore component of the Refugee and Humanitarian Program is extremely important and yet often neglected in the consultation process for the annual humanitarian intake. This is problematic as the onshore component is, in fact, the only area where Australia has international legal obligations. It is also important to focus again on asylum policy and the onshore intake, as this is the area which has undermined Australia's international reputation in resettlement and the protection of refugees. It is not possible to justify the inhumane treatment of asylum seekers by referring to Australia's excellent record in offshore resettlement. There needs to be an acknowledgement that refugees have a right to protection and deserve to be treated with dignity and respect regardless of how they arrive in this country and regardless of the program under which they enter.

This year's submission has been structured differently to previous years to better reflect the importance of both the offshore and the onshore program. When looking at overall composition, processing and settlement, issues will be addressed that concern both the offshore and the onshore program. While the predominant focus remains on offshore resettlement as the larger proportion of the program, RCOA felt it important to look at the program as a whole.

This approach seems particularly relevant in a year that has seen a number of initiatives and reviews take place with the potential to improve the wellbeing of many refugees and asylum seekers. RCOA wishes to commend the Australian Government on its commitment to cultural change within the Department of Immigration and Citizenship (DIAC). While the outcomes of these reviews and the implementation of new initiatives have sometimes moved slower than we would have liked, RCOA is very supportive of the ongoing attempts in the Department to improve outcomes for asylum seekers.

Sadly, this good will was somewhat undermined in 2006 by the Government's attempt to pass the Migration Amendment (Designated Unauthorised Arrivals) Bill. This legislation was entirely incompatible with the process of cultural change within the Department, signalling the Government's intention to avoid its international obligations and pursue discriminatory and inhumane policies towards asylum seekers.

This said, the introduction of case managers within the Department and most importantly the trialling of a Community Care Pilot were welcome changes to the way the needs of vulnerable asylum seekers are addressed. RCOA would like to commend the Department and the Government on this positive approach to working with the refugee and community sectors. We look forward to further improvements in the future.

Another important initiative in the past 12 months has been the review of the bridging visa regime. While an outcome is still pending on this review, RCOA would like to thank the Department for its thorough approach taken to consulting with the sector and its openness to the concerns raised. RCOA and its members remain hopeful that the Bridging Visa review will be used as an opportunity to rectify the inequalities for community-based asylum seekers, inequalities which have existed now for 10 years.

The following submission addresses issues arising from the refugee sector about the composition of the program, processing and resettlement processes and settlement support. While RCOA has endeavoured to represent the major issues raised in the consultations, the submission is by no means exhaustive. This year's submission highlights a number of key issues which RCOA believes need to be addressed urgently. We would welcome the opportunity to work closely with the Department and the sector on resolving these issues.

The Refugee Council of Australia would like to thank the Department of Immigration and Citizenship (DIAC), whose financial assistance enabled the preparation of this submission.

2. Priority Issues

With the widespread nature of the consultation process for this submission, it was inevitable that a vast number of issues would be raised. This submission canvasses more than 70 issues and makes 96 recommendations. Our aim in covering so many issues was to outline community sector views on a broad range of issues relating to the refugee and humanitarian intake, offering feedback and ideas on many of the challenges facing immigration policy makers.

However, in doing so, we are conscious of the danger that all of the concerns and ideas will be lost in a long list of recommendations. As a result, we have decided to highlight eight priority issues, for the urgent attention of policy makers. These eight priorities are not listed in priority order, merely the order in which they appear in the submission.

By way of an executive summary, we have drawn the information on those issues out of the body of the report.

Priority 1: Family Reunion (5.2.5)

There was a clear indication from RCOA consultations conducted around Australia that family reunion is the number one priority for refugees and other humanitarian entrants when they arrive in the country. Refugees and humanitarian entrants are currently able to sponsor immediate family members under the “split family” provision of the Special Humanitarian Program (SHP). This provides the family entrants with entitlements which are not currently available through the family stream of visas. RCOA believes that family reunification is extremely important and that entrants should receive an adequate level of support. We also believe that places for family reunion should not be taken out of the humanitarian quota. Instead, places should be made available under the family stream for a specific family reunion visa for humanitarian entrants, conferring the same supports and conditions as the Special Humanitarian Program.

RCOA recommends that a specific family reunion visa for humanitarian entrants be introduced under the family migration stream as an alternative to the existing split family provision of the Special Humanitarian Visa.

Priority 2: Temporary Protection and Humanitarian Visas (5.2.7)

RCOA believes that all refugee entrants who have undergone status determination and have been found to be Convention refugees should be given permanent visas. There is ample evidence that granting of temporary visas (both onshore and offshore) has a negative impact on a refugee’s ability to settle, due to the denial of services, restrictions on family reunion and travel and lack of certainty about the future. RCOA reaffirms its opposition to this policy.

RCOA recommends that all refugees be given permanent visas and full access to settlement services.

Priority 3: Secondary Movement (5.2.9)

RCOA continues to argue that the harsh line the Australian Government takes on asylum seekers who have engaged in secondary movement is unjustified. Many refugees engage in secondary or irregular movement when faced with protracted refugee situations, lack of protection in countries of first asylum and the absence of a foreseeable durable solution in such countries. Most will be unaware of any negative implications of secondary movement and will simply continue to travel to where they believe they will find safety. RCOA, therefore, believes that it is important that the Australian Government reconsider, with a view to resettlement, Convention refugees who have moved outside their region and live in countries which are not signatories of the convention.

Of particular concern are a group of approximately 200 refugees currently in Indonesia who have been there since 2001. These are people who were intercepted attempting to sail to the Australian mainland and turned back to Indonesia. For the past five or six years, they have resided in

Indonesia with few basic rights and have had their basic living expenses paid by the Australian Government. They include survivors of the Siev X tragedy, as well as some who have family and community links to Australia. Their prolonged and indefinite stay in Indonesia has had a significant impact on both their physical and mental health and their situation appears unlikely to be resolved in the near future unless Australia accepts some responsibility for their resettlement.

RCOA recommends

- ***That the Australian Government resolve the situation of the Iraqi and Afghani caseloads in Indonesia by granting resettlement to those referred by UNHCR.***
- ***That Australia consider the resettlement of refugees who have moved from their countries of first asylum and who have strong protection and resettlement needs.***

Priority 4: Migration advice (7.6.2)

Consultations revealed that free migration and application advice and assistance for Special Humanitarian Program (SHP) applications is a shrinking resource, despite the increasing demand for non-fee charging migration agents. The funding available for migration advice through the Settlement Grants Program (SGP) has been reduced and it does not meet the increasing demand. The use of migration agents to lodge SHP applications can be crucial for the success of the application and for ensuring the system is cost effective for DIAC. However, non-fee charging migration agents are very difficult to access and there are very long waiting lists for legal aid to provide free migration advice. Private migration agents may be very costly and unaffordable for many humanitarian entrants, who often will incur huge debts to access this service to be reunited with their family.

The application forms under the SHP are highly complex and difficult to complete adequately by many humanitarian entrants who are unfamiliar with bureaucratic processes. However, humanitarian entrants unable to access non-fee charging migration agents or to pay for a private agent, often attempt to complete the forms themselves resulting in poor quality applications with essential data missing and subsequent high refusal rates. Community leaders report that they are often under pressure to assist with this task which they find very time consuming and sometimes difficult. The lack of free migration advice results in numerous repeat applications, additional work for DIAC and undue stress for the applicants.

RCOA recommends that funding be made available either through the Immigration Advice and Application Assistance Scheme (IAAAS) or a similar program, for non-fee charging migration agents to provide assistance to proposers under the Special Humanitarian Program.

Priority 5: Visa Conditions (7.11.1)

The use of community based detention through residence determinations and the introduction of the community care pilot, has meant that some asylum seekers are given the necessary support and assistance that they need to live with dignity in the community while their protection case is assessed. However, this has highlighted the needs of other asylum seekers who are left with little or no support.

Over the past few years, it has become increasingly difficult to make sense of the different visa conditions and entitlements available to asylum seekers and failed asylum seekers in the community. For example, a failed asylum seeker who is given a Removal Pending Bridging Visa (RPBV) or a former Temporary Protection Visa (TPV) holder who is found to no longer require protection and is given a Return Pending Visa (RPV) are permitted to work and have access to some Centrelink benefits and Medicare. Those asylum seekers released into community detention on a residence determination have some restrictions on their movement and the right to work but have all their needs fully paid for by the government including housing. At the opposite end of the scale, there are community based asylum seekers who are denied the right to work, Medicare and income support and rely entirely on charity while their case is being determined. The end result is that, in some cases, failed asylum seekers are afforded better conditions than asylum seekers who are still going through the determination process, many of whom are later recognised as refugees.

RCOA has indeed welcomed the better conditions and extra support provided by these visa categories. Our position is to seek parity for all asylum seekers in the community. The punitive policy of allocating Bridging Visas with no work rights to asylum seekers who are affected by the 45 day rule or asylum seekers who have requests with the Minister on humanitarian grounds, causes a great deal of suffering. Living in poverty and reliant on charity for extended periods of time can have a major implication for the settlement process of those recognised as refugees. The experience can also impact on the ability of failed asylum seekers to raise the necessary funds to make preparations to leave. This policy puts great strain on community and voluntary organisations which do not have the resources to provide the safety net for these vulnerable people.

In May 2006, the government began a review of bridging visas. Many organisations (including RCOA) gave feedback and ideas. At this stage, the outcomes of this review have not been released and RCOA trusts that the government will use this opportunity to correct the current disparity in conditions for community based asylum seekers. RCOA believes that there is an urgent need for consistency between visa conditions and entitlements.

RCOA recommends that asylum seekers living in the community be given the right to work and access to Medicare for the duration of the refugee determination process including requests under Section 417 of the Migration Act.

Priority 6: Access to health care (8.5.1)

The national consultations for this submission highlighted the difficulties in accessing appropriate health care in some areas of the country, especially rural and regional areas. In some parts of Australia, there are simply not enough general practitioners (GPs) available. There are great disparities between different communities and even different states in levels of access to health services.

Accessing appropriate healthcare is aggravated by the reluctance of some medical practitioners to provide a service to refugees. Many cases were reported of GPs lacking understanding of refugee issues or of how to provide an appropriate service to refugee clients. Challenging issues included:

- GPs not using culturally appropriate practices;
- Refusal to use interpreters in the consultations, creating a risk management issue on the ground; and
- Lack of knowledge of endemic illnesses in Africa and Asia.

In some states it was reported that caseworkers have to make an average of four telephone calls before finding a GP willing to provide a service to refugees. There is documented evidence that some GPs refuse to treat refugees. This is clearly discrimination and is resulting in refugees not receiving the quality of medical services required for their health and wellbeing.

There are also a number of cultural barriers to accessing appropriate health care. Some refugees are not used to appointment systems or are unfamiliar with preventative healthcare. Many refugees refuse to see a GP unless they are ill and often prefer to drop in and wait or to use emergency departments. RCOA believes that the implementation of targeted programs explaining the preventative approach to healthcare in Australia would be beneficial. Preventative health issues should also be included in pre-embarkation and post arrival orientation.

Overall, the difficulties involved in access to GPs results in more pressure on Accident and Emergency (A&E) services because they become the main port of call for medical problems. Staff of A&E services are rarely trained to deal with the specific needs of refugees. Finding bulk billing GPs in rural and regional areas is also a challenge, placing additional obstacles in accessing adequate healthcare for refugees. Limited public transport is also identified as problematic, resulting in a high number of missed appointments. Volunteers and caseworkers are often overburdened assisting entrants to make and keep medical appointments.

RCOA recommends

- ***That adequately funded Refugee Medical Clinics with interpreters on site be established in all states to address the specific needs of refugees and that national***

benchmarks be established for health service provision for newly arrived refugees and humanitarian entrants.

- **That training for GPs and key staff in hospitals (particularly A&E services) on refugee health be made available and that information about training activities be circulated to health service providers.**
- **That DIAC explore the inclusion of “refugee health access and development workers” in the next IHSS tender to improve access to GPs, particularly in areas where transport connections are poor.**

Priority 7: Housing (8.6)

By far the biggest issue raised this year in the consultations (after family reunion) was housing. With only a few regional exceptions, housing stood out as the issue of most concern to service providers, workers and refugees themselves. The move away from “on arrival” accommodation to complete reliance on the private rental market to meet the housing needs of new refugees has resulted in a number of complex issues.

Across Australia housing prices have continued to rise sharply. Rental vacancy rates in most capital cities are now at an all time low – especially at the affordable end of the market, where there is a lack of stock and increasing demand. This has occurred at a time when public housing is decreasing and eligibility has become increasingly restrictive in most states. Many analysts argue that we are currently in the middle of a housing crisis. While many Australians, not just refugees, are feeling the impact of the housing crisis, refugees are particularly vulnerable to market forces for a number of reasons.

When refugees arrive in Australia, it is the responsibility of the IHSS provider to find suitable private rental accommodation. The task of finding accommodation for new arrivals is becoming increasingly difficult in many states and territories, occupying a great proportion of case workers’ time. RCOA is concerned that the pressure to find accommodation is already resulting in refugees being placed in accommodation which is unaffordable and inappropriate. While the approach taken by services providers seems to vary from state to state, there are a number of pressing issues which RCOA believes must be highlighted:

- Refugees having to pay a large percentage of their income on rent from day one of arrival. In some cases, refugees arrive with an existing debt and lack any understanding of the cost of living in Australia. Many lack budgeting skills. Refugees are often not used to paying rent and they are likely to experience financial hardship, as their main priority is to be able to send money back to family members overseas still living in dire situations.
- Refugees being asked to sign six and 12 month tenancy leases within days of arriving in Australia with no real understanding of what they are signing, of the rental accommodation system or of their rights and responsibilities.
- Refugees being placed in inappropriate housing because that is all that is available. This inappropriate housing includes sub-standard houses, housing well away from important local services, accommodation in motels (for up to four months) and caravan parks. Cases were also reported of split families having to live in different properties.
- Lack of support when the initial lease agreement has ended (and the refugee has most likely exited IHSS). Support may be required to access another property or to sustain the current one.
- Difficulties in filling in forms to apply for housing, particularly for illiterate refugees, and their lack of tenancy references when applying for rental accommodation.
- Discrimination in the private rental market by landlords and real estate agents on the grounds of family size, language, race and income status (Centrelink recipients), making it even more difficult for humanitarian entrants to access properties.

- Overcrowding particularly among SHP entrants, due to both affordability issues and lack of suitable housing for large families. This has, in many cases, caused situations of conflict and family breakdown.

The reliance on an unregulated market to meet the needs of potentially vulnerable humanitarian entrants is highly problematic. The private rental market offers very limited protections for tenants. Tenancy laws vary from state to state; however, at this stage no state has legislated minimum standards and there is little effective redress for discrimination by property managers. As refugees are forced to accept more marginal properties, this has an impact on other aspects of their settlement process. Low standard housing is generally less energy efficient than other housing, resulting in higher energy bills. Cheaper housing tends to be further away from the main service infrastructure, resulting in refugees having to travel further to access services. This, in turn, results in increasing dependence on public transport which is often infrequent, less reliable and more costly in more marginal areas. Action is needed immediately to improve the housing outcomes of refugees, as well as preventative measures to reduce their risk of homelessness.

RCOA recommends:

- ***That DIAC in consultation with other state and federal departments develop a comprehensive housing strategy to address the specific needs of humanitarian entrants.***
- ***That funds be made available to cover the rent of new entrants for the first four weeks after arrival while they gain an understanding of budgeting and financial literacy.***
- ***That financial literacy training and basic training in rights and responsibilities under state tenancy laws be made available to all new entrants.***
- ***That IHSS providers “head lease” properties for the first six months so that refugees are not required to sign tenancy agreements until they have an understanding of their rights and responsibilities and so that refugees are not locked into a 12 month lease on a property which may be inappropriate.***
- ***That an education package be developed which addresses the issue of discrimination against refugees in the private rental market.***
- ***That funding be made available for a housing support service for humanitarian entrants in their first five years of settlement, including SHP entrants.***

Priority 8: Education and English language learning for young people (8.7.3)

Young refugees commonly come from very difficult situations in which schooling has been highly disrupted or, in some cases, where there has been no schooling at all. They often have very limited English knowledge and many suffer from torture and trauma experiences. This often leads to frustration, confusion and the risk of dropping out of school. Young refugees and children have high educational needs which require special consideration.

There was a recurrent concern about access to English lessons and support for refugee children and young refugees. Education funding is provided for schools to have English as a Second Language (ESL) services, but standards are clearly inconsistent across the country. Most schools do not have these facilities and access is even more difficult in rural and regional areas.

This results in children and young refugees experiencing a feeling of alienation. In many cases, the only available option for many refugee children is to attend mainstream primary schools where there is no support for either the children or the teachers. Teachers are rarely trained to work with refugee children. In some cases, it has been reported that refugee children are seen as having behavioural problems and, at times, are excluded from class. Little consideration is given to the impact of the refugee experience and the difficulties faced by refugee children in mainstream schools. Even those children lucky enough to attend a language school often experience difficulties with the transition into mainstream schooling.

Another challenging issue is that children are being placed in classes based on their ages. However, some of these children have never attended a school previously. When placed at an academic level above their experience, they are unable to make effective use of the learning experience and suffer frustration and humiliation. RCOA believes that additional support is required in this area.

RCOA recommends

- ***That additional intensive English classes and additional support be provided to refugee children in mainstream schools.***
- ***That more funding and resources be targeted at ensuring a smooth pathway into the schooling system for refugee children and young people.***

The problem of accessibility of English lessons and additional support is far more acute in rural areas. It has been a longstanding concern that young refugees in rural areas are severely disadvantaged compared to their city counterparts in accessing English language tuition. In particular, young refugees between 15 and 25 years are hugely disadvantaged and are often unable to access English tuition at all.

In rural areas, there is often no access to Intensive English Centres. Young refugees under 18 years do not qualify for Adult Migrant Employment Program (AMEP) but the alternative system to provide English classes is mostly inaccessible for young refugees. With few numbers and young refugees arriving at different times, TAFEs are unable to justify the expense of providing classes. Therefore, young refugees often end up in mainstream schooling without understanding and/or support to learn English. Unfortunately, young refugees can't access the 510 hours of English tuition when attending school, but the equivalent English support at school is generally inadequate. Under this system, young refugees regularly leave school to raise money to help their families or migrate to the cities where they can find additional opportunities and access English tuition.

It is RCOA's view that a different support system for young refugees to access English lessons is required for rural and regional areas, where local needs and infrastructure differ greatly from those in urban areas. The system needs to be flexible and adaptable to different needs in order to ensure proper access to education opportunities and English tuition for young refugees.

RCOA recommends that a system which accommodates the needs of young refugees to access English tuition in rural areas be implemented and adequate funding be allocated for this purpose.

3. Recommendations

Australia's Response

RCOA recommends

- 1. That the Australian Government promote awareness of the Responsibility to Protect with relevant staff, and assess its strategies in light of its internationally recognised responsibilities.*
- 2. That the Australian Government increase its contributions to the Human Rights Council, Peacebuilding Commission and Fund and the Democracy Commission and Fund, leaving a larger proportion of funds "unearmarked" to allow for their more effective use in multilateral peace and capacity building initiatives.*
- 3. That the Australian Government increase its core contributions to UNHCR to the 2000-01 level of \$15.5 million¹.*

Composition of the Refugee and Humanitarian Program

RCOA recommends

- 4. That the offshore program be increased to 15,000 in 2007-08.*
- 5. That there be a standing provision of 2000 additional places in the humanitarian program for a Contingency Reserve available in emergency situations and at the request of UNHCR.*
- 6. That the offshore humanitarian program numbers be determined independently of the number of onshore protection visas granted.*
- 7. That 50% of the offshore humanitarian program be allocated to refugee program entrants.*
- 8. That in select situations where UNHCR is unable to conduct refugee status determination, Australia:*
 - consider alternative options including refugee identification and referrals from the International Committee of the Red Cross (ICRC);*
 - consider the contracting of other organisations to conduct refugee determination processing (as in the case of the International Catholic Migration Commission's processing of Liberian refugees).*
- 9. That Australia continue to accept UNHCR group referrals as a supplement to individual identification.*
- 10. That Australia explore ways of resettling internally displaced persons (IDPs), potentially through the greater use of visa subclasses 201 and 203.*
- 11. That a specific family reunion visa for humanitarian entrants be introduced under the family migration stream as an alternative to the existing split family provision of the Special Humanitarian Visa.*
- 12. That at least 15% of the Refugee Program be devoted to Woman at Risk entrants.*
- 13. That all refugees be given permanent visas and full access to settlement services.*
- 14. That discussions be held with the sector with a view to introducing a system of effective complementary protection.*
- 15. That the Australian Government resolve the situation of the Iraqi and Afghani caseloads in Indonesia by granting resettlement to those referred by the UNHCR.*

¹ This figure reflects the contribution in 2000-01 adjusted for inflation

16. That Australia consider the resettlement of refugees who have moved from their countries of first asylum and who have strong protection and resettlement needs.

Total recommended quota for 2007: **15,000 places (7,500 corresponding to the refugee component)**, excluding emergency humanitarian visa grants which may become necessary over the course of the year. Please note that this table refers only to the **refugee** component of the off-shore program.

Region	Major groups, by country origin	Recommended percentage of regional composition	Recommended percentage of total program	Regional proportion of total program
AFRICA	Somali refugees	25%	15%	<u>AFRICA</u> 4,200 – 4,500 individuals. 60%
	DRC refugees	20%	12%	
	Other East African nationalities (Sudanese 18%, Eritrean 12%, Ethiopian 10%.)	40%	24%	
	Others	15%	9%	
SE ASIA	Burmese refugees	75%	16%	<u>SE ASIA</u> 1,470 – 1,575 individuals. 21%
	Bhutanese refugees	15%	3%	
	Others	10%	2%	
CASWANAME	Afghan refugees	40%	6%	<u>CASWANAME</u> 1050 – 1125 individuals. 15%
	Iranian refugees	28%	4%	
	Iraqi refugees	20%	3%	
	Others	12%	2%	
AMERICAS	189 – 203 individuals.			<u>AMERICAS</u> 2.7%
EUROPE	115 – 128 individuals.			<u>EUROPE</u> 1.7%

There is an assumption that the non-family reunion component of the SHP will reflect the percentages in the table above, reaching 15,000 allocated places. However, **RCOA believes that there is additional scope for using the SHP to increase the intake of specific high needs caseloads** where the UNHCR lacks processing capacity. These could include refugees from **Iraq, Darfur, Somalia and the DRC, among others.**

Processing and Resettlement Issues

RCOA recommends

17. That the problem of applicants not including all their immediate family on the visa application form be redressed upon arrival in Australia with the applicant being informed of the importance of that section of their application and given an opportunity to correct any mistakes without prejudice of visa status.

18. That DIAC improve communication with the sector in Australia around processing issues and times at overseas posts.

19. *That communication on the progress of Special Humanitarian Program (SHP) cases continue to come from DIAC Australia even when the case has been referred to an overseas post.*
20. *That all Australian DIAC workers who are involved overseas in offshore processing be trained in appropriate interview techniques and receive access to appropriate support and advice.*
21. *That health waivers be used in cases where families are at risk of being separated or where the entire family is at risk of not being resettled due to the health concerns of one family member.*
22. *That the policy of excluding otherwise eligible applicants on the basis of the estimated financial costs of a medical condition or a disability be abolished.*
23. *That people proposing family members under the split family provision of the SHP be afforded priority application processing.*
24. *That funding be made available either through the Immigration Advice and Application Assistance Scheme (IAAAS) or a similar program, for non-fee charging migration agents to provide assistance to proposers under the Special Humanitarian Program.*
25. *That greater flexibility be exercised on family composition and definition of dependency and this be communicated to both on-shore processing offices and overseas posts.*
26. *That, when assessing family applications, the recommendations from the UNHCR Resettlement Handbook be followed and demonstrated dependency be the governing principle when determining eligibility for inclusion in resettlement cases and the SHP, and therefore:*
 - *culturally adopted children be regarded as family; and*
 - *proposers be able to sponsor family members who are dependent on them.*
27. *That the eligibility criteria to sponsor family under the SHP for former TPV visa holders be based on the situation when the person was first determined to be a refugee and given a TPV and therefore:*
 - *former TPV holders who arrived in Australia as unaccompanied minors and have now reached majority be able to sponsor their parents; and*
 - *former TPV holders be able to sponsor children who have reached majority while they have been in Australia.*
28. *That DNA testing for SHP entrants only be used in exceptional cases, with:*
 - *the costs be covered under the medical assessment; and*
 - *the information resulting from the test be managed in an appropriate manner.*
29. *That all SHP proposals be assessed purely on humanitarian need, with priority given to reuniting split families.*
30. *That a system of detailed feedback for refusals of SHP applications on a case-by-case basis be implemented.*
31. *That family members of humanitarian entrants who meet the requirements under the split family provision of the SHP, but have entered Australia with another visa, be eligible for the same entitlements and subject to the same conditions as those who have entered the country under the split family provision and therefore are not asked for an assurance of support.*
32. *That the full cost of the airfare for humanitarian entrants arriving under the SHP be covered or, alternatively, enhanced access to interest-free financial services for humanitarian entrants be available to assist in meeting travel costs.*
33. *That the eligibility criteria for the Woman at Risk visa be revised so as to not automatically exclude women who have a male family member present.*

34. *That the time limit on allowing Woman at Risk entrants to sponsor a spouse or intended spouse be applied with discretion on a case by case basis, in order to prevent unnecessary distress to genuine applicants and their children.*
35. *That DIAC make greater use of refugees who have already settled in Australia, as part of the Australian Cultural Orientation (AUSCO) program. This could be achieved by featuring resettling refugees in video presentations and employing people with refugee backgrounds to deliver the program. Alternatively, DIAC could bring current instructors to Australia for an exposure visit and induction.*
36. *That AUSCO be made as accessible as possible to all humanitarian entrants and that, when necessary, participants be provided with additional assistance with interpreting, travel costs and childcare and be assisted to travel safely to the course venue.*
37. *That a formal process be established to ensure that the settlement sector is fully informed and consulted about AUSCO's content and implementation.*
38. *That an integrated post arrival program be established to complement AUSCO in addition to the existing IHSS.*
39. *That Australia reverses the policy of excised territories and ensures all asylum seekers who arrive in Australian territory have the right to seek asylum in Australia and be given full access to Australia's refugee determination process.*
40. *That asylum seekers be processed on the mainland where they have full access to legal representation and other support.*
41. *That the policy of non-reviewable mandatory detention be abolished.*
42. *That asylum seekers living in the community be given the right to work and access to Medicare for the duration of the refugee determination process, including requests under Section 417 of the Migration Act.*
43. *That the current eligibility criteria for the Asylum Seeker Assistance Scheme (ASAS) be reviewed in light of newly prescribed faster processing times for primary and review decisions.*
44. *That the Community Care Pilot be continued and expanded into an ongoing program.*
45. *That the Minister's powers under Section 417 of the Migration Act be reviewed, with a view to making the process fairer and more transparent.*
46. *That while the use of temporary visas for Convention refugees continues:*
 - *These refugees be afforded the same rights and entitlements as given to those receiving permanent protection, including rights and entitlements to travel and family reunion.*
 - *In the absence of the use of the UNHCR's cessation clause, all temporary protection visa holders automatically receive permanent protection without having to undergo a second status determination when their temporary visa ends.*

Settlement Issues

RCOA recommends:

47. *That there be consistent service provision under the Integrated Humanitarian Settlement Strategy (IHSS) across states.*
48. *That IHSS providers establish referral protocols with local settlement providers where such protocols currently do not exist.*
49. *That DIAC reconsider the six month timetable for intensive settlement support and that IHSS be funded for 12 months.*

50. *That further consultations be held with the settlement sector about the delivery model of the proposed Complex Case Support Network (CCSN).*
51. *That a process for ongoing quality management, review and evaluation of service provision be established and appropriate benchmarks be developed for the IHSS.*
52. *That IHSS services have the flexibility to provide additional casework support to high needs entrants and that a monitoring system be put in place to ensure they are receiving the services they require.*
53. *That additional resources be channelled into the IHSS to enhance its standards of service provision and casework support.*
54. *That a system be developed to encourage refugees to declare their links in Australia prior to arrival, to ensure that the most appropriate location for initial settlement is chosen.*
55. *That all SHP entrants complete a needs assessment process, linked to the full IHSS service.*
56. *That DIAC develop a national network of volunteer SHP support groups and specialised SHP support agencies as outlined in the model developed in RCOA's submission to the recent Government discussion paper "Measures to improve settlement outcomes for humanitarian entrants", to provide support to SHP proposers and entrants (see Appendix 1).*
57. *That DIAC adopts RCOA's proposed five step model linking SHP proposers, new arrivals and volunteer or specialised agencies under appropriate settlement plans as outlined in RCOA's submission to the Government discussion paper: "Measures to improve settlement outcomes for humanitarian entrants".*
58. *That settlement support through the IHSS and Settlement Grants Program (SGP) be tailored to the specific needs of Woman at Risk entrants.*
59. *That all former TPV holders be eligible for settlement services including the Adult Migrant English Program (AMEP) and that funding be provided to establish projects and services that specifically address the settlement needs of former TPV holders and their families.*
60. *That families of former TPV holders entering Australia under the "split family" provision of the SHP be eligible for the full range of IHSS support.*
61. *That information about the services and supports now available to former TPV holders be distributed to them, as well as to the organisations and groups which had previously provided support.*
62. *That adequately funded Refugee Medical Clinics with interpreters on site be established in all states to address the specific needs of refugees and that national benchmarks be established for health service provision for newly arrived refugees and humanitarian entrants.*
63. *That training for GPs and key staff in hospitals (particularly A&E services) on refugee health be made available and that information about training activities be circulated to health service providers.*
64. *That DIAC explore the inclusion of "refugee health access and development workers" in the next IHSS tender to improve access to GPs, particularly in areas where transport connections are poor.*
65. *That the Comprehensive Health Assessment include full immunisation for children.*
66. *That refugees be able to access the Comprehensive Health Assessment within the first month of arrival.*
67. *That targeted programs addressing dental health needs of refugees be implemented and a dental assessment be part of the Comprehensive Health Assessment.*

- 68. That the Comprehensive Health Assessment include information on sexual and reproductive health issues.**
- 69. That additional funding be made available to extend counselling services beyond six months when needed and that interpreters be available for this service free of charge.**
- 70. That DIAC, in consultation with state agencies and other federal departments, develop a comprehensive housing strategy to address the specific needs of refugee and humanitarian entrants.**
- 71. That funds be made available to cover the rent of new entrants for the first four weeks after arrival, while they gain an understanding of budgeting and financial literacy.**
- 72. That financial literacy training and basic training in rights and responsibilities under state tenancy laws be made available to all new entrants.**
- 73. That IHSS providers “head lease” properties for the first six months so that refugees are not required to sign tenancy agreements until they have an understanding of their rights and responsibilities and so that refugees are not locked into a 12 month lease on a property which may be inappropriate.**
- 74. That an education package be developed which addresses the issue of discrimination against refugees in the private rental market.**
- 75. That funding be made available for a housing support service for refugee and humanitarian entrants in their first five years of settlement.**
- 76. That a full review of the way English classes are operating be conducted, examining the adequacy of the system for all refugees and the differentiated needs of some refugees.**
- 77. That additional funding be allocated for the implementation of vocational English lessons through AMEP and that this initiative be developed in close consultation with the sector.**
- 78. That DIAC and AMEP providers work together to develop a strategy for improving access to English classes for refugees with pre-school children, through, for example, additional child care subsidies, expanding crèche facilities at language colleges and enhanced multimedia education for home-based learning.**
- 79. That a more flexible approach to English training be developed in rural areas and additional options be provided for refugees.**
- 80. That additional intensive English classes and additional support be provided to refugee children in mainstream schools.**
- 81. That more funding and resources be targeted at ensuring a smooth pathway into the schooling system for refugee children and young people.**
- 82. That a system which accommodates the needs of young refugees to access English tuition in rural areas be implemented and adequate funding be allocated for this purpose.**
- 83. That Centrelink commit additional resources to provide higher levels of support for refugee clients, including expanding the provision of application assistance.**
- 84. That research be conducted into the existing delivery models for supporting refugees into employment, with the intention of developing a flexible model which can be implemented nationally.**
- 85. That DIAC explore ways of responding to the needs of refugees who have moved to rural areas to seek work.**
- 86. That refugees be exempt from work obligations for the first six months after arrival.**

- 87. That Job Capacity Assessors be alerted to the special needs of refugees, to enable them to tailor services accordingly.**
- 88. That Job Capacity Assessors receive cultural training with a specific focus on the experiences of refugees.**
- 89. That DIAC and/or the Department of Family and Community Services and Indigenous Affairs (FACSIA) increase funding for projects which address the support needs of families, with a particular focus on addressing the disempowerment of refugee men.**
- 90. That information about the Australian legal system and the role of police and government authorities be included in on-arrival orientation.**
- 91. That information about the difficulties that families may face and where to seek help be included as part of AUSCO and on-arrival orientation.**
- 92. That the Australian Government develop public education programs focussed on promoting positive images of refugees and on helping the Australian public understand the role of the offshore humanitarian program and the backgrounds of the refugees who have come to Australia.**
- 93. That increased resources be directed at community capacity building activities within refugee communities.**
- 94. That more preparation be made to ensure that new arrivals have access to appropriate interpreter services.**
- 95. That further research be completed on alternative transport systems for refugees in rural areas and best practice models be identified and implemented in areas of greatest need.**
- 96. That DIAC ensures that settlement and other services in rural and regional areas have key information about new arrivals well in advance, so that preparations can be made to ensure that the specific needs of entrants are able to be met.**

4. Australia's Response

4.1 Multilateral Initiatives

4.1.1 Civil Society

In 2006, the progressive work of the Australian Government and Australian civil society in refugee related areas was commended at many of the annual intergovernmental meetings in which Australia participates. These important meetings included the Executive Committee Meeting of the UNHCR (ExCom), the UNHCR Standing Committee meetings, the Annual Tripartite Consultation on Resettlement (ATC) and the Human Rights Council.

At ExCom, increased dialogue between the government and civil sectors was noted as a major contributing factor in the effectiveness of Australian-led initiatives in recent years. The Conclusion on Women and Girls at Risk, in particular, was an initiative spearheaded by the Australian NGO delegation and supported by DIAC. The collaborative NGO-Government participation that brought it to fruition was ground breaking. RCOA would like to emphasise the tremendous potential that regular consultations generate for effective Australian participation at these meetings.

RCOA commends the increasing participation of other government agencies at the bi-annual DIAC-NGO Dialogue, in particular Australian Agency for International Development (AusAID), the Department of Foreign Affairs and Trade (DFAT), the Department of Family and Community Services and Indigenous Affairs (FACSIA) and the Office of the Status of Women. Opportunities to expand dialogue and collaboration between these stakeholders, and to include additional representatives of the NGO community, are valuable and should be further strengthened in 2007-08. RCOA looks forward to strengthening further these highly effective sector relationships and collaborations in 2007-08.

4.1.2 The Responsibility to Protect: New International Law

In April 2006, the Security Council affirmed sections 138 and 139 of the Outcome of the 60th UN General Assembly World Summit, establishing a new international norm: "The Responsibility to Protect" (R2P). This concept organises the diverse range of humanitarian responses into three key international responsibilities: To *prevent*, *react* and *rebuild* communities facing genocide, war crimes, and crimes against humanity.

Australia already plays a key role in many initiatives that aim to address root causes of refugee flight (prevention), to provide protection (reaction) and to work towards durable solutions (rebuilding), including Convention Plus and the Comprehensive Plan of Action for Somalia. In this spirit,

RCOA recommends that the Australian Government promote awareness of the Responsibility to Protect with relevant staff, and assess its strategies in light of its internationally recognised responsibilities.

4.1.3 The Cluster Approach: Protection of IDPs

In the past few years, major international humanitarian and IGO agencies have been reorganised into issue-specific "clusters" in order to minimise operational costs and to maximise effectively coordinated global responses. Under this new Cluster Approach, UNHCR has become the key agency responsible for protection, camp management and shelter. This means that, in addition to the protection of the world's 8.4 million refugees, UNHCR now has new responsibilities for 6.6 million internally displaced persons (IDPs) and 2.4 million stateless persons worldwide.²

² <http://www.unhcr.org/basics/BASICS/3b028097c.html>

To this end, RCOA commends the 2006-07 Federal Budget Aid increase to 0.30% of GNI³, of which \$15 million has been committed to the International Refugee Fund to target peoples displaced by conflict⁴, but strongly encourages the Australian Government to continue steps towards reaching the Millennium Development Goal of 0.7% of GDP in aid by 2015. RCOA encourages the Australian Government to mobilise these funds through, or in collaboration with, existing UNHCR initiatives.

RCOA also believes that the Australian Government should use 2007-08 to assess its ability to comprehensively engage with IDPs in the new humanitarian arena of “clusters” (see section 5.2.4).

4.1.4 Peacebuilding

The recently established Human Rights Council, Peacebuilding Commission and Fund and Democracy Commission and Fund will most likely play leading roles in this new humanitarian arena, as they address and mobilise funds towards the key prevention, reaction and rebuilding principles of R2P.

RCOA recommends that the Australian Government increase its contributions to the Human Rights Council, Peacebuilding Commission and Fund and the Democracy Commission and Fund, leaving a larger proportion of funds “unearmarked” to allow for their more effective use in multilateral peace and capacity building initiatives.

4.1.5 UNHCR Core Contributions

It continues to be of great concern to RCOA that Australia’s core contribution to UNHCR has decreased by nearly 50% in the last 6 years, from \$14.3 million in 2000-01, to \$7.3 million today. Given the chronic under-funding of UNHCR and the extreme detriment this causes refugees and displaced persons worldwide, RCOA urges the Australian Government to return its core contribution to the 2000-01 level.

RCOA recommends that the Australian Government increase its core contributions to UNHCR to the 2000-01 level of \$15.5 million⁵.

³ Millennium Development Goal 8 Review, Australia 2006.

⁴ Australia’s Overseas Aid Program, 2006-07, Statement by the Honourable Alexander Downer MP, Minister for Foreign Affairs, 9 May 2006.

⁵ This figure reflects the contribution in 2000-01 adjusted for inflation.

5. Composition of the Refugee and Humanitarian Program

5.1 Overall Size of Program

Since the 2003-04 fiscal year, the number of refugee and humanitarian visas granted has been greater than the number of visas allocated, meaning that places have had to be brought forward from subsequent program years [DIAC Annual Report 05-06]. To rectify this recurring problem, RCOA advocates that the size of the Refugee and Humanitarian program should increase as a proportion of the overall migration program, to reflect more accurately the demand for resettlement places and in recognition of Australia's capacity to assist. There should also be provision for a contingency reserve of places that remain independent of the main quota, for use in emergency situations at the request of UNHCR or when the Government deems appropriate.

The numerical linking of the offshore and onshore humanitarian programs continues to be of concern to RCOA. While both programs address the needs of refugees, they must remain distinct. The onshore program exists to meet Australia's international obligations as a signatory to the 1951 Convention relating to the Status of Refugees and its 1967 Protocol. The offshore program is a voluntary contribution to assist UNHCR to find durable solutions for refugee crises around the world and plays a significant role in international burden sharing.

As the onshore program is a legal obligation, RCOA strongly believes that it should be addressed separately in much the same way as the Government views compliance costs associated with other treaties. RCOA believes that the offshore program should be regarded as aid and its allocation should not be affected by the number of protection visas granted onshore.

RCOA recommends

- ***That the offshore program be increased to 15,000 in 2007-08.***
- ***That there be a standing provision of 2000 additional places in the humanitarian program for a Contingency Reserve available in emergency situations and at the request of UNHCR.***
- ***That the offshore humanitarian program numbers be determined independently of the number of onshore protection visas granted.***

5.2 Sectoral Composition

5.2.1 Refugee Component of the Program

It is RCOA's view that the Refugee category, which includes the Refugee, In-country Special Humanitarian, Emergency Rescue and Woman at Risk sub-categories, is central to our humanitarian response, forming as it does a way of protecting highly vulnerable refugees and assisting UNHCR to fulfil its mandate. The numbers allocated to the refugee component of the humanitarian program must therefore be a clear demonstration of its primacy within the program.

RCOA recommends that 50% of the offshore humanitarian program be allocated to refugee program entrants.

5.2.2 Refugee Identification

As mentioned above, UNHCR is the primary organisation in the international Protection Cluster; however, there are a few notable situations in which UNHCR has been unable to establish effective refugee status determination processes. Unfortunately, UNHCR does not always have the capacity to process and refer the number of cases that resettlement countries have been prepared to take. Where this is the case, RCOA believes it is necessary to rely on other mechanisms for identification and processing of refugees for resettlement.

RCOA is concerned that alternatives for identification should comply with the following minimum conditions:

- that arrangements be undertaken only where UNHCR has conceded that it lacks capacity to prepare cases;
- that the UNHCR selection criteria be used, as set out in its Resettlement Handbook;
- that fully qualified staff be employed;
- that there is a specific and finite caseload; and
- that all cases have a clearly identified resettlement need.

Other ways to support the identification process include developing strategic links with other resettlement countries and the establishment of referral protocols between NGOs working with refugees and the overseas posts, so that cases of concern can be referred directly to posts.

RCOA recommends that, in select situations where UNHCR is unable to conduct refugee status determination, Australia:

- ***consider alternative options including refugee identification and referrals from the International Committee of the Red Cross (ICRC);***
- ***consider the contracting of other organisations to conduct refugee determination processing (as in the case of the International Catholic Migration Commission's processing of Liberian refugees).***

5.2.3 Group Resettlement

While RCOA maintains that individual resettlement must remain a priority, it acknowledges that there is a role for group resettlement in addressing protracted refugee situations. Group resettlement also offers practical advantages in processing and settlement. Settlement providers have reported that, when refugees arrive in a group, they are able to provide each other with support in navigating the complex settlement process.

RCOA recommends that Australia continue to accept UNHCR group referrals as a supplement to individual identification.

5.2.4 Internally Displaced Persons (IDPs)

In recognition of the UNHCR's growing focus on IDPs, RCOA recommends that the Australian Government explore ways of resettling IDPs through the Refugee and Humanitarian Program. We acknowledge that, in many cases, there are significant hurdles in processing IDPs on the ground and that some IDPs might also be unable to leave their country of origin. However, there are some examples where processing and leaving is possible, including Ahmadis in Pakistan and Bangladesh or the Mandaeans in Iran and Iraq.

The two visas that currently offer possibilities in this area are the In-Country Special Humanitarian Visa (subclass 201) and the Emergency Rescue Visa (subclass 203).

RCOA believes that the use of Visa Subclass 201 and 203 could be expanded to target IDPs with urgent and dire protection needs who do not qualify under other visa categories due to their IDP or stateless status. RCOA envisions that this expansion may mirror the development of Visa Subclass 204 – Woman at Risk, to eventually represent a sizable portion of the annual humanitarian visa grants. This expanded intake should be made in addition to, not subtracted from, existing visa quotas.

Addressing IDP situations requires some commitment from the Australian Government, including a policy decision allowing greater use to be made of visas 201 and 203. It also requires that DIAC officers overseas and in Australia, be made aware of how the in-country visas can be used in a more targeted way.

RCOA recommends that Australia explore ways of resettling IDPs, potentially through the greater use of visa subclasses 201 and 203.

5.2.5 Family Reunion

There was a clear indication from RCOA consultations conducted around Australia that family reunion is the number one priority for refugees and other humanitarian entrants when they arrive in the country. Refugees and humanitarian entrants are currently able to sponsor immediate family members under the “split family” provision of the Special Humanitarian Program (SHP). This provides the family entrants with entitlements which are not currently available through the family stream of visas. RCOA believes that family reunification is extremely important and that entrants should receive an adequate level of support. We also believe that places for family reunion should not be taken out of the humanitarian quota. Instead, places should be made available under the family stream for a specific family reunion visa for humanitarian entrants, conferring the same supports and conditions as the Special Humanitarian Program.

RCOA recommends that a specific family reunion visa for humanitarian entrants be introduced under the family migration stream as an alternative to the existing split family provision of the Special Humanitarian Visa.

5.2.6 Woman at Risk Quota

RCOA would like to acknowledge DIAC’s efforts in terms of allocation of Woman at Risk visas during the past year. This is an area where Australia has been a world pioneer.

Women and their dependent children experience additional vulnerabilities as refugees because of their gender and age, and this often increases when they are not accompanied by a spouse, father or adult male family member. For some time now, the annual target for Woman at Risk visas has been set at 10.5% of the total Refugee intake. This target has generally been exceeded, a fact of which DIAC can justifiably be proud. In the 2005-06 financial year, 16.5% of the Refugee program went towards the Woman at Risk Program. It would be timely to increase the annual target to reflect more accurately the humanitarian program’s objective of targeting the most vulnerable refugees.

RCOA recommends that at least 15% of the Refugee Program be allocated to Woman at Risk entrants.

5.2.7 Temporary Protection and Humanitarian Visas

RCOA believes that all refugee entrants who have undergone status determination and have been found to be Convention refugees should be given permanent visas. There is ample evidence that granting of temporary visas (both onshore and offshore) has a negative impact on a refugee’s ability to settle, due to the denial of services, restrictions on family reunion and travel and lack of certainty about the future. RCOA reaffirms its opposition to this policy.

RCOA recommends that all refugees be given permanent visas and full access to settlement services.

5.2.8 Complementary Protection

For many years, RCOA has been advocating for the government to introduce a system of complementary protection. While the Migration Act, under Section 417, provides an opportunity for failed asylum seekers to request Ministerial intervention on humanitarian grounds, this system does not provide the necessary safeguards to ensure that people with genuine protection needs are not sent back to danger. Under the current system, people with pressing claims for protection which fall outside the Refugee Convention have to fail Australia’s current refugee status determination processes before a request can be made to the Minister. A system of complementary protection would enable such claims to be dealt with more quickly and equitably, allowing prompt assessment of claims under other international instruments. This would benefit applicants and do much to ease the pressure on the system of Ministerial intervention.

RCOA recommends that discussions be held with the sector with a view to introducing a system of effective complementary protection.

5.2.9 Secondary Movement

RCOA continues to argue that the harsh line the Australian Government takes on asylum seekers who have engaged in secondary movement is unjustified. Many refugees engage in secondary or irregular movement when faced with protracted refugee situations, lack of protection in countries of first asylum and the absence of a foreseeable durable solution in such countries. Most will be unaware of any negative implications of secondary movement and will simply continue to travel to where they believe they will find safety. RCOA, therefore, believes that it is important that the Australian Government reconsider, with a view to resettlement, Convention refugees who have moved outside their region and live in countries which are not signatories of the convention.

Of particular concern are a group of approximately 200 refugees currently in Indonesia who have been there since 2001. These are people who were intercepted attempting to sail to the Australian mainland and turned back to Indonesia. For the past five or six years, they have resided in Indonesia with few basic rights and have had their basic living expenses paid by the Australian Government. They include survivors of the Siev X tragedy, as well as some who have family and community links to Australia. Their prolonged and indefinite stay in Indonesia has had a significant impact on both their physical and mental health and their situation appears unlikely to be resolved in the near future unless Australia accepts some responsibility for their resettlement.

RCOA recommends

- ***That the Australian Government resolve the situation of the Iraqi and Afghani caseloads in Indonesia by granting resettlement to those referred by UNHCR.***
- ***That Australia consider the resettlement of refugees who have moved from their countries of first asylum and who have strong protection and resettlement needs.***

5.3 Regional Composition

The recommendations on the regional composition of the Refugee and Humanitarian Program are based on careful consideration of developments around the world in the last 12 months that have affected or have potential to affect:

- the number of refugees in any given region;
- the effectiveness of the protection available to refugees in the source region; and
- the prospects for repatriation.

The details of this analysis are presented in the County Profiles on the following pages where focus has been given to potential resettlement needs in the coming year. Below is a summary of the breakdown by regional area.

5.3.1 Asia

In 2007, the largest projected resettlement need from a single nationality is for Burmese refugees, most residing in camps in Malaysia and Thailand. At 8,020 individuals in need of resettlement in 2007, they comprise almost 78% of the Asian total, and 15% worldwide. This does not include a potential group resettlement of over 12,000 Burmese individuals and 9,900 Bhutanese.

5.3.2 Africa

Refugees from African nations collectively represent over 50% of the worldwide resettlement need identified by UNHCR in 2007. It should be noted, however, that limited UNHCR capacity in some African regions, as well as the difficulty of including refugees of mixed-nationality in statistical data, means that this percentage is likely closer to 60%. The largest projected need in Africa is for 7,014 Somali refugees – an increase of almost 4,000 since 2006, followed by 5,143 individuals from the Democratic Republic of Congo (DRC). Significant needs also exist among Burundian, Republic of Congo (ROC), Eritrean, Ethiopian and Somali refugee populations, most increasing by over one third, and some more than doubling since 2006.

Decreases to projected resettlement needs in 2007 include populations in DRC, Liberia, Sudan and Togo. Though a great deal of hope has been placed in a repatriation program for Liberian refugees, as well as the peace deal signed in South Sudan, resettlement needs in this region remain dire, especially in DRC and Darfur in West Sudan. Decreased or otherwise small resettlement numbers should not necessarily be considered a reflection of existing need. Often, it is more accurately a reflection of the limited operational capacity of UNHCR in the region.

5.3.3 CASWANAME (Central Asia, South West Africa, North Africa and the Middle East)

The third largest group in need of resettlement is from the CASWANAME region, including 3,040 Afghans, 2,150 Iranians and 1,575 Iraqis. UNHCR projected needs for all groups have reduced, especially the projection for Iraqi refugees, which has more than halved.

Resettlement is also needed for 370 Uzbek refugees as an urgent protection tool: 235 from Kyrgyzstan, 100 from Kazakhstan and 40 from Ukraine, who may even be in need of emergency resettlement.

5.3.4 South America

The increasing complexity and severity of the situation in Colombia, and the importance of providing options to those who would consider secondary movement, warrants consideration of an Australian resettlement response.

5.3.5 Other needs requiring attention

RCOA would also like to draw the Australian Government's attention to a number of issues that arose in the process of researching this section. In planning for the 2007-08 Refugee and Humanitarian Intake, RCOA requests the government consider the following:

- The needs of internally displaced persons (IDPs) and the potential for these persons to be included in the intake. Specific IDP populations have been discussed in the country profiles of Sudan, Somalia and Colombia.
- The use of secondary refugee agencies for identification where UNHCR has limited operational capacity, as in the cases of Darfuri refugees in Chad and Egypt, Togolese refugees in Benin or Afghani refugees in former Soviet states.
- The protection needs of ethnic Oromo, in light of recent safety concerns for Oromo refugees in Somalia and the deterioration of their situation in Ethiopia with reference to the Australian Government's decision not to include Oromo refugees in the program.
- That while some southern Sudanese are able to repatriate, refugees from Darfur are still in need of protection. Processing difficulties in Chad and the suspension of refugee status determination for Sudanese in Cairo have meant that alternative ways of increasing resettlement options for Darfuri refugees need to be explored. These could include:
 - Using secondary refugee agencies for identification;
 - Using visa subclass 201 to resettle IDPs from the Darfur region; and
 - Increasing the number of SHP places for refugees from Darfur.
- The need for increased intake quotas for Iranians in Turkey, by non-European resettlement countries.
- The opportunity to fill the Middle East quota through accepting group resettlement recommendations from UNHCR for the Iraqi caseload and increasing the use of the SHP to assist Iraqi refugees.
- In light of the deteriorating situation in Iraq there is a need to increase the Iraqi intake. Accepting group resettlement recommendations from UNHCR for the Iraqi caseload and increasing the use of the SHP program to assist Iraqi refugees.

5.4 Recommended regional composition for 2007

In addition to UNHCR's projected global resettlement needs, RCOA's recommended regional composition for 2007 reflects the needs of African refugee populations which are under-represented in UNHCR projections due to compromised operational capacity in volatile conflict zones; notably in Burundi, DRC, ROC, Eritrea, Ethiopia, Somali, Togo (overseen by UNHCR in Benin) and Darfur in West Sudan.

Total recommended quota for 2007: **15,000 places (7,500 corresponding to the refugee component)**, excluding emergency humanitarian visa grants which may become necessary over the course of the year. Please note that this table refers only to the **refugee** component of the off-shore program.

Region	Major groups, by country origin	Recommended percentage of regional composition	Recommended percentage of total program	Regional proportion of total program
AFRICA	Somali refugees	25%	15%	<u>AFRICA</u> 4,200 – 4,500 individuals. 60%
	DRC refugees	20%	12%	
	Other East African nationalities (Sudanese 18%, Eritrean 12%, Ethiopian 10%.)	40%	24%	
	Others	15%	9%	
SE ASIA	Burmese refugees	75%	16%	<u>SE ASIA</u> 1,470 – 1,575 individuals. 21%
	Bhutanese refugees	15%	3%	
	Others	10%	2%	
CASWANAME	Afghan refugees	40%	6%	<u>CASWANAME</u> 1050 – 1125 individuals. 15%
	Iranian refugees	28%	4%	
	Iraqi refugees	20%	3%	
	Others	12%	2%	
AMERICAS	189 – 203 individuals.			<u>AMERICAS</u> 2.7%
EUROPE	115 – 128 individuals.			<u>EUROPE</u> 1.7%

There is an assumption that the non-family reunion component of the SHP will reflect the percentages in the table above, reaching 15,000 allocated places. However, **RCOA believes that there is additional scope for using the SHP to increase the intake of specific high needs caseloads** where the UNHCR lacks processing capacity. These could include refugees from **Iraq, Darfur, Somalia and the DRC, among others.**

6. Country Profiles

The country profiles below are not intended as an exhaustive analysis of all refugee situations around the world. They have been prepared based on previous intake numbers, UNHCR predictions and realistic expectations of resettlement intakes. Therefore, the exclusion of some refugee caseloads – for example, Lebanese refugees, Palestinians and Stateless persons and North Koreans in China – should not be interpreted as downplaying the seriousness of their respective situations or their grave need for international assistance. Other important discussions relating to aid, development assistance and political conditions are noted elsewhere in this submission.

Country information has been included only where there have been significant developments or changes impacting refugee populations and resettlement needs in 2006.

6.1 Africa

6.1.1 Burundi

During the first year of Burundi's newly elected government, a power-sharing arrangement between Tutsis and Hutus, there were continued reports of human rights violations and unrest. Despite a ceasefire agreement signed in September 2006 between the government and Forces of National Liberation (FNL), Burundi's National Intelligence Service has been accused of the extrajudicial execution of at least 38 members of FNL and the torture and arbitrary detention of around 200 others⁶. There have been no improvements in the human rights situation since the previous government and abuses by the intelligence services have increased.⁷

Resettlement Needs

There are nearly 200,000 Burundian refugees in Tanzania, 20,000 in DRC and populations in Malawi, Rwanda, South Africa, Zambia and Zimbabwe. UNHCR expected to repatriate 150,000 Burundi refugees from Tanzania and DRC by December 2006. Since 2002, UNHCR estimates 319,000 returnees have been repatriated; however, serious disagreements between existing occupiers of land and returnees have since arisen.⁸

From the Tanzania population, 1400 individuals have been identified for resettlement, though UNHCR has capacity to process only 440. In addition, resettlement for 13,000 Burundian refugees from the group known as the 1972 Burundians, who have suffered multiple displacements with no prospects for local integration and have few remaining ties with Burundi, will begin in 2007.

Burundian refugees requiring urgent resettlement include:

- those who have fled to neighbouring countries due to persecution from the National Intelligence Service;
- women at risk; and
- those who fled to Tanzania in 1972 and have severed ties with their homeland.

6.1.2 Democratic Republic of Congo (DRC)

In the second half of 2006, the first free and fair elections in 46 years were held in DRC. It is hoped that the formation of government, which is occurring in the early months of 2007, will bring stability and encourage many refugee populations to repatriate voluntarily. However, individuals at particular risk, including members of previous DRC administrations, human rights activists, women

⁶ HRW, October 2006, p1, We flee when we see them: Abuses with impunity at the National Intelligence Service in Burundi, <http://www.hrw.org/reports/2006/burundi1006/index.htm2>

⁷ IRIN News, 27 November 2006, Burundi: Government under pressure to curb continued rights violations, http://www.irinnews.org/report.asp?ReportID=56518&SelectRegion=Great_Lakes&SelectCountry=BURUNDI3

⁸ IRIN News, 23 November 2006, Burundi: Huge Challenges in Solving Land Crisis, http://www.irinnews.org/report.asp?ReportID=56484&SelectRegion=Great_Lakes&SelectCountry=BURUNDI

at risk, unaccompanied minors, victims of rape or torture and those with medical conditions, as well as ethnic minorities now in Zambia and Zimbabwe, will be unable to return. Where integration is not possible, resettlement is sought as both a protection tool and durable solution.

Resettlement Needs

UNHCR has identified over 6,500 DRC nationals in urgent need of resettlement from refugee populations located predominately, but not exclusively, in Burundi, Republic of Congo, Rwanda, Tanzania, Uganda, Zambia and Zimbabwe.

Burundi: There are as many as 20,000 Congolese refugees in Burundi, of which over 50% are in urban locations. UNHCR has identified 475 individuals in urgent need of resettlement as a protection tool; however, expected processing capacity for 2007 is only 125.

Republic of Congo (ROC): There are over 60,000 DRC refugees in ROC, a protracted refugee situation in which most have been living for over five years, and some as many as 30. In addition to the heightened protection needs of vulnerable groups like women at risk, resettlement priorities for DRC refugees living in ROC should be considered on medical and family reunion grounds. 400 cases have been identified for urgent resettlement.

Rwanda: About 500 urban refugees and 1000 camp-based refugees will require resettlement in 2007, based mainly on medical needs, women at risk and legal or physical protection criteria.

Tanzania: There are over 140,000 DRC refugees in Tanzania. Local integration is not an option, and movement and rights are significantly limited in camp settings. In 2005 a tripartite repatriation agreement was signed by Tanzania, DRC and UNHCR, and it is anticipated that the total number of returnees under this agreement will reach 50,000 by the end of 2006. UNHCR has identified 1,400 highly vulnerable persons who are unable to repatriate, but has the capacity to submit only 960 for resettlement.

Uganda: Uganda hosts 20,213 refugees from the DRC, who are granted prima facie refugee status on arrival. UNHCR anticipates identifying approximately 150 persons from this population – which includes intellectuals, human rights activists, pacifists, teachers, and other professionals who have spoken out against the use of violence by various rebel factions – for resettlement on protection grounds. In addition, UNHCR will submit up to 750 persons from refugee settlements who have special needs or are in need of resettlement as a durable solution.

Zambia: 59,616 DRC refugees reside in Zambia. Integration is not an option, and the instability in Katanga province, from which most refugees originate, prevents efforts towards repatriation. Resettlement is primarily sought as a protection tool for vulnerable groups; however, UNHCR is currently investigating its use as a durable solution. UNHCR intends to submit 1,200 refugees for resettlement in 2007, which include a large number of ethnically Kasai refugees who are subject to persecution and harassment in Zambia.

Zimbabwe: There are 6,536 DRC refugees in Zimbabwe, of which 80% are urban based. Like DRC refugees in Zambia, most originate from ethnic regional areas in DRC that remain unstable, rendering repatriation unviable. 200 people have been suggested for resettlement as tool of protection for vulnerable groups.

Congolese refugees requiring urgent resettlement include:

- women at risk;
- unaccompanied minors;
- victims of rape or torture;
- those with medical conditions; and
- ethnic minorities with no opportunities for repatriation or local integration.

6.1.3 Eritrea

Border disputes with Ethiopia and a disastrous human rights record plagued the Eritrean Government in 2006. The Algiers peace agreement, ending the two-year war with Ethiopia in December 2000, continues to be flouted by both sides, further straining relations between the

countries.⁹ In October 2006, Eritrea moved 1,500 troops and 14 tanks to a Temporary Security Zone on the border with Ethiopia. Eritrea maintains that the troop movements were simply assisting with food production and food security. (Eritrea is one of the most food-aid dependent countries in the world.)¹⁰ However, the UN described the incursion as a major security threat and violation of the ceasefire.

Further, despite denial by the Eritrean Government, there has been no significant change to government practice of religious persecution, with nearly all prisoners of conscience detained in 2005 still incarcerated a year later.¹¹ In light of the worsening human rights situation in the country, UNHCR has recommended that no Eritrean refugees be repatriated in 2007.

Resettlement Needs

Over 100,000 Eritrean refugees continue to reside in Sudan, now one of the worst protracted refugee situations in the world. Of this number, UNHCR has identified 2,700 in need of urgent resettlement. Based on current intake capacities, it is anticipated that only 900 will be resettled from this population in 2007. UNHCR has also identified 50 Eritrean refugees in Djibouti, 500 in Ethiopia, and 20 in Zimbabwe in need of resettlement in 2007. In total, there are 3,270 Eritrean nationals in urgent need of resettlement in 2007.

Eritrean refugees in Sudan requiring urgent resettlement include:

- women at risk; and
- mixed marriage families.

6.1.4 Ethiopia

2,615 Ethiopian refugees are in need of resettlement in 2007. Many are part of a pre-1991 caseload of refugees who cannot or will not return to Ethiopia; however, a number of Amhara and Oromo ethnic minorities with strong anti-government political affiliations from more recent caseloads are also in need of resettlement as a tool of protection.

Resettlement Needs

Djibouti: Ethiopian refugees living in Ali-Adde refugee camp in Djibouti have rejected the possibility of repatriation. Further, due to insufficient resources, local integration is not a viable durable solution. Approximately 170 refugees from both the 1991 conflict and more recent caseloads have been identified for resettlement in 2007, qualifying under Legal and Physical Protection Needs and Lack of Local Integration Prospects criteria.

Kenya: In Kenya, Ethiopian refugees are currently the target of a nationwide registration exercise for undocumented migrants. The results of this exercise remain unclear; however, refugees living outside of the infamous Dadaab or Kakuma camps are regularly imprisoned and forcibly repatriated, and UNHCR has forecast a corresponding surge in requests for asylum in 2007.

A lack of income generating opportunities, in addition to anti-integration government policy, means that refugees remain completely dependent on relief assistance. Due to concerns about fairness in previous group resettlement activities, UNHCR has conducted individual “protection profiling” for Ethiopian refugees in Kenya, prioritising urgent protection and medical cases, especially those from highly vulnerable groups. Resettlement has been identified as both an urgent and necessary form of protection, as well as the only durable solution for 700 Ethiopian refugees.

There is also an isolated group of Boran-Oromo families in Kakuma Camp who face an unsafe and uncertain future. Described as a “minority within a minority”, the Boran face continued harassment, discrimination and human rights violations both in and outside of the camp. Strong community links

⁹ IRIN, 27 February 2006, Ethiopia-Eritrea: UN calls for resolution of border stalemate, <http://www.irinnews.org/report.asp?ReportID=51921&SelectRegion=Horn_of_Africa&SelectCountry=ETHIOPIA-ERITREA>

¹⁰ IRIN, 17 October 2006, Eritrea-Ethiopia: Troops harvesting buffer zone, <http://www.irinnews.org/report.asp?ReportID=55976&SelectRegion=Horn_of_Africa&SelectCountry=ERITREA-ETHIOPIA>

¹¹ Amnesty International, Eritrea: Independence Day call for a year of urgent human rights improvements, <<http://www.amnestyusa.org/countries/eritrea/document.do?id=ENGAFR640042006>>

exist within Australia, and RCOA recommends the urgent resettlement of approximately 50 Boran-Oromo living in Kakuma Camp.

Somalia: 1055 Ethiopian refugees in need of resettlement remain in Somalia, the majority living in protracted urban situations in Somaliland (northwest). Approximately 28% are individually recognized ethnic Amhara refugees, many of whom are ex-military personnel and cannot return home. The rest are primarily ethnic Oromos from the Oromiya region. Due to the continuous deterioration of the situation for Oromos in Ethiopia, it is anticipated that requests for asylum in Somalia and UNHCR refugee status will rise to approximately 700 by the end of 2007.

340 applications are also expected from Oromos seeking refuge in the northeastern “Puntland” region. No meaningful integration opportunities are present and security for refugees in Somalia is virtually non-existent. UNHCR thus promotes resettlement as a durable solution in the majority of cases, and also as a protection tool for women at risk and survivors of torture. UNHCR has resources to process only 440 cases in 2007.

South Africa: Approximately 90 Ethiopian refugees in South Africa, either single women or in mixed marriages, will require resettlement in 2007.

Yemen: There are 2,005 Ethiopian refugees in Yemen, the majority of whom claim to be affiliated with the Oromo Liberation Front (OLF) and subject to detention and torture in Oromia region of Ethiopia. UNHCR promotes resettlement as a protection tool, focusing priority on women in a socially, psychologically or medically vulnerable situation, as well as members of the Christian minority who claim harassment due to their religious beliefs. Of 170 identified individuals for resettlement, UNHCR has the capacity to process only 80.

RCOA recommends that Australia reconsider its policy not to receive referrals of ethnic Oromo refugees.

Ethiopian refugees requiring urgent resettlement include:

- unaccompanied minors;
- women at risk;
- those with medical conditions; and
- Boran-Oromo minorities suffering persecution.

6.1.5 Liberia

A decade of civil war hostilities ended in 2003. In January 2006, Liberia inaugurated Africa’s first ever-female President Ellen Johnson-Sirleaf, who has promised to bring peace and restoration to her war-torn country.

Resettlement Needs

UNHCR expected to assist in the repatriation of approximately 168,871 Liberian refugees from Cote D’Ivoire, Ghana, Guinea and Sierra Leone by the end of 2006. Resettlement activities for Liberian refugees will thus be limited to individuals with a legitimate fear of persecution in situ and on repatriation, survivors of violence, women at risk, those with medical needs and unaccompanied minors, as well as a small number residing in Nigeria and Zimbabwe. Approximately 450 Liberians have been identified for resettlement in 2007.

Ghana: 100 Liberian refugees have been identified in Ghana for resettlement in 2007.

Guinea: 20 Liberian refugees have been identified in Guinea for resettlement in 2007.

Nigeria: 6,051 Liberian refugees reside in Nigeria, approximately 70% of which are women and children. 20 Liberian refugees will be submitted for resettlement for family reunification, protection and medical needs.

Sierra Leone: 59,950 Liberian refugees reside in Sierra Leone, the majority of whom will repatriate voluntarily. Two hundred Liberians with compelling reasons not to return, and those with medical needs, survivors of violence, legal protection needs, lack of local integration prospects and women at risk, will be submitted for resettlement in 2007.

Zimbabwe: 20 Liberian refugees have been identified in Zimbabwe for resettlement in 2007.

Liberian refugees requiring urgent resettlement include:

- those requiring medical treatment; and
- those with other extreme protection needs.

6.1.6 Republic of Congo (ROC)

The Republic of Congo (ROC) is in a situation of post-conflict reconstruction and rehabilitation following the civil wars which took place between 1993 and 2000. The country's security situation has improved markedly; however, living conditions for Congolese have not improved since the end of conflict.

Resettlement Needs

While UNHCR will continue to assist most Congolese refugees with the process of voluntary repatriation in 2007, individuals in need of resettlement remain in Benin, Cameroon, DRC and Rwanda, on the basis of physical and legal protection needs, with the largest number by far in Rwanda.

20 Congolese refugees in Benin, 100 in Cameroon, 50 in DRC, and over 1,200 in Rwanda require resettlement in 2007. However, UNHCR anticipates the capacity to process only 685 from this group.

ROC refugees requiring urgent resettlement include:

- those requiring medical treatment; and
- those with other extreme protection needs.

6.1.7 Sierra Leone

Democratic elections in Liberia in 2005 and the inauguration of Africa's first female President in 2006 have improved the situation for Sierra Leonean refugees in Liberia, many of whom will formally naturalise or be granted resident alien status in 2007-08.

A residual caseload of Sierra Leonean refugees also remains in Guinea. The Guinean Government recognizes 1,300 Sierra Leonean refugees living in urban camp settings in Conakry, of which only 600 are able to repatriate.¹² Of the remaining 700 individuals, most have legitimate grounds for rejecting local integration and repatriation options. In addition to a large number of orphaned and unaccompanied minors who are unable to secure resettlement places due to amputations and other medical requirements, highly vulnerable groups, especially women at risk, fear returning to Sierra Leone because their former persecutors have been integrated into the new police and military forces. Following the largely successful repatriation operation, UNHCR has significantly reduced its presence in Guinea; however, this has made it nearly impossible for remaining refugees to access resettlement procedures.

Resettlement Needs

3,546 refugees from Sierra Leone remain in Liberia, residing mainly in three refugee camps near Monrovia. Though most will be able to integrate or repatriate, 60 individuals with medical needs, survivors of violence or torture and/or women at risk will need resettlement in 2007.

Sierra Leonean refugees requiring urgent resettlement include:

- those requiring medical treatment;
- unaccompanied minors; and
- those with other extreme protection needs.

¹² Guinean Intervention, Plenary Session of the Executive Committee Meeting of the UNHCR, Palais de Nations, Geneva, Oct 3, 2006.

6.1.8 Sudan

Sudan has been ravaged by over 21 years of civil war, costing the lives of over 1.5 million people¹³. A peace deal has recently been signed by parties to the conflict in South Sudan, resulting in a large-scale UNHCR repatriation program for refugees scattered across the region. However, the crisis in Darfur continues to cause huge refugee and IDP movements, and is undoubtedly one of the worst and most complex humanitarian crises in the world.

The political climate in Khartoum fluctuates daily, and with it the security situation in Darfur and the suitability of different durable solutions for those fleeing the conflict. Resettlement could potentially be used as a critical protection tool for highly vulnerable groups from Darfur. However, due to difficulties on the ground and a complex political climate, resettlement has rarely been used. RCOA believes that DIAC should monitor the situation closely in 2007, and amend visa distribution as and when resettlement becomes a durable solution.

Janjaweed militias in Darfur have further destabilised the region and forced the evacuation of up to 400 aid agency staff in December 2006, leaving millions without reliable access to food, water and vital emergency health services.¹⁴ Though the Sudanese Government agreed to a three-phase plan for the introduction of a hybrid AU-UN peacekeeping force in late December 2006, to replace the severely under-resourced AU force, there is little international confidence in Khartoum's sustained commitment to the plan. In late January 2007, UNHCR launched an appeal for internally displaced Sudanese and Chadian refugees in West Darfur, noting for the first time that there is no prospect for return for nearly the nearly two million IDPs and 200,000 refugees hosted in Eastern Chad.

Resettlement Needs

Where possible, it is important to distinguish between the refugees who have fled South Sudan and those from Darfur. While more offshore humanitarian visas were granted to Sudanese citizens last year than to any other group, almost no Darfurians were included in this intake.

South Sudan: Approximately 1,700 refugees from South Sudan will be unable to repatriate, and remain in need of resettlement in 2007. Because UNHCR does not distinguish between refugees from Darfur and South Sudan, a small proportion of the following numbers, especially those from Egypt, will include refugees from both conflicts.

There are approximately 13,490 Sudanese refugees in Egypt; however, the large scale repatriation program currently in operation for South Sudanese refugees means that only those with urgent protection needs, approximately 675, will be submitted by UNHCR for resettlement in 2007. RCOA is concerned that there are still Sudanese refugees entering Egypt with protection claims, particularly from Darfur, unable to access refugee status determination.

There are also 450 Sudanese refugees from Ethiopia, 150 from Ghana, and 470 divided between Central African Republic, DRC, Eritrea, Jordan, Lebanon, Nigeria, Syria, Uganda, and Zimbabwe, who need resettlement in 2007.

Darfur: Residual hope that the situation in Darfur will be resolved before refugee and IDP situations become protracted must not be used as a reason to avoid resettling those with no viable prospects for repatriation or integration. Though UNHCR has proposed only 50 Sudanese refugees from Chad for resettlement in 2007, RCOA is hopeful that the recent concession that no viable prospects for repatriation exist will allow this figure to be amended to reflect more accurately the dire nature of the situation. This disproportionately small number is also attributed to a lack of refugee access to UNHCR processing facilities in Chad and Cairo, resulting in many legitimate refugees from Darfur applying for resettlement in Australia under the Special Humanitarian Program.

Sudanese refugees (from South Sudan and Darfur) requiring urgent resettlement include:

- those with legal and physical protection needs;

¹³ http://news.bbc.co.uk/2/hi/middle_east/country_profiles/820864.stm

¹⁴ *Crisis Watch No 41*, International Crisis Group, 31 December 2006.

- survivors of violence and torture;
- women at risk;
- children and adolescents; and
- those with a lack of local integration prospects.

RCOA believes that there is scope for the use of Visa Subclasses 201 and 203 to address the situation of IDPs in Darfur who have strong protection needs and have no other viable durable solution options.

RCOA also believes that DIAC should explore alternative options with secondary refugee agencies, to identify resettlement cases from Darfur where UNHCR has insufficient operational capacity.

6.1.9 Somalia

Since the overthrow of President Said Barre in 1991, Somalia has been without an effective central government. Years of fighting between rival warlords and clans, as well as famine and disease, have led to the deaths of over one million people¹⁵.

While the Transitional Federal Government (TFG) was established in 2005, its authority has been vastly undermined by the power of the Union of Islamic Courts (UIC) which established rule over the capital Mogadishu as well as the majority of southern and central Somalia. The Transitional Federal Government (TFG) backed by Ethiopian forces defeated the Union of Islamic Courts (UIC) in December 2006.

In January 2007, President Abdullahi Yusuf entered the capital Mogadishu. The interim government has imposed a three-month state of emergency.¹⁶ In January 2007, a ceremony was held in Mogadishu to mark the start of Ethiopia's withdrawal from Somalia. The situation remains very complex and uncertain.¹⁷

In response to the emerging uncertainty, the Kenyan Government has closed the border with Somalia, a main transit point for refugees fleeing the conflict. In early January, Kenya returned over 400 Somali asylum seekers, mostly women and children, who crossed the border before it could be fortified. UNHCR has also reported that the returned asylum seekers have been denied access to humanitarian assistance. Despite heavy international criticism, the Kenyan Government claims it cannot distinguish between militants and genuine refugees, and does not have the capacity to accept additional people. They have suggested that the transitional Somali government and Ethiopia set up new IDP camps.

These camps would be in addition a growing number of IDPs in Somalia living in substandard conditions, already estimated at around 400,000 individuals. They face frequent eviction and discrimination from local residents, have access to few amenities, and little or no emergency health care. An outbreak of war would be utterly disastrous in this already dire situation.¹⁸

Resettlement Needs

Eritrea: There are currently 3,657 Somali refugees in Eritrea, 70% of whom originate from Southern Somalia and have little prospect of return. Almost half of this number have been in Emkulu camp for over six years, and are recognized as refugees on a prima facie basis. 1,600 Somali refugees in Eritrea are in need of resettlement in 2007; however, UNHCR has capacity to submit only 300 and will prioritise cases on the basis of vulnerability and length of stay in Emkulu.

Kenya: The ongoing conflict and threat of guerrilla war, as well as drought and destitution have caused as many as 32,000 people to seek refuge in the already overcrowded Dadaab camps in Kenya since the beginning of 2006, before the border closure. The camps, Ifo, Dagahaley and Hagadera, have capacity for 60,000 refugees, but currently host over 160,000. The Kenyan camps

¹⁵ http://news.bbc.co.uk/1/hi/world/africa/country_profiles/1072592.stm

¹⁶ http://news.bbc.co.uk/2/hi/africa/country_profiles/1072611.stm

¹⁷ <http://news.bbc.co.uk/2/hi/africa/6159735.stm>

¹⁸ "Kenyans close border with Somalia," BBC News, January 3, 2007.

are unable to cope with the refugee influx, especially with rising flood waters at the end of 2006 which affected up to 90% of Ifo's population and 80% of Dagahaley's population, who lost their belongings and homes. The floodwaters are also causing concerns in regards to health and sanitation, with latrines having collapsed into stagnant waters.

For many Somali refugees from Southern Somalia in Kenya, resettlement is the only viable form of protection, as well as the only viable durable solution. A minority group of concern is the Ogaden, with refugees coming from the Ogadeenya region in Somalia and living in refugee camps in Kenya.

3,900 Somali refugees are in need of resettlement in 2007, by far the largest African group identified by UNHCR this year. RCOA believes that DIAC should increase offshore visa grants to Somali refugees.

6.1.10 Togo

Disputed presidential elections in 2005 led to civil unrest causing an exodus of 40,000 Togolese refugees to Benin and Ghana, as well as the displacement of some 10,000 people within Togo.

Resettlement Needs

Limited operational capacity in Benin has allowed UNHCR to submit only 20 individuals for resettlement in 2007, even though resettlement is likely to be the only durable solution possible for 25,000 refugees from Togo.

150 refugees in Ghana, who would face persecution due to past political activities if repatriated, will also need resettlement in 2007.

RCOA believes that DIAC should consider accepting recommendations from secondary refugee agencies in Benin, like ICRC, for offshore humanitarian visa grants to refugees from Togo.

6.2 Central Asia, South West Asia, North Africa and the Middle East

6.2.1 Afghanistan

Afghanistan has been ravaged by 30 years of war and, five years after the US-led invasion, there still remain serious economic, social and security concerns within the country. Authorities have been able to exert little control outside the capital and there has been a recent upsurge in militant violence especially in the south and southeast of the country. There remain serious concerns for many groups within the country and, as a result, voluntary repatriation from refugee populations in Iran and Pakistan is down 60% since 2005.

Resettlement Needs

Iran: There are thought to be around 950,000 Afghanis living in Iran, for whom repatriation is not a viable option. The Iranian Government is not willing to extend any local integration prospects, and women at risk, journalists, free-thinkers, secularists, human rights activists and those in opposition to the Mujahedin require urgent resettlement as a tool of protection. UNHCR has identified 1,350 Afghan refugees in Iran in need of resettlement, but has the capacity to process only 950.

Pakistan: Pakistan hosts the largest refugee population in the world – over 3 million Afghan nationals. Though an increasing number of Afghani refugees are being repatriated following the closure of three refugee camps in Pakistan, many are not ready to return because of lack of shelter and jobs in Afghanistan. The closure of the camps has only added to the urgent need for durable solutions for an estimated 2.6 million Afghan refugees who remain in Pakistan, and for whom repatriation is not an option. Resettlement is sought for 770 Afghan refugees in Pakistan in 2007.

India: There are 8,536 Afghans of Hindi/Sikh origin recognised as refugees in India, most for over 20 years, who will all integrate locally. However, a number of ethnic Afghans who have also resided in India for over 20 years will not be able to integrate. Ethnic Afghans in India face

arbitrary detention, deportation and protection problems including extreme vulnerability and gender based violence. Resettlement is sought as both a tool of protection and a durable solution. UNHCR will submit 400 ethnic Afghani refugees from India for resettlement in 2007.

Russia and former Soviet Bloc countries: 80% of refugees in the Russian Federation originate from Afghanistan, and 1,000 individuals will be resettled in Canada and the United States in 2007.

The situation for Afghan refugees who have fled to other former Soviet Bloc countries is at best uncertain, and most often perilous. However, insufficient operational capacity in the region, combined with complex political climates surrounding refugees, means that few, if any, Afghani refugees from this region will be submitted for urgently needed resettlement in 2007.

Afghani refugees requiring urgent resettlement include:

- women at risk;
- professionals and political activists; and
- the longest staying individuals for whom resettlement is the only viable durable solution.

RCOA also believes that DIAC should consider accepting recommendations from secondary refugee agencies, like ICRC, in the former Soviet Bloc countries, where UNHCR has insufficient operational capacity.

6.2.2 Iran

Respect for basic human rights in Iran, especially freedom of expression and assembly, deteriorated in 2006. Iran's ethnic and religious minorities are subject to discrimination and persecution, and closure of independent media in Iran has helped to perpetuate an atmosphere of impunity.¹⁹

In the south-western province of Khuzistan, unrest among Iran's Arab population intensified in 2006. Revolutionary Courts, following secret proceedings that did not meet international fair trial standards, condemned at least 16 Iranians of Arab origin to death on charges of armed activity against the state. In January 2007, experts from the UN Human Rights Council urged the Iranian Government to "stop the imminent execution of seven men belonging to the Ahwazi Arab minority and grant them a fair and public hearing".²⁰

The government continues to deny Iran's Baha'i community permission to worship publicly or pursue religious activities. In 2005, an instruction was issued to government organs to report on the activities and members of the Baha'i religion.

Resettlement Needs

Turkey: Approximately 50% of Turkey's 8,000 non-European refugees and asylum seekers originate from Iran. Non-European refugees in Turkey have no prospects for local integration, and resettlement is sought as tool of protection and a durable solution for 2,000 Iranians in 2007. European countries which had taken refugee quotas from Turkey in the past are no longer willing to do so, citing Turkey's EU ambitions. The need for increased intake quotas for Iranians in Turkey, by non-European resettlement countries is vital in 2007.

Iraq: Around 200 Iranian Kurds²¹ who fled Iran during the Iran-Iraq war, lived for 20 years in the al-Tash camp in Iraq and fled the camp following clashes between rebels and US forces in January 2005, now live in tents set up by UNHCR and an Iraqi NGO on the Iraqi side of the Iraq-Jordan border. They seek resettlement in a third country but have refused UNHCR and Human Rights Watch proposals to transfer them to the Kawa refugee camp in northern Iraq where they would have the opportunity legitimately to seek third country resettlement.²²

Iranian refugees requiring urgent resettlement include:

¹⁹ Human Rights Watch Iran Report 2006, p. 1

²⁰ Office of the High Commissioner on Human Rights: Press Release (Iran) 10 Jan 2007 p.1

²¹ Iranian Kurds comprise around 7% of Iran's population and seek establishment of an independent Kurdish state in the region.

²² IRINnews.org report from UN Office for the Coordination of Humanitarian Affairs (OCHA) 3 Jan 2007

- those who have fled to Turkey and Iraq in fear of persecution on ethnic or religious grounds, especially members of the Baha'i religion, and Kurdish Iranians; and
- those with urgent protection needs, for whom resettlement is also the only viable durable solution.

RCOA also believes that DIAC should consider increasing offshore visa grants to Iranian refugees in Turkey, in response to a reduction in EU resettlement countries, but make these grants in addition to, not subtracted from, existing intake numbers.

6.2.3 Iraq

The UNHCR reports²³ that the Iraqi authorities are not yet able to provide residents with basic protection from generalised violence and massive targeted violations of human rights. Major political issues remain unresolved and the country suffers from high unemployment and chronic fuel, electricity and water shortages with serious shortcomings in health and education services creating the potential for major social unrest. Violence is expected to further increase pending the popular referenda to determine the status of disputed areas scheduled for 2007. Population displacement continues as a result of ongoing conflict between the security forces and the armed insurgency.²⁴

UNHCR estimates that up to 1.6 million Iraqis have sought refuge in neighbouring states, particularly Syria and Jordan, with around 2,000 more crossing from Iraq every day.²⁵ Many have also sought refuge in Turkey, Lebanon, Egypt, the Gulf States and in Europe.

It is reported²⁶ that Jordan treats Iraqis fleeing violence as temporary visitors, not refugees. Jordan has made visa renewal so difficult that most Iraqis quickly lose their legal status and are subject to exploitation. Jordan has increasingly subjected Iraqis to deportation or refusal at the border. Such returns and rejections appear in many cases to constitute *refoulement*, the forced return of refugees, a violation of international customary law.

Christian and other religious minority groups have also suffered targeted persecution. They have been subjected to discrimination and human rights violations. These groups include Mandaeans, Assyrians and Chaldeans, who are in neighbouring countries while some remain in Iraq. Strong community links exist within Australia and RCOA believes that these groups should be resettled. Alternatively the use of SHP visas should be targeted to address this caseload.

There are also approximately 1.6 million Iraqis displaced internally. 480,000 Iraqis fled their homes for other areas inside Iraq in 2006, most in response to sectarian violence sparked by the bombing of an important Shi'a mosque in February 2006. At mid-year, internal displacement was estimated to be continuing at a rate of some 50,000 a month.

Resettlement Needs

Iraqi nationals seeking refuge comprise Sunnis and Shi'a, non-Muslims and members of ethnic and religious minorities. Many flee political persecution, threatened as collaborators with the Americans or association with the Ba'thist Party. Others flee generalised violence²⁷ and targeted persecution, including ethnic cleansing.

Projections indicate that 1,575 persons from Iraq will be in need of resettlement in 2007.

Iraqi refugees requiring urgent resettlement include:

- those with immediate protection concerns;
- women at risk;
- those with specific vulnerabilities of a medical, psycho-social or social nature; and

²³ <http://www.unhcr.org/home/RSDLEGAL/458baf6f4.pdf>, p.2

²⁴ *ibid.* p. 1

²⁵ UNHCR Return Advisory and Position on International Protection Needs of Iraqis Outside Iraq, Dec. 2006 p. 2 estimates that there are 500,000-700,000 Iraqis in Jordan and 500,000 in Syria

²⁶ [hrw.org/reports/2006/jordan](http://www.hrw.org/reports/2006/jordan)

²⁷ [http://www.hrw.org/reports/2006/Jordan 1106/2](http://www.hrw.org/reports/2006/Jordan%201106/2)

- Christian and other religious minorities suffering persecution including Mandaeans, Assyrians and Chaldeans.

In order to fill Australia's quota, it is recommended that Australia consider group resettlement recommendations from UNHCR and increase the use of the SHP program to assist Iraqi refugees. Australia also has a responsibility to assist in resolving the Iraqi caseload in Indonesia.

6.2.4 Uzbekistan

The human rights situation in Uzbekistan continues to deteriorate. In 2006, the Uzbek Government clamped down severely on religious groups and human rights activists, conducting raids on religious communities, detaining religious believers, and beating and deporting foreigners involved in religious or human rights activities.²⁸ Systematic torture by the Uzbek Government in pre-trial conditions is also of serious concern, and is claimed that electric shocks have been used on detainees.²⁹ Repatriation is not an option for Uzbek refugees.

Resettlement Needs

Kyrgyzstan: Following atrocities committed by Uzbek forces in May 2005, several hundred protesters sought asylum in Kyrgyzstan. In addition, around 1500 people, the immediate family members of evacuated and resettled refugees, are expected to cross into Kyrgyzstan and seek asylum on family reunification grounds in 2007.

Refugee status determination processes have been particularly difficult for Uzbeks in Kyrgyzstan due to the recent reorganization of the national migration agency, making local integration unviable. Four mandate refugees and one asylum seeker who have been accepted for resettlement remain in detention in Osh, pending Uzbek extradition requests. Their return would not be the first instance of refoulement instigated by Kyrgyzstan.

Kazakhstan: Uzbeks who have fled to Kazakhstan similarly have no access to government refugee status determination processes, cannot claim asylum and are prevented from integrating locally.

Ukraine: Despite UNHCR recognition of Uzbek refugees who have fled to Ukraine, they are unable to apply for refugee status locally. Most are threatened with detention, deportation and refoulement, and are regularly targeted by local police authorities for document checks at their home.

Resettlement is sought for 370 Uzbek refugees as an urgent protection tool: 235 from Kyrgyzstan, 100 from Kazakhstan, and 40 from Ukraine, who may even be in need of emergency resettlement.

RCOA believes that DIAC should consider:

- resettling Uzbek refugees on a protection-needs priority basis;
- making visa Subclass 200 and 204 available to Uzbek refugees who have been denied official RSD for political reasons, but whom are otherwise recognised by UNHCR; and
- offering emergency resettlement visas (203) for Uzbek refugees in Ukraine on the advice of UNHCR.

6.3 South Asia and South East Asia

6.3.1 Burma

Continuing conflict in Karen State has displaced 27,000 civilians. In 2006, 232 villages were destroyed as part of the army's campaign against ethnic rebels and attacks have forced more than 1,450 to flee the Mon Township of Nyaunglebin District in Eastern Burma. It is estimated that

²⁸ IRIN, 6 September 2006, Uzbekistan: Government clamps down on religious freedom, <http://www.irinnews.org/report.asp?ReportID=55431&SelectRegion=Asia&SelectCountry=UZBEKISTAN>

²⁹ IRIN, 20 April 2006, Uzbekistan: Systematic use of torture continues – UN, <http://www.irinnews.org/report.asp?ReportID=52879&SelectRegion=Asia&SelectCountry=UZBEKISTAN>

95,000 IDPs are hiding in conflict zones with limited access to food, health and education. Health indicators among the displaced population are some of the worst in the world, with 12% suffering malaria, malnutrition, high risk of injury from landmines and armed conflict and high rates of infant mortality.³⁰

Resettlement Needs

Over 140,000 Burmese refugees reside in nine camps on the Thai-Burma border, where some have been residents for over 20 years.³¹ The Thai government grants temporary status to refugees, allowing them to remain legally on Thai soil provided they are formally registered through joint UNHCR - Ministry of Interior procedures and that they remain within the confines of the camp where they are registered.

Camp residents are provided free medical care, as well as primary education through to tenth grade. However, the level of food and other basic necessities while falling within international standards cannot be considered sufficient for daily subsistence. As a result, many refugees are forced to leave the camps, risking arrest and deportation to find work in the illegal employment sector to provide for their families. This often results in the exploitation and abuse of refugees. Overcrowded camps with poor sanitation and water facilities create a situation where serious public health risks and social problems are endemic and where other social problems associated with such conditions are reaching alarming levels.

Local integration is not an option under current Thai regulations. Thai nationality or permanent residence is not even available to refugees who marry locally, as the Thai Government sees the refugee population as a security risk. Voluntary repatriation for the Burmese refugees in Thailand remains unviable in 2007. In view of the continuing decline in camp conditions (likened to warehousing) and the protracted nature of the refugee situation, large-scale resettlement activities in Thailand are being initiated as a matter of priority.

Minority groups, including the Rohingya in Bangladesh and Naga in India, are also subjected to discriminatory treatment and human rights breaches.

UNHCR anticipates that actual resettlement needs for the Burmese population in Thailand in 2007 will be at least 15,000 persons. Around 3,000 individuals with legal and physical protection needs will comprise refugees from each of the nine camps, and group submissions for Burmese refugees based in Thailand total 12,000.

RCOA commends the Minister's June 2006 announcement that Australia will increase its annual resettlement quota of refugees from the Thai-Burma Border from between 400 and 900 in past years, to as many as 1,400 refugees in 2007. We also commend the grant of AUD \$500,000 provided to help improve education standards in the camps.

6.3.2 Sri Lanka

The security situation in Sri Lanka deteriorated in 2006. Repeated violations of the 2002 ceasefire agreement between the Government and the Liberation Tigers of Tamil Eelam (LTTE) have caused a widespread escalation in conflict and a rapid decline in the security of civilians across the north and east³² of the country.³³ By November 2006, the upsurge in violence resulted in the displacement of more than 204,000 people (around 56,000 families). More than 16,000 Sri Lankans have fled to southern India since January 2006.³⁴

On the basis of their ethnicity, Tamils from the North and East are at risk of targeted human rights violations from all parties to the conflict. These violations include forced recruitment by the LTTE,

³⁰ Human Rights Watch; Human Rights News 30.11 2006.

³¹ unhcr.org/news/NEWS/4413c13b4.html

³² The north and east are defined as Jaffna, Kilinochchi, Mullaitivu, Mannar, Vavuniya, Trincomalee, Batticaloa and Ampara Districts, some of which are controlled by the LTTE

³³ UNHCR Global Appeal 2007, Sri Lanka p. 232

³⁴ UNHCR Position on the International Protection Needs of Asylum Seekers from Sri Lanka , December 2006; p.3

children, in particular, being at risk of violation of their human rights through military recruitment.³⁵ Tamils in Colombo are especially vulnerable to abductions, disappearances and killings. Muslims from the East are particularly vulnerable to human rights abuses and Sinhalese from the North and East, particularly in the border areas, are vulnerable to military activity.

Political efforts to further the peace process have stalled and it is widely believed that the humanitarian situation will worsen in 2007 as ethnic tensions increase. There is evidence of increasing communal violence and human rights violations including mob attacks and burning of villages.³⁶

Due to the nature of the armed conflict and the inability of the authorities to provide assured protection there are no internal flight options for:

- Tamils from the North, East and Colombo; and
- Muslims from the East.

Members of both groups are fleeing targeted violence or human rights abuses, either by the LTTE, authorities or paramilitary groups.³⁷

Resettlement Needs

While projections indicate that 35 persons from Sri Lanka will be in need of resettlement in 2007, this fails to reflect the continuing escalating level of violence and the impasse in political negotiations, which affect all three ethnic groups.

RCOA endorses the recommendations made by UNHCR and the Hotham Mission report on Security, Protection and Humanitarian Concerns and Implications for Asylum Seekers and believes that DIAC should:

- consider all asylum claims from Tamils from the North and East favourably;
- recognise Tamils from the North and East, Tamils from Colombo, Muslims from the East and Sinhalese from the North and East found to have been subjected to targeted violations of human rights by the State, LTTE or other non state agents, as refugees under the criteria of the 1951 Convention;
- consider granting a complementary form of protection to individual Tamils from the North and East, Tamils from Colombo and Muslims from the East who do not fulfil the refugee criteria under the 1951 Convention, and
- immediately suspend removals to Sri Lanka due to the current state of emergency.

6.3.3 Bhutan

Over 100,000 Bhutanese refugees reside in Nepal. Due to escalating conflict between Maoist Forces and His Majesty's Government of Nepal (HMG-N) in the region in 2006, UNHCR's ability to provide refugees with protection has been severely undermined. Hopes of repatriation disintegrated after the collapse of bilateral negotiations in 2003. Refugees residing in camps cannot engage in gainful employment. They have their human rights and movement severely restricted and are offered no protection by Nepalese security forces. Urban refugees are considered illegal immigrants by the Nepalese Government and are subject to arrest, imprisonment and refoulement. UNHCR notes that "any opportunities for the rapid departure of refugees from Nepal need to be capitalized upon, including a cease-fire or cessation of hostilities". Thus, urgent resettlement for Bhutanese refugees has become the priority form of protection.

Resettlement Needs

40% of Bhutanese refugees are under the age of 18. Due to high instances of sexual and gender-based violence, survival sex and trafficking, neglect, abuse, radicalisation, lack of income generating activities and lack of education opportunities among refugee youth, resettlement is a necessary element of protection for men and women under 25 years of age and their dependants. Resettlement is also the only viable option for urban refugees who cannot be repatriated.

³⁵ *ibid.* p.8

³⁶ UNHCR Global Appeal 2007: Strategies and Programs, p. 232

³⁷ UNHCR Position on the International Protection needs of Asylum Seekers from Sri Lanka, December 2006; pp 12-16

Despite the high number of refugees in protracted situations, UNHCR hopes to identify at least 11,650 cases for resettlement in 2007. Of this, 1,600 are individuals and 9,900 group members; however, because of significant staffing restrictions, it is expected that only 150 cases will be processed this year.

RCOA recommends that DIAC, in the spirit of rapid response to urgent resettlement needs reflected in Emergency Rescue Visa Subclass 203 and Woman At Risk Visa Subclass 204, provide places for a significant proportion of the highest risk cases identified by UNHCR.

6.4 South America

6.4.1 Colombia

The security situation in Colombia did not improve in 2006. The country has been ravaged by more than 40 years of violent conflict involving outlawed armed groups (guerrillas and paramilitaries), drug cartels and gross violations of human rights.³⁸

The longstanding conflict in Colombia continues to cause displacement, internally and to neighbouring countries. It is estimated that Colombia has three million IDPs, one of the largest IDP populations in the world.

There has been a dramatic increase in the number of people seeking asylum in Ecuador since the year 2000. This is due mainly to the gradual deteriorating security situation in Colombia, widespread human rights violations, military confrontations between Colombian armed groups and the aerial spraying of illegal cultivations.

There are also large numbers of asylum seekers (more than 5,000) in Venezuela and persons of concern to UNHCR in border regions (approximately 200,000).

Resettlement needs

The use of resettlement as a protection tool has become increasingly effective for Colombian refugees with urgent needs.

Ecuador: Most Colombian refugees are in Ecuador. They originate mainly from Colombia's Southern regions, close to the border. UNHCR has identified 800 Colombian refugees in need of resettlement. However, UNHCR has only the capacity to process 650 of these cases in 2007. 50 Colombian refugees identified under the UNHCR mandate have been identified as requiring resettlement as a durable solution. These refugees have no legal rights in Ecuador and face the threat of being forcibly returned to Colombia. Another 350 Colombian refugees recognised by the Ecuadorian authorities have been identified for resettlement. These include refugees with special legal and protection needs, children at risk, older refugees and survivors of violence and torture. Finally, another 400 refugees are considered to be in need of resettlement due to their special needs.

There are serious security concerns for Colombian refugees in Ecuador, with evidence of the activities of irregular armed groups from Colombia in Ecuadorian territory. This has created a need for resettlement of particular groups of refugees at risk, including journalists, human rights activists, former members of the Colombian security agencies (police and army), public servants and unionists. These refugees are referred for resettlement under urgent security grounds. There are also increasing numbers of women at risk of sexual exploitation or without any integration prospects.

Costa Rica: It is estimated that 600 Colombian refugees require resettlement in Costa Rica in 2007. UNHCR only has the capacity to process 425 refugees from this caseload. Many of these refugees have strong legal and physical protection needs and others don't have any prospects of local integration. There are several cases of women at risk and survivors of torture and trauma.

³⁸ http://news.bbc.co.uk/1/hi/world/americas/country_profiles/1212798.stm

UNHCR expects to increase the numbers of refugees resettled within the region in countries such as Argentina, Chile or Brazil.

Venezuela: 38 Colombian refugees have been identified as requiring resettlement in Venezuela. UNHCR is able to process 14 persons from this caseload. Cases are refugees with legal and physical protection needs and women at risk.

Colombian refugees in Ecuador requiring urgent resettlement include:

- Women at risk of sexual exploitation;
- Children at risk;
- Refugees referred for resettlement under urgent security grounds; and
- Refugees without legal rights in Ecuador.

RCOA believes that DIAC should also consider the use of Visa Subclass 201 and 203 to address the situation of IDPs in Colombia who have extreme protection needs, and who have no other viable durable solution options.

6.5 Europe

6.5.1 Russian Federation

The number of people to have been killed or disappeared in Chechnya has fallen by 38% in the space of a year; however, a climate of fear still exists. Paramilitary groups close to the government are accused of abduction, torture, extra-judicial killings and other human rights breaches³⁹.

Approximately 1,075 Chechen refugees from the Russian Federation remain in need of resettlement in 2007, due to lack of prospects for local integration, and legal, medical or physical protection needs, including a large proportion of women at risk. However, UNHCR anticipates the capacity to process only 700.

Resettlement Needs

There are 550 Chechen refugees in Azerbaijan who are in need of resettlement with medical, legal or physical protection concerns. Another 125 Chechens in Ukraine who face arrest, detention and even *refoulement* are in urgent need of resettlement; some may even be submitted by UNHCR for emergency resettlement. In 2007, UNHCR will also actively seek Australian resettlement for some members of a group of 400 Chechens in Georgia.

Chechen refugees requiring urgent resettlement include:

- those with legal, medical or physical protection needs; and
- those who may face *refoulement* unless urgently resettled.

RCOA also encourages DIAC to accept a significant percentage of the Chechen refugees in Georgia at the request of UNHCR.

³⁹ <http://news.bbc.co.uk/2/hi/europe/6196895.stm>

7. Processing and Resettlement Issues

7.1 Forms and Documentation

Through our community consultations for this submission, many people have drawn RCOA's attention to difficulties refugee and humanitarian visa applicants are having in adequately completing their applications offshore. In many places, it is very difficult or impossible to find someone to translate claims of humanitarian entrants into English. It can also often be expensive and unreliable. An alternative could be to produce documents in various common community languages so that applicants could complete the document themselves. It could then be translated more reliably in Australia. It is vitally important that applicants are chosen for resettlement based on need and not on their ability either to write in English or to attain the services of an experienced translator.

Another common problem is that humanitarian entrants do not include all of their immediate family members on the application. There are a number of reasons why applicants may not list their immediate family including:

- lack of awareness of the importance of providing accurate information;
- proposers filling out the section for them;
- family members who were at the time of application missing or presumed to be dead; and
- fear that including all members of a large family may be detrimental to their case.

RCOA recommends that the problem of applicants not including all their immediate family on the visa application form be addressed upon arrival in Australia, with the applicant being informed of the importance of that section of their application and given an opportunity to correct any mistakes without prejudice of visa status.

7.2 Overseas Posts

Many in the sector reported continuing delays in processing at a number of the overseas posts. Delays were of particular concern when they related to urgent or emergency cases or family reunion. Cases were reported where pre-embarkation health checks had to be repeated because they had expired before the final departure processing had been completed. Processing delays were further exacerbated by the difficulties in communicating with some of the overseas posts. These delays have contributed to the current situation where refugees are, once again, using the family stream visas as a faster alternative to the split family provision of the SHP. (See section 7.6.6).

RCOA recommends

- ***That DIAC improve communication with the sector in Australia around processing issues and times at overseas posts.***
- ***That communication on the progress of SHP cases continue to come from DIAC Australia even when the case has been referred to an overseas post.***

7.3 Interviews

Concerns continue to be raised about problems with the interview process overseas. Availability and appropriateness of interpreters remain a problem, as does lack of cultural sensitivity in interview questions and techniques. RCOA would like to emphasise the importance of applicants feeling comfortable at the interview so that they feel able to disclose all the information necessary for their case. Particular sensitivities are required when interviewing children and women. In certain cases, there will be a reluctance to divulge important information which may be sensitive or painful. Interviewers need to be trained to take an approach to questioning which acknowledges the sensitive context in which an application is made.

The sector also raised concerns about the number of interviews being conducted with some applicants who then may be refused without explanation. This is of particular concern when many applicants have difficulty in travelling long distances to interviews. In many cases travel to an interview can be very expensive and sometimes dangerous

RCOA recommends that all Australian DIAC workers who are involved overseas in offshore processing be trained in appropriate interview techniques and receive access to appropriate support and advice.

7.4 Health

The sector has reported improvements during the last 12 months in the numbers and quality of the pre-embarkation health checks in Africa, in particular the “fit to fly” test required within 72 hours prior to departure. There have also been improvements in the use of the health manifesto and communication to settlement providers who, as a result, are able to respond appropriately to the health needs of humanitarian entrants. The one area where there appears to be a gap is with information relating to immunisation status. Appropriate documentation should accompany each entrant to Australia that guarantees that they receive proper medical care.

RCOA remains concerned that applicants are being excluded from the program solely because of a health or a disability issue. This is of particular concern where families face the choice of leaving a family member behind, or where the whole family is refused resettlement. The consultation heard of at least one case where a family member had to remain behind because of a medical issue. This increased the vulnerability of the family member left behind and had a detrimental effect on the settlement process of the rest of the family.

RCOA recommends that health waivers be used in cases where families are at risk of being separated or where the entire family is at risk of not being resettled due to the health concerns of one family member.

7.5 Need Versus Ability to Settle

RCOA contends that selection for the refugee visa should be on the basis of vulnerability and the need for resettlement rather than an assessment of the individual’s capacity to settle successfully. Priority should be given to those identified by UNHCR for resettlement or those whose resettlement is supported by UNHCR. For those refugees who contact an Australian mission directly or are brought to the attention of DIAC officers by NGO or IGO staff or friends or relatives, consideration for the program should be on the basis of need.

RCOA strongly believes that the existence of a medical condition or a disability should not be the sole reason for excluding an otherwise eligible entrant from the refugee program.

RCOA recommends that the policy of excluding otherwise eligible applicants on the basis of the estimated financial costs of a medical condition or a disability be abolished.

7.6 Special Humanitarian Program (SHP)

7.6.1 Family reunion

A clear agreement from the consultations around Australia is that family reunion is the most important priority for refugees and other humanitarian entrants when they arrive in the country. Recent arrivals and future proposers face enormous psychological pressure knowing that their loved ones have been left in the camps or countries of first asylum facing potentially dangerous situations. The key to successful settlement is a sense of hope for the future and the leaving behind of past traumas. This will be denied to families who have not arrived intact. Humanitarian entrants who have been forced to leave family members behind are far more likely to suffer psychologically and present with psychiatric problems much more regularly than those who have arrived with a complete family.

Humanitarian entrants face not only psychological pressure but also are subjected to high expectations from family members wanting to be sponsored to come to Australia. They also experience considerable financial pressure when they sponsor family members. All these circumstances impede effective settlement. It is well understood in the sector that those refugees able to have their family with them are likely to settle faster and more successfully. (See 5.2.5)

RCOA recommends that people proposing family members under the split family provision of the SHP be afforded priority application processing.

7.6.2 Migration advice

Consultations revealed that free migration and application advice and assistance for Special Humanitarian Program (SHP) applications is a shrinking resource, despite the increasing demand for non-fee charging migration agents. The funding available for migration advice through the Settlement Grants Program (SGP) has been reduced and it does not meet the increasing demand. The use of migration agents to lodge SHP applications can be crucial for the success of the application and for ensuring the system is cost effective for DIAC. However, non-fee charging migration agents are very difficult to access and there are very long waiting lists for legal aid to provide free migration advice. Private migration agents may be very costly and unaffordable for many humanitarian entrants, who often will incur high debts to access this service to be reunited with their family.

The application forms under the SHP are highly complex and difficult to complete adequately by many humanitarian entrants, who are unfamiliar with bureaucratic processes. However, humanitarian entrants unable to access non-fee charging migration agents or to pay for a private agent, often attempt to complete the forms themselves resulting in poor quality applications with essential data missing and subsequent high refusal rates. Community leaders report that they are often under pressure to assist with this task which they find very time consuming and sometimes difficult. The lack of free migration advice results in numerous repeat applications, additional work for DIAC and undue stress for the applicants.

RCOA recommends that funding be made available either through the Immigration Advice and Application Assistance Scheme (IAAAS) or a similar program, for non-fee charging migration agents to provide assistance to proposers under the Special Humanitarian Program.

7.6.3 The definition of family and dependency

A recurring issue throughout the consultations was the difference in cultural definition of what constitutes a family and of who are dependants. It is broadly acknowledged that the definitions of family and dependant generally understood in Australia do not necessarily correspond with understandings in other cultures.

This is a cultural difference that has serious implications for humanitarian entrants in Australia. They find it very difficult to understand the narrow interpretation of what constitutes a nuclear family (mother, father and children under 18). Refugees and other humanitarian entrants experience great anguish when this interpretation is applied, as it results in those they regard as family being rejected. Not being able to reunite with the people they consider their family and knowing that their loved ones are left in dangerous situations in camps or countries of first asylum constitutes undoubtedly the major obstacle for effective settlement in Australia. This situation also has financial implications for refugees and humanitarian entrants because they continue to send substantial amounts of money to their family overseas, impacting negatively on their own ability to settle here.

Several situations were identified through the consultations where a flexible approach to the definition of family and dependency is needed:

- Children who have been informally adopted by relatives or friends after their parents have died.
- Adults unable to sponsor children over 18, even if they consider them to be dependants – as is often the case with unmarried children and widowed or divorced daughters.

- Unaccompanied minors who have reached majority while in Australia being unable to sponsor their families successfully. This situation has recurred among Temporary Protection Visas (TPV) holders who arrived as minors.
- Former TPV visa holders unable to sponsor children that have reached majority while they have been in Australia
- People in same sex relationships.
- Dependent relatives who do not meet the “aged” qualification.

Based on information provided at the consultations, there seem to be different standards of flexibility and consistency between overseas posts when processing SHP applications with regard to the interpretation of the definitions of family and dependency.

RCOA reiterates its position from previous years seeking a reconsideration of the constitution of a family and the definition of dependency under the Special Humanitarian Program. We believe that the notion of a family should be based in the concept of dependency and includes cultural interpretations. The concept of a nuclear family should not be based solely on blood considerations. Economic and psychological dependency should be included in a culturally acceptable understanding of family for refugee and SHP entrants

RCOA recommends:

- ***That greater flexibility be exercised with family composition and the definition of dependency and this be communicated to both on-shore processing offices and overseas posts.***
- ***That, when assessing family applications, the recommendations from the UNHCR Resettlement Handbook be followed and demonstrated dependency be the governing principle in determining the eligibility for inclusion in resettlement cases and the SHP, and therefore:***
 - ***culturally adopted children be regarded as family; and***
 - ***proposers be able to sponsor family members that are dependent on them.***
- ***That the eligibility criteria to sponsor family under the SHP for former TPV visa holders be based on the situation when the person was first determined to be a refugee and given a TPV and therefore:***
 - ***Former TPV holders who arrived in Australia as unaccompanied minors and have now reached majority be able to sponsor their parents; and***
 - ***Former TPV holders be able to sponsor children who have reached majority while they have been in Australia.***

7.6.4 Use of DNA testing

There are several concerns about the use of DNA testing including:

- It appears not to be used as a measure of last resort.
- The cost of the test is high and applicants required to take it face a financial burden.
- It delays processing times.
- The outcomes of the tests are not always accurate when used to prove nephew or niece relationships.
- It might cause undue stress on applicants; for instance, it can reveal the presence of children who have been born as a result of rape.
- Cultural and religious sensitivities may prevent applicants from understanding the test.

It is acknowledged that the use of the test continues to have value in some cases. However, it is extremely important that issues of uncertain paternity are treated with confidentiality and in a culturally appropriate manner so as not to expose women and children to violence and discrimination.

RCOA recommends that DNA testing for SHP entrants only be used in exceptional cases, with:

- ***the costs to be covered under the medical assessment; and***

- ***the information resulting from the test to be managed in an appropriate manner.***

7.6.5 Decision-making criteria

The decision-making process for SHP applications is perceived as being ad-hoc, unfair and lacking transparency by many in refugee communities. Participants in the consultations noted what they saw as a trend towards focusing on effective settlement and connections in Australia, rather than on need or persecution, when deciding on the success or otherwise of a SHP application. Lack of knowledge of DIAC's priority areas among proposers, applicants and migration agents contributed to this perception.

A common concern was the lack of detailed feedback in refusal letters for SHP applications. The reasons for rejection are perceived as being vague, inappropriate and not related to the particular case. This causes distress to applicants who cannot understand what was wrong with the application. Therefore, repeat applications are made, clogging the system and leading inevitably to further rejections. In other cases, applications are made under Freedom of Information to obtain more detailed reasons for the refusal in order to assist second applications. It is not uncommon now for Freedom of Information requests to take six months or more.

RCOA understands the administrative and financial implications of implementing a system providing detailed feedback on a case by case basis. However, the long term benefits of a system working more effectively in practice and not becoming clogged by successive incomplete applications lacking necessary information should also be considered. There is a need for greater precision in defining the criteria for applications.

RCOA recommends:

- ***That all SHP proposals be assessed purely on humanitarian need, with priority given to reuniting split families; and***
- ***That a system of detailed feedback for refusals of SHP applications on a case-by-case basis be implemented.***

7.6.6 Use of family stream visas for family reunion

The consultations this year reported an increased number of humanitarian entrants using family stream visas rather than 202 visas to bring their close family to Australia. The reasons given to explain this were delays in processing for 202 visas, lack of information from overseas posts and misleading information received at some local DIAC offices. Distressed applicants are using any possible means to be reunited with their family sooner, including the use of available visas falling outside the humanitarian program remit. This trend is worrying considering that:

- close family members often come from the same refugee situations as the applicant;
- already financially overstretched applicants have to bear greater costs to apply for a family stream visa;
- family stream visas have much reduced entitlements and limited settlement support, in comparison with SHP visas; and
- people entering on a spouse visa face the risk of removal if the relationship breaks down.

(See 5.2.5 and 7.6.1)

RCOA recommends that the family members of humanitarian entrants who meet the requirements under the split family provision of the SHP, but have entered Australia with another visa, be eligible for the same entitlements and subject to the same conditions as those who have entered the country under the split family provision and therefore are not asked for an assurance of support.

7.6.7 Travel loans

The changes to the travel loan scheme administered by the International Organisation for Migration (IOM) have undoubtedly been an improvement on the past. However, IOM travel loans are not without their own problems including:

- Not all proposers are aware that they can access the loans through IOM and many people still prefer to go through community channels, even if they have to pay high interest rates.
- There are not enough loans available and some potential proposers find it difficult to comply with the criteria for accessing the loans (e.g. unaccompanied minors).
- There is an enormous financial burden for new arrivals attempting to settle successfully in Australia in covering the cost of the loans. This can impact negatively on their settlement outcomes.
- The 35% deposit remains prohibitive for many proposers.
- Loans are only available to health care card holders and so are inaccessible to many proposers.
- Fifteen months is a short period for repayment of the loan for humanitarian entrants facing countless financial pressures.

RCOA believes that DIAC should reconsider covering the full cost of the airfare for entrants under the SHP. This would reflect in more effective settlement for humanitarian entrants, a monitored and coordinated arrival process for 202 visa holders, less financial pressure for proposers and a decreased incidence of proposer support breakdown.

RCOA recommends that the full cost of the airfare for humanitarian entrants arriving under the SHP be covered or, alternatively, enhanced access to interest-free financial services for humanitarian entrants be available to assist in meeting travel costs.

7.7 Woman at Risk Visa Applicants

7.7.1 Eligibility criteria

Greater flexibility is required around the processing of the subclass 204 visa due to the complexities often associated with this category. As a rule, Australia excludes cases where there is a male relative present. UNHCR on the other hand accepts that a woman can be at risk even if a male family member is present, especially where he is unable to protect the woman from the violence or abuse she is exposed to, or where he may in fact be the perpetrator. RCOA believes that Australia should reassess its selection criteria so that it is more closely aligned with the UNHCR's intent and international practice.

RCOA recommends that the eligibility criteria for the Woman at Risk visa be revised to prevent automatic exclusion of women who have a male family member present.

7.7.2 Time limits

Flexibility is also required with regard to the eligibility period before subclass 204 visa entrants can sponsor spouses. The reality of the refugee experience means that some husbands thought to be dead or missing will later be found and reunification sought. Cultural misunderstanding also plays a role in the application process with the term "separated" being taken in the more literal sense, resulting in women being accused of fraud when they attempt to reunite with their husbands.

RCOA recommends that the time limit on allowing Woman at Risk entrants to sponsor a spouse or intended spouse be applied with discretion on a case by case basis, in order to prevent unnecessary distress to genuine applicants and their children.

7.8 Australian Cultural Orientation Program (AUSCO)

There is little doubt that the pre-embarkation cultural orientation program (AUSCO) is having a significant and positive impact on early settlement in Australia. RCOA reiterates its support for this initiative and commends its implementation. We also welcome DIAC's current review of the

AUSCO Program and its enhancement through increasing the length of the courses and through targeted and culturally appropriate curriculum development.

7.8.1 The content and implementation of the pre-embarkation program

Participants in the consultations broadly acknowledged AUSCO's usefulness and cited several positive aspects of the program, including the video containing practical information about life in Australia (e.g. how to shop, how to catch a train, kids attending a local school, etc). It was acknowledged that the video and the orientation help to form an image about life in Australia that is valuable from the entrant's perspective.

However, there were several concerns about the content of the program and the expectations that it creates. The information delivered was criticised for not being comprehensive on some topics. It was also noted that some of the information was not applicable across all geographic places in Australia. This has resulted in some unrealistic expectations. Suggestions were made to include additional topics perceived to be useful for prospective entrants. These included housing, employment and Australian law and customs. These will be discussed further below. The challenges involved in settling in a new country were also considered to be dealt with insufficiently.

RCOA acknowledges the difficulties of implementing and delivering a program containing information about different lifestyles and realities in a country as diverse as Australia. The delivery of IHSS services is different from state to state and region to region, with settlement services differing depending on where entrants are settled. Settling in an urban area is vastly different to settling in some country areas where there is a dearth of health, housing and employment services.

One of the most talked about topics was housing. It seems that many entrants are disappointed by the standards of housing once they arrive in Australia. This happens when they compare their allocated accommodation with what was shown in the video. There are also misconceptions about the accessibility of public housing and the payment of rent. It was suggested that the information about housing needed to be clearer, particularly in relation to the eligibility criteria and availability of public housing and the meaning of private rental.

Employment was another area of concern particularly with regard to misconceptions about the realities of accessing the labour market in Australia and the challenges this presents. This ties strongly to preconceptions about the standard of living in Australia and how easy or difficult it is to attain living standards as presented in the sessions and videos. It was considered desirable to include particular information about the settlement challenges that new entrants will almost certainly face upon arrival.

Participants considered that the program should deal more extensively with Australian law and customs. New entrants need to be introduced to the idea of rights and responsibilities of citizens. They should also be introduced to the concepts of child protection, social equality of men and women, appropriate parenting and family law issues. The issues relating to Australian law and custom are a complex area needing special attention. The resettlement process places a great deal of strain on family relations. Australian law and behavioural patterns can be perceived to undermine traditional power structures and can result in family violence or complete family breakdown. Information regarding laws and rights and responsibilities needs to be presented with sensitivity. Ample support for humanitarian entrants going through this enculturation process should be provided to all family members.

Returning to the current AUSCO Information sessions, participants in the consultations were concerned that trainers who have never been to Australia were conducting some of the classes. It was considered highly beneficial to involve previous humanitarian entrants in some capacity within the orientation. This would facilitate the presentation of a more balanced idea of the experience of being a newly arrived refugee and assist in preventing misconceptions.

RCOA recommends making greater use of refugees who have already settled in Australia, as part of the AUSCO process. This could be achieved by featuring resettling refugees in video presentations and employing people with refugee backgrounds to deliver the

program. Alternatively, DIAC could bring current instructors to Australia for an exposure visit and induction.

7.8.2 Coverage and accessibility

Concerns were raised about the lack of uniform standards in the provision of the pre-embarkation program. This was reflected in different lengths, levels of accessibility and coverage depending on the country where the classes were held. A large number of humanitarian entrants (mainly 202 visa holders) seem to be arriving in Australia without having attended AUSCO classes. The program is available to all entrants but not compulsory. Some of the reasons provided for not attending the orientation program were difficulties in travelling to the classes and associated costs, childcare issues and security concerns. Interpreters were reported to be available but sometimes not able to speak in a specific language or dialect which reduced the ability of some participants to fully appreciate the information.

RCOA recommends that AUSCO be made as accessible as possible to all humanitarian entrants and that, when necessary, participants be provided with additional assistance with interpreting, travel costs and childcare and be assisted to travel safely to the course venue.

7.8.3 Communication channels

Many service providers in Australia are unfamiliar with the contents of the AUSCO program. Entrants report receiving mixed messages and information in Australia that conflicts with what they were given pre-departure. This indicates that effective channels of communication between the International Organisation for Migration (IOM), which delivers AUSCO, and settlement providers in Australia are lacking. This is of concern because local providers need to be well informed in order to provide consistency in responses to new arrivals and reinforce the information entrants have already received. RCOA believes that regular dialogue between the settlement sector, IOM and DIAC in relation to AUSCO is highly desirable to inform the pre-embarkation program, so that it continues to adapt to changing needs and the provision of services. This could be part of the existing annual national conference of IHSS providers or a more dedicated six monthly teleconference to discuss AUSCO specifically.

RCOA recommends that a formal process be established to ensure that the settlement sector is fully informed and consulted about AUSCO's content and implementation.

7.8.4 Post arrival orientation

Participants in almost every consultation around the country mentioned the need to implement a program of post arrival orientation in Australia as a follow up to AUSCO. Post arrival orientation would bring important benefits, reinforced and consistent messages, effective learning, reduced confusion and better understanding of settlement issues for new entrants to Australia.

There is a natural limit to how much information an entrant can absorb before departure. Refugees and other humanitarian entrants have had little or no experience of life in a country with a western lifestyle and democratic systems and find it difficult to understand the marked differences between life in the camps and life in Australia. This is compounded by the anxiety that entrants feel before travelling, the huge life changes that they are experiencing and also by issues of unresolved trauma. The information at a post-arrival orientation would make more sense and be more easily understood. Post arrival orientation could be enhanced by additional information for entrants in different formats – e.g. video, radio, brochures, welcome packs, etc.

RCOA believes that integrating pre and post arrival orientation would help entrants to understand the information provided pre-departure and would significantly enhance their settlement prospects.

RCOA recommends that an integrated post arrival program be established to complement AUSCO in addition to the existing IHSS.

7.9 Interdiction and Offshore Processing

RCOA continues to have grave reservations about offshore processing of asylum seekers and once more states unequivocal opposition to this practice. While we welcomed the withdrawal of the Migration Amendment (Designated Unauthorised Arrivals) Bill which would have prevented any asylum seekers who arrived on the mainland from being processed under Australia's refugee determination system, we remain deeply concerned about the continuing processing arrangements in place on Nauru and Christmas Island, in particular the difficulties associated with legal access and indefinite detention.

RCOA recommends:

- ***That Australia reverses the policy of excised territories and ensures all asylum seekers who arrive in any part of the Australian territory have the right to seek asylum in Australia and be given full access to Australia's refugee determination process.***
- ***That asylum seekers be processed on the mainland where they have full access to legal representation and other support.***

7.10 Mandatory Detention and Community Release

RCOA welcomes the reintroduction of case workers within DIAC to work with complex cases including asylum seekers in detention. It also welcomes the use of residence determinations and the new community care pilot, which allow families and other detainees with complex needs to be released into the community with support. Despite this progress, the punitive policy of mandatory non-reviewable detention continues and releases are at the discretion of the Minister, with no formal process established. The impact of immigration detention on the wellbeing and mental health of asylum seekers has been well documented and there is a cruel irony in waiting for detainees to exhibit signs of mental illness before releasing them. RCOA argues that there is a strong economic reason to release asylum seekers from detention once the initial security and health checks have been completed. Firstly, the actual cost of supporting an asylum seeker in the community is significantly lower than keeping them in detention. Secondly, should the asylum seeker be granted protection in Australia, the State must beat the economic costs associated with the long term impact of detention. The physical and mental health deterioration of those who have been detained for long periods has been well documented.

RCOA recommends that the policy of non-reviewable mandatory detention be abolished.

7.11 Asylum Seekers in the Community

7.11.1 Visa Conditions

As previously noted, the use of community-based detention through residence determinations and the introduction of the community care pilot has meant that some asylum seekers are given the necessary support and assistance that they need to live with dignity in the community while their protection case is assessed. However, this has highlighted the needs of other asylum seekers who are left with little or no support.

Over the past few years, it has become increasingly difficult to make sense of the different visa conditions and entitlements available to asylum seekers and failed asylum seekers in the community. For example, a failed asylum seeker who is given a Removal Pending Bridging Visa (RPBV) or a former Temporary Protection Visa (TPV) holder who is found to no longer require protection and is given a Return Pending Visa (RPV) are permitted to work and have access to some Centrelink benefits and Medicare. Those asylum seekers released into community detention on a residence determination have some restrictions on their movement and the right to work but have all their needs fully paid for by the government including housing. At the opposite end of the scale, there are community based asylum seekers who are denied the right to work, Medicare and income support and rely entirely on charity while their case is being determined. The end result is

that, in some cases, failed asylum seekers are afforded better conditions than asylum seekers who are still going through the determination process, many of whom are later recognised as refugees.

RCOA has indeed welcomed the better conditions and extra support provided by these visa categories. Our position is to seek parity for all asylum seekers in the community. The punitive policy of allocating Bridging Visas with no work rights to asylum seekers who are affected by the 45 day rule or asylum seekers who have requests with the Minister on humanitarian grounds, causes a great deal of suffering. Living in poverty and reliant on charity for extended periods of time can have a major implication for the settlement process of those recognised as refugees. The experience can also impact on the ability of failed asylum seekers to raise the necessary funds to make preparations to leave. This policy puts great strain on community and voluntary organisations which do not have the resources to provide the safety net for these vulnerable people.

In May 2006, the government began a review of bridging visas. Many organisations (including RCOA) gave feedback and ideas. At this stage, the outcomes of this review have not been released and RCOA trusts that the government will use this opportunity to correct the current disparity in conditions for community based asylum seekers. RCOA believes that there is an urgent need for consistency between visa conditions and entitlements.

RCOA recommends that asylum seekers living in the community be given the right to work and access to Medicare for the duration of the refugee determination process, including requests under Section 417 of the Migration Act.

7.11.2 Asylum Seeker Assistance Scheme (ASAS)

The Government has, for some time, argued that community based asylum seekers have access to income support through the Asylum Seeker Assistance Scheme (ASAS) administered through Red Cross. While the narrow eligibility criteria for ASAS has never fully addressed the needs of all community based asylum seekers, the changes to processing times have had the unexpected consequence of reducing eligibility further. ASAS is only available for asylum seekers who have been waiting six months for their claim to be processed. The new 90 day processing limits at DIAC and the Refugee Review Tribunal (RRT) have meant that the only way asylum seekers can now access ASAS is if they meet the exemption criteria. These criteria are even more restrictive than the standard eligibility criteria and require individual approval from DIAC.

RCOA recommends that the current eligibility criteria for ASAS be reviewed in light of newly prescribed faster processing times for primary and review decisions.

7.11.3 Community Care Pilot

The Community Care Pilot, while slow to be implemented, is now proving itself to be an effective way of providing the necessary support to asylum seekers and others who have complex needs. This project is particularly appropriate for asylum seekers who, due to their pre-migration experience, have often experienced levels of trauma and dislocation that separate them from the general migration caseload. However, as it is at this stage only a pilot, it lacks the capacity to address the needs of many DIAC clients with complex problems. The sector would welcome DIAC taking the next step and committing fully to continuing and expanding the pilot, to ensure that asylum seekers with complex needs are provided with the appropriate level of support in accordance with Australia's international obligations.

RCOA recommends that the Community Care Pilot be continued and expanded into an ongoing program.

7.12 S417 process

The Migration Act provides under Section 417 an opportunity for failed asylum seekers to request the intervention of the Minister on humanitarian grounds. As part of the recent Bridging Visa Review, RCOA also raised a number of problems with the s417 process. Many of these problems related to the discretionary, ad hoc and non reviewable nature of the power and the absence of a system of complementary protection. (Please see section 2.4.8)

RCOA recommends that the Minister's powers under Section 417 of the Migration Act be reviewed, with a view to making the process fairer and more transparent.

7.13 Temporary Protection Visas

As previously noted, RCOA does not support the use of temporary visas for Convention refugees. The restrictions on entitlements and travel attached to this visa breach international obligations and the requirement that refugees must re-prove their claim goes against international practice and the intent of the Refugee Convention. Most significantly the denial of family reunion for the duration of this visa is questionable under a number of international instruments to which Australia is a signatory including the Universal Declaration of Human Rights, the UN Covenant on Economic, Social and Cultural Rights, and the Convention on the Rights of the Child.

RCOA recommends that, while the use of temporary visas for Convention refugees continues:

- ***These refugees be afforded the same rights and entitlements as given to those receiving permanent protection, including rights and entitlements to travel and family reunion.***
- ***In the absence of the use of UNHCR's cessation clause, all temporary protection visa holders automatically receive permanent protection without having to undergo a second status determination when their temporary visa ends.***

8. Settlement Issues

8.1 Integrated Humanitarian Settlement Strategy (IHSS)

8.1.1 Communication and transition from IHSS to other settlement services

Communication and cooperation within the settlement services sector have improved substantially in some parts of the country, following the upheaval associated with the commencement of the new IHSS tender in 2005. Organisations participating in the consultation process for this submission reported better communication between IHSS and the settlement and mainstream service sectors, and more formal mechanisms for joint work in some states and regions. Referral protocols (formal or informal) between IHSS and other services appear to be improving and the transition from IHSS to other settlement and mainstream services seem to be working better in some areas.

However, there is still no common or uniform standard for referrals and some service providers continue to report a patchy transition from IHSS. Some in the sector believe that the IHSS model creates the circumstances in which IHSS services are more likely to work in isolation from other services – the “silo effect”. Nonetheless, it was acknowledged that procedurally the relationship between IHSS and the settlement services sector has definitely improved. However, there remains much work to do in terms of recovering mutual trust.

In some states, there seems to be an endemic problem of mistrust and lack of communication and cooperation between IHSS and the settlement and mainstream service sectors. Sadly this is impacting heavily on humanitarian entrants who seem to be caught in the middle of this situation. In these states, there is lack of a clear understanding of who is doing what, absence of partnership work, duplication of services and a lack of transition arrangements between IHSS and the settlement sector.

RCOA trusts that DIAC will ensure that these problems are properly addressed. The nature of the settlement process is such that no single agency can provide effective services in isolation from the rest of the sector.

RCOA recommends:

- ***That there be consistent service provision under the Integrated Humanitarian Settlement Strategy (IHSS) across states.***
- ***That IHSS providers establish referral protocols with local settlement providers where such protocols do not exist.***

8.1.2 IHSS Timeframe

There was clear consensus that the support timeframe of services provided through IHSS needs to be flexible and the level of service needs to be individually assessed.

It is widely acknowledged that current humanitarian entrants may require an enhanced level of support as a result of their traumatic background and complex needs. The provision of IHSS services for six months is perceived by the sector as being inadequate and making it difficult to properly address the needs of current humanitarian entrants.

Some concerns were raised that refugees were exited from IHSS before they were ready and found the transition from “intense support” to “needs only support” extremely difficult. Exit procedures were reported differently in each state, with some states being more inclined to extend the IHSS service to 12 months while others were exiting entrants at six months.

RCOA believes that adequate resources need to be channelled into the settlement sector to ensure consistency in service provision and to guarantee that the services provided are responding to the needs of humanitarian entrants. The proposed Complex Case Support Network (CCSN) may assist in addressing some of the concerns of vulnerable refugees and RCOA welcomes this

initiative. However, extensive consultation with the sector about the CCSN and how it will work in practice is important to its long-term success.

RCOA recommends that DIAC reconsider the six month timetable for intensive settlement support and that IHSS be funded for 12 months.

RCOA recommends that further consultations be held with the settlement sector about the delivery model of the proposed Complex Case Support Network (CCSN).

8.1.3 Casework support and the IHSS tender

RCOA acknowledges that there is a marked difference in service provision across different IHSS providers in different states throughout Australia, and therefore generalisations are difficult.

The IHSS service is perceived by some in the sector as operating on the ground as a basic system, not providing desirable levels of case work support. The service is viewed as a “one size fits all approach” and was criticised for focusing on quantitative indicators rather than clients. Some participants described the IHSS exiting process as a system of “ticking boxes”.

In some situations, a lack of flexibility has prevented professional service delivery and has added pressures on other settlement providers to provide a service to clients who are not receiving the service they need from IHSS providers. Some problems mentioned were:

- Lack of communication with clients;
- Difficulties for clients to contact case workers;
- Inadequate one to one service to clients;
- Lack of cultural sensitivity in service delivery; and
- Lack of support in practical issues of day-to-day life including the use of household appliances.

RCOA notes that this is by no means applicable to all services and that conversely some IHSS providers are doing more than their brief. Some consultations reported IHSS’s strong involvement of volunteers and community support in some states and very good standards of service delivery. However, in these situations, it was noted that caseworkers and volunteers were often overstretched and at risk of burnout.

RCOA believes that additional resources for the IHSS would be highly beneficial. This would improve standards of service, provide more accessible casework support and give some relief to case workers and volunteers working on the ground. Additionally, further research is needed on the real cost of services in order to develop clear benchmarks of service provision.

RCOA recommends:

- ***That a process for ongoing quality management, review and evaluation of service provision be established and appropriate benchmarks be developed for the IHSS.***
- ***That IHSS services have the flexibility to provide additional casework support to high needs entrants and that a monitoring system be put in place to ensure they are receiving the services they require.***
- ***That additional resources be channelled into the IHSS to enhance its standards of service provision and casework support.***

8.1.4 Relocation between states (Secondary Movement)

Concerns were raised about the implications for service delivery of humanitarian entrants relocating from one state or territory to another, or even from one region to another within the same state. It is often the case that refugees with family or friends in Australia decide not to mention these links prior to their arrival. They feel uncomfortable telling IOM about their preferences to go to a particular city or state because they fear their visa might be jeopardised. Therefore, many refugees relocate after arrival, which may result in one or more of the following complications:

- Loss of part of the IHSS service;
- The added expense of having to pay for their own internal flights;

- The interruption of the initial housing tenancy arrangements and the associated difficulties with finding housing again in other states; or
- Loss of the household formation package, which is a one-off service.

RCOA acknowledges that a system for state to state transfers has recently been put in place and there have been improvements in the transfer of funds from DIAC between IHSS providers. However, we believe that the key is to improve the way the system works prior to arrival in order to minimise internal transfers and avoid problems for both the refugee and for the service provider.

RCOA recommends that a system be developed to encourage refugees to declare their links in Australia prior to arrival, to ensure that the most appropriate location for initial settlement is chosen.

8.2 Proposer Support for SHP entrants

The successful operation of the Special Humanitarian Program (SHP) is predicated on the community being able to share the responsibility for settlement support. While this has worked fairly successfully in the past, there are a number of reasons why changes to the program are now needed. With the shift in the refugee program towards Africa we are seeing with this caseload a great deal more pressure and obligation to sponsor family and friends left behind in camps. Refugees are becoming proposers earlier, while they themselves are still moving through the settlement process. In fact, the process of proposing family and friends due to cultural obligations has become, in itself, a vital part of the settlement process for many refugees and humanitarian entrants. Settlement workers reported the difficulty in bringing family members left behind in camps to Australia as the biggest obstacle to successful settlement.

It was clear from the consultations that there is not enough support available to new arrivals under the SHP. DIAC is already funding part of the SHP; however, new entrants are often unaccounted for and left without support on the ground when proposer support breaks down.

There seems to be confusion over who provides support and how that support is provided to SHP arrivals. As settlement support is mainly the responsibility of the proposer, there is no way of monitoring whether the support provided is adequate. There also seem to be major discrepancies between the ways in which different states respond to the situation of SHP entrants when proposer support breaks down. In some states (particularly in rural areas), there is a clear agreement between proposers and the IHSS provider on roles and responsibilities. In some cases, there is community support available through volunteers. In these areas, IHSS and community organisations are doing more than their brief with regard to the settlement of SHP entrants, though there is a risk of burnout due to the unaccounted for and extensive workload.

Conversely, in other states, SHP entrants seem to be failing to receive help when proposer support breaks down, with IHSS services unable to account for them or to support them. This seemed to be partly due to SHP entrants not being assessed on arrival and IHSS providers contacting only the sponsors. Several examples were given of entrants falling out of the support system.

RCOA believes that the proposer system is not working adequately, either for the proposer or for the SHP entrant, and that more coordination is required for the settlement of families arriving under the SHP. RCOA would welcome DIAC considering its submission to the Australian Government discussion paper, "Measures to improve settlement outcomes for humanitarian entrants". This submission outlines an alternative support model for SHP proposers and entrants.

RCOA recommends

- ***That all SHP entrants complete a needs assessment process, linked to the full IHSS service.***
- ***That DIAC develop a national network of volunteer SHP support groups and specialised SHP support agencies as outlined in the model developed in RCOA's submission to the recent Government discussion paper "Measures to improve settlement outcomes for humanitarian entrants", to provide support to SHP proposers and entrants (see Appendix 1).***

- ***That DIAC adopts RCOA's proposed five step model linking SHP proposers, new arrivals and volunteer or specialised agencies under appropriate settlement plans as outlined in RCOA's submission to the Government discussion paper: "Measures to improve settlement outcomes for humanitarian entrants".***

8.3 Woman at Risk entrants

Selection for the Woman at Risk program is based on the particular vulnerability of the entrant, yet there is no specific settlement response for these entrants. The majority of 204 visa holders have more intensive settlement needs than other humanitarian entrants because the majority have been the victims of torture or other violence. In addition, many are heads of families without support networks and experience severe financial hardship. Childcare responsibilities further exacerbate attempts to find employment or to learn English.

RCOA recommends that settlement support through the IHSS and Settlement Grants Program (SGP) be tailored to the specific needs of Woman at Risk entrants.

8.4 Post TPV Caseload

The devastating impact of the TPV regime has been well documented. The policy is now moving into a new phase with the majority of the large Iraqi and Afghani caseloads moving on to permanent visas. RCOA is extremely concerned about the impact of delayed settlement on these people. The denial of settlement support has meant that many former TPV holders are now unfamiliar with their new entitlements and are not linked to settlement services. For many there is, in fact, a distrust of the services that previously denied them access. As well as having missed out completely on the intensive settlement support provided under the IHSS, former TPV holders who have spent time in detention and, thus have been in the country for more than five years, are technically no longer eligible for general settlement services.

The impact of the TPV regime means that there is a strong need for settlement services and projects that specifically address the needs of former TPV holders. Young people, particularly, have suffered as a result of this policy, with very little support or assistance with education resulting in many feeling disengaged with society. Information about services and supports for refugees receiving permanent visas needs to be directed to both the former TPV holders themselves and also the groups and services (often voluntary) that have assisted them in the past. This will assist in the transition to mainstream services.

One of the most pressing of these needs is for support in the process of reuniting with family. Having been denied family reunion for an extended period of time, most former TPV holders are now eager to be reunited with their families. Assistance is needed both at the application stage to ensure that these families are given the highest priority and also at the settlement stage. As a direct result of government policy, former TPV holders will be reuniting with spouses and children that they have not seen for between three and 10 years. The separation will have undoubtedly had an impact on roles and relationships within the family, requiring a renegotiation of roles once the family arrives. Former TPV holders may feel guilt at what their family has been through during the separation and families may have unrealistic expectations of life in Australia. As quite a number of the men have settled in rural areas, there is growing concern about the level of isolation that their wives may experience when they arrive. The Government has a responsibility to provide these families with the level of support that they need to ensure that the transition to living as a family unit again is as smooth as possible.

RCOA recommends

- ***That all former TPV holders be eligible for settlement services including the Adult Migrant English Program (AMEP) and that funding be provided to establish projects and services that specifically address the settlement needs of former TPV holders and their families.***
- ***That families of former TPV holders entering Australia under the "split family" provision of the SHP be eligible for the full range of IHSS support.***

- ***That information about the services and supports now available to former TPV holders be distributed to them as well as to the organisations and groups which had previously provided support.***

8.5 Health

8.5.1 Access

The national consultations for this submission highlighted the difficulties in accessing appropriate health care in some areas of the country, especially rural and regional areas. In some parts of Australia, there are simply not enough general practitioners (GPs) available. There are great disparities between different communities and even different states in levels of access to health services.

Accessing appropriate healthcare is aggravated by the reluctance of some medical practitioners to provide a service to refugees. Many cases were reported of GPs lacking understanding of refugee issues or of how to provide an appropriate service to refugee clients. Challenging issues included:

- GPs not using culturally appropriate practices;
- Refusal to use interpreters in the consultations, creating a risk management issue on the ground; and
- Lack of knowledge of endemic illnesses in Africa and Asia.

In some states it was reported that caseworkers have to make an average of four telephone calls before finding a GP willing to provide a service to refugees. There is documented evidence that some GPs refuse to treat refugees. This is clearly discrimination and is resulting in refugees not receiving the quality of medical services required for their health and wellbeing.

There are also a number of cultural barriers to accessing appropriate health care. Some refugees are not used to appointment systems or are unfamiliar with preventative healthcare. Many refugees refuse to see a GP unless they are ill and often prefer to drop in and wait or to use emergency departments. RCOA believes that the implementation of targeted programs explaining the preventative approach to healthcare in Australia would be beneficial. Preventative health issues should also be included in pre-embarkation and post arrival orientation.

Overall, the difficulties involved in access to GPs results in more pressure on Accident and Emergency (A&E) services because they become the main port of call for medical problems. Staff of A&E services are rarely trained to deal with the specific needs of refugees. Finding bulk billing GPs in rural and regional areas is also a challenge, placing additional obstacles in accessing adequate healthcare for refugees. Limited public transport is also identified as problematic, resulting in a high number of missed appointments. Volunteers and caseworkers are often overburdened assisting entrants to make and keep medical appointments.

RCOA recommends

- ***That adequately funded Refugee Medical Clinics with interpreters on site be established in all states to address the specific needs of refugees and that national benchmarks be established for health service provision for newly arrived refugees and humanitarian entrants.***
- ***That training for GPs and key staff in hospitals (particularly A&E services) on refugee health be made available and that information about training activities be circulated to health service providers.***
- ***That DIAC explore the inclusion of “refugee health access and development workers” in the next IHSS tender to improve access to GPs, particularly in areas where transport connections are poor.***

8.5.2 Assessment

RCOA acknowledges the improvements in the use of the health manifesto and the implementation of better communication and referral systems with settlement service providers. Participants in the consultations also welcomed the new Medicare items MBS 714 and 716, for health assessments for refugees and other humanitarian entrants in general practice, as a positive initiative. However, this change is limited in its implementation as it covers only a single visit to the GP, within 12 months of arrival and does not involve compulsory use of interpreters.

Additionally, there were many reported cases of new entrants not receiving any post-arrival assessment, or receiving it several months after arrival. The requirements of the IHSS contract are that refugees are seen by a doctor or nurse within seven days of arriving. However, in recent times funding for specialised services has been cut in some states, making this requirement impossible. This has resulted in a lapse of several months before there is a coordinated response to the health issues of a refugee. Decisions related to refugee health tend then to fall back on to case coordinators who are not medically trained to make these health assessments.

Health needs should be of primary concern for IHSS providers, considering that refugees come from situations where their health has been largely unaddressed for long periods of time. RCOA reiterates its position that a comprehensive health assessment should be compulsory for all humanitarian entrants on arrival for the following reasons:

- As a result of the situation in most countries of first asylum and life in the camps, refugees are not used to seeking help until the situation becomes acute.
- Serious diseases might not have been identified in the pre-departure health assessment and some diseases like malaria might not be initially apparent.
- A number of less serious health concerns that need to be addressed might not have been identified before departure to Australia.

It was also of concern that refugee children are taken to GPs only when they are ill, rather than the practice in Australia of the family doctor checking children for developmental milestones and general health. At present, there is no system of comprehensive health assessments for refugee children. This has resulted in many children not being fully immunised. There need to be targeted programs explaining the reasons for regular health checks and the need for immunisation for all children. RCOA believes that immunisation should be included under the Comprehensive Health Assessment.

RCOA recommends

- ***That the Comprehensive Health Assessment include full immunisation for children.***
- ***That refugees be able to access the Comprehensive Health Assessment within the first month of arrival in Australia.***

8.5.3 Dental services

Participants in the consultation agreed that dental health was a big issue for refugees. While accessing dental care has become difficult for many in Australia, it is of particular concern for refugees, who come from situations where dental health is a very low priority. There is little understanding of preventative dental practices. Many refugees find it difficult to access low-cost dental care and it was reported that waiting lists in some parts of the country were up to two years.

RCOA recommends that targeted programs addressing dental health needs of refugees be implemented and a dental assessment be part of the Comprehensive Health Assessment.

8.5.4 Sexual and reproductive health

Reproductive and sexual health is also an issue for refugees. Because of the differences in cultural backgrounds, refugees require culturally appropriate information and testing and treatment to encourage them to use available services. RCOA believes that there is a need to include sexual and reproductive health issues in post-arrival and in pre-embarkation orientation, together with general information about routine medical procedures such as the taking of blood for diagnostic

purposes. Education on pap smears, breast checks, birth control and access to contraception also needs to be provided.

There is a need for stronger Federal support for specialist refugee health services and better coordination of health services across all strands of government – federal, state and local.

RCOA recommends that the Comprehensive Health Assessment include information on sexual and reproductive health issues.

8.5.5 Mental health

It was reported that short-term torture and trauma counselling is delivering significantly positive results. However, access to these services proves to be a challenge in some states. Some services have waiting lists of three to six months for torture and trauma counselling. Rural areas, in particular, reported problems with accessing counselling services. This is mainly due to few workers covering large areas, long distances and travel difficulties. Unfortunately, this then limits the opportunity for ongoing treatment. In some rural areas, service providers expressed concern that family counselling was either unavailable or not culturally appropriate. While telephone counselling is an option, it is not considered to be very effective with this client group and holds little appeal for refugees.

Another issue raised was that counselling was culturally unacceptable to many refugees, particularly men. This poses challenges in terms of breaking down barriers to educate refugees about the benefits of counselling and providing culturally appropriate counselling.

Short term counselling mainly focuses on immediate settlement issues and how they are impacted by torture and trauma experiences. However, participants in the consultations identified the need for resources to address mental and emotional health issues which have remained hidden until later in the settlement process, often after the first six months. A need for ongoing long-term counselling was also identified. To avoid re-traumatisation, it was suggested that there should be continuity of care, wherever possible.

RCOA recommends that additional funding be made available to extend counselling services in all states beyond six months and that interpreters be available for this service free of charge.

8.6 Housing

By far the biggest issue raised this year in the consultations (after family reunion) was housing. With only a few regional exceptions, housing stood out as the issue of most concern to service providers, workers and refugees themselves. The move away from “on arrival” accommodation to complete reliance on the private rental market to meet the housing needs of new refugees has resulted in a number of complex issues.

Across Australia housing prices have continued to rise sharply. Rental vacancy rates in most capital cities are now at an all time low – especially at the affordable end of the market, where there is a lack of stock and increasing demand. This has occurred at a time when public housing is decreasing and eligibility has become increasingly restrictive in most states. Many analysts argue that we are currently in the middle of a housing crisis. While many Australians, not just refugees, are feeling the impact of the housing crisis, refugees are particularly vulnerable to market forces for a number of reasons.

When refugees arrive in Australia, it is the responsibility of the IHSS provider to find suitable private rental accommodation. The task of finding accommodation for new arrivals is becoming increasingly difficult in many states and territories, occupying a great proportion of case workers’ time. RCOA is concerned that the pressure to find accommodation is already resulting in refugees being placed in accommodation which is unaffordable and inappropriate. While the approach taken by services providers seems to vary from state to state, there are a number of pressing issues which RCOA believes must be highlighted:

- Refugees having to pay a large percentage of their income on rent from day one of arrival. In some cases, refugees arrive with an existing debt and lack any understanding of the cost

of living in Australia. Many lack budgeting skills. Refugees are often not used to paying rent and they are likely to experience financial hardship, as their main priority is to be able to send money back to family members overseas still living in dire situations.

- Refugees being asked to sign six and 12 month tenancy leases within days of arriving in Australia with no real understanding of what they are signing, of the rental accommodation system or of their rights and responsibilities.
- Refugees being placed in inappropriate housing because that is all that is available. This inappropriate housing includes sub-standard houses, housing well away from important local services, accommodation in motels (for up to four months) and caravan parks. Cases were also reported of split families having to live in different properties.
- Lack of support when the initial lease agreement has ended (and the refugee has most likely exited IHSS). Support may be required to access another property or to sustain the current one.
- Difficulties in filling in forms to apply for housing, particularly for illiterate refugees, and their lack of tenancy references when applying for rental accommodation.
- Discrimination in the private rental market by landlords and real estate agents on the grounds of family size, language, race and income status (Centrelink recipients), making it even more difficult for humanitarian entrants to access properties.
- Overcrowding particularly among SHP entrants, due to both affordability issues and lack of suitable housing for large families. This has, in many cases, caused situations of conflict and family breakdown.

The reliance on an unregulated market to meet the needs of potentially vulnerable humanitarian entrants is highly problematic. The private rental market offers very limited protections for tenants. Tenancy laws vary from state to state; however, at this stage no state has legislated minimum standards and there is little effective redress for discrimination by property managers. As refugees are forced to accept more marginal properties, this has an impact on other aspects of their settlement process. Low standard housing is generally less energy efficient than other housing, resulting in higher energy bills. Cheaper housing tends to be further away from the main service infrastructure, resulting in refugees having to travel further to access services. This, in turn, results in increasing dependence on public transport which is often infrequent, less reliable and more costly in more marginal areas. Action is needed immediately to improve the housing outcomes of refugees, as well as preventative measures to reduce their risk of homelessness.

RCOA recommends:

- ***That DIAC, in consultation with state agencies and other federal departments, develop a comprehensive housing strategy to address the specific needs of refugee and humanitarian entrants.***
- ***That funds be made available to cover the rent of new entrants for the first four weeks after arrival while they gain an understanding of budgeting and financial literacy.***
- ***That financial literacy training and basic training in rights and responsibilities under state tenancy laws be made available to all new entrants.***
- ***That IHSS providers “head lease” properties for the first six months so that refugees are not required to sign tenancy agreements until they have an understanding of their rights and responsibilities and so that refugees are not locked into a 12 month lease on a property which may be inappropriate.***
- ***That an education package be developed which addresses the issue of discrimination against refugees in the private rental market.***
- ***That funding be made available for a housing support service for refugee and humanitarian entrants in their first five years of settlement.***

8.7 Education and English language

8.7.1 English classes

Participants in the consultations for this submission expressed concerns about the length of the Adult Migrant English Program (AMEP), the way it is operating and its adequacy for the needs of some refugees. Participants agreed that AMEP is an integral part of settlement and critical to successful settlement. Other settlement issues are picked up and addressed through AMEP.

However, as a one size fits all service, AMEP is not catering for the very specific needs of some refugees, particularly those who are illiterate or have very little schooling. The AMEP contract stipulates that the curriculum must cover the four modalities of English concurrently: speaking, listening, reading and writing. It was clear from the consultation that this curriculum is too difficult for many illiterate refugees. Some of these students complete their AMEP entitlements (510 or 610 hours) and remain unable to write their names. This situation has further unintended consequences as refugees are also unable to access citizenship classes which require at least an AMEP level two.

RCOA believes that a system of separate classes for literate and illiterate refugees, using different teaching methods, should be developed further. There was strong support in the consultation for a system where illiterate refugees learn how to speak and listen before they are taught how to read and write. Priority needs to be given to communicating confidently in spoken English; reading and writing can be addressed later. A program designed for illiterate students could make greater use of conversation learning, visual and auditory aids (e.g. videos, TV, radio) and teachers aides who speak the students' native language.

It was also reported that other refugees feel obliged to attend English classes when their English level is already very good, because they are unaware that attendance is optional. This means that, in practice, people with very different skills and knowledge of English could be sitting in the same class. This is not conducive to effective learning. It is the opinion of RCOA that flexibility and the consideration of particular client needs are essential for the success of AMEP.

The Refugee Council recommends that a full review on the way English classes are operating be conducted examining the adequacy of the system for all refugees and the differentiated needs of some refugees.

8.7.2 AMEP's provision

There was a shared concern in the consultations that English classes do not necessarily prepare refugees for employment. Obtaining employment is one of the main priorities for refugees as part of the settlement process. Learning English is, in most cases, a pre-requisite for securing employment. It was seen as desirable to develop an "English for the workplace" program. RCOA believes that English classes through AMEP should include advanced and basic English, taught concurrently with vocational subjects for those ready for additional learning.

RCOA recommends that additional funding be allocated for the implementation of vocational English lessons through AMEP and that this initiative be developed in close consultation with the sector.

Other concerns raised included the difficulties mothers face in attending English lessons because of inadequate and inappropriate childcare facilities. This situation is particularly acute for female-headed households or women who arrive in Australia on a Woman at Risk (204) visa. It is often the case that these women are unable to attend English lessons at all, adding to their vulnerability and impacting negatively on their settlement prospects. AMEP receives funding for childcare services but the funding is not sufficient to meet the demand. When there is a crèche available, the waiting lists for accessing the service are very long. Refugees can access the Child Care Benefit through Centrelink, but the gap between this benefit and the fees of the day care centres is significant and, therefore, this option is unaffordable for newly-arrived refugees.

An additional concern was the lack of flexibility in the provision of childcare services particularly in rural and regional areas. Participants reported that some services required a minimum time for childcare, even if the English lessons were shorter. In other areas, childcare was not available.

RCOA recommends that DIAC and AMEP providers work together to develop a strategy for improving access to English classes for refugees with pre-school children, through, for example, additional child care subsidies, expanding crèche facilities at language colleges and enhanced multimedia education for home-based learning.

Other issues raised concerned AMEP providers' lack of flexibility in providing English tuition in rural and regional areas. Many refugees are unable to access and attend classes because work or school hours clash with class times or because of the general lack of childcare. Some refugees are placed in the difficult situation of having to choose between work or language classes. RCOA believes that this should not be the case. It would be highly beneficial if there was more flexibility in the way English classes are provided, including availability of classes outside work hours.

RCOA recommends that a more flexible approach to English training be developed in rural areas and additional options be provided for refugees.

8.7.3 Children and young people

Young refugees almost uniformly come from very difficult situations in which schooling has been highly disrupted or, in some cases, where there has been no schooling at all. They often have very limited English knowledge and many suffer from torture and trauma experiences. This often leads to frustration, confusion and the risk of dropping out of school. Young refugees and children have high educational needs which require special consideration.

There was a recurrent concern about access to English lessons and support for refugee children and young refugees. Education funding is provided for schools to have English as a Second Language (ESL) services, but standards are clearly inconsistent across the country. Most schools do not have these facilities and access is even more difficult in rural and regional areas.

This results in children and young refugees experiencing a feeling of alienation. In many cases, the only available option for many refugee children is to attend mainstream primary schools where there is no support for either the children or the teachers. Teachers are rarely trained to work with refugee children. In some cases, it has been reported that refugee children are seen as having behavioural problems and, at times, are excluded from class. Little consideration is given to the impact of the refugee experience and the difficulties faced by refugee children in mainstream schools. Even those children lucky enough to attend a language school often experience difficulties with the transition into mainstream schooling.

Another challenging issue is that children are being placed in classes based on their ages. However, some of these children have never attended a school previously. When placed at an academic level above their experience, they are unable to make effective use of the learning experience and suffer frustration and humiliation. RCOA believes that additional support is required in this area.

RCOA recommends

- ***That additional intensive English classes and additional support be provided to refugee children in mainstream schools.***
- ***That more funding and resources be targeted at ensuring a smooth pathway into the schooling system for refugee children and young people.***

The problem of accessibility of English lessons and additional support is far more acute in rural areas. It has been a longstanding concern that young refugees in rural areas are severely disadvantaged compared to their city counterparts in accessing English language tuition. In particular, young refugees between 15 and 25 years are hugely disadvantaged and are often unable to access English tuition at all.

In rural areas, there is often no access to Intensive English Centres. Young refugees under 18 years do not qualify for AMEP but the alternative system to provide English classes is mostly inaccessible for young refugees. With few numbers and young refugees arriving at different times, TAFEs are unable to justify the expense of providing classes. Therefore, young refugees often end up in mainstream schooling without understanding and/or support to learn English. Unfortunately, young refugees can't access the 510 hours of English tuition when attending school, but the equivalent English support at school is generally inadequate. Under this system, young refugees regularly leave school to raise money to help their families or migrate to the cities where they can find additional opportunities and access English tuition.

It is RCOA's view that a different support system for young refugees to access English lessons is required for rural and regional areas, where local needs and infrastructure differ greatly from those in urban areas. The system needs to be flexible and adaptable to different needs in order to ensure proper access to education opportunities and English tuition for young refugees.

RCOA recommends that a system which accommodates the needs of young refugees to access English tuition in rural areas be implemented and adequate funding be allocated for this purpose.

8.8 Employment and Income Support

8.8.1 Centrelink

Navigating the complex Centrelink system continues to be a significant problem for new refugees. Language barriers present particular challenges, with all correspondence from Centrelink in English and no support for filling in forms. Community agencies have continually raised the resource issue of having to provide lengthy support to refugees to assist them with filling in forms which they believe to be a Centrelink responsibility. The forms are complex and include standardised questions which are inappropriate for refugees. There is great risk that they will be filled in incorrectly if refugees do not receive adequate assistance. This can lead to delays in payments, incorrect payments and administrative breaches.

RCOA recommends that Centrelink commit additional resources to provide higher levels of support for refugee clients, including expanding the provision of application assistance.

8.8.2 Employment

All refugees arrive facing a range of settlement challenges of which employment is but one. However, for many refugees, expectations of work are high and employment becomes one of the major challenges. Whether refugees arrive with low levels of education and limited work experience or as highly educated professionals, all face a range of well documented barriers to employment well beyond those faced by the broader Australian community. Some of these barriers include lack of English skills, the long and difficult process of recognition of overseas qualifications, difficulties with translations of education certificates and previous work experience, problems with accessing work references, and discrimination from potential employers. For refugees to obtain employment which is sustainable and appropriate to their skill levels, many need support and assistance that is tailored to their needs. This is where the current system of Job Network providers is inadequate.

One of the issues raised in almost every consultation around the country was the inability of Job Network providers to address the specific needs of refugees. Reported lack of understanding and sensitivity to the pre-migration experiences of refugees, as well as the process of settlement, has meant that many refugees have had negative experiences with Job Network providers (e.g. a Job Network provider requiring illiterate clients to keep written diaries). The approaches of many providers seem to be incompatible with the requirements of high-needs clients. Cases have already arisen where Job Network providers have put employment above learning English and refugees have had to drop out of English classes in order to take on manual jobs which do not require English skills. This approach is extremely short-sighted and, while it may mean that the Job Network provider gets paid, it is not necessarily the best long-term outcome for the refugee. For

many refugees, poor English skills and lack of understanding of the Australian workplace prevent them from finding work in their chosen field. RCOA is concerned that a narrow focus on short-term employment outcomes, without consideration of skill levels or provision of appropriate support, will result in:

- Refugees, particularly those with professional backgrounds, being placed into low skill positions, rather than into training and courses or voluntary positions which may improve their chances of continuing their careers.
- Refugees being placed in positions which are unsustainable, which may lead to breaches, reduced self confidence and a reduction in their overall capacity to seek ongoing employment.

While the level of support will vary among refugees, there is need for a support service that can assist them in preparing for the workforce by refining their skills, improving their English, increasing their understanding of the local employment markets and gaining local experience. In many cases, this support needs to continue once refugees enter the workforce to help them navigate their way through the workplace and increase their chances of sustaining employment. While there are currently examples of successful projects which provide this level of support, the limited nature of current funding means that such programs are not available to all refugees.

RCOA recommends that research be conducted into the existing delivery models for supporting refugees into employment, with the intention of developing a flexible model that can be implemented nationally.

8.8.3 Rural and Regional Areas

High unemployment rates in many rural areas were reported as creating major challenges for humanitarian entrants. Consultation participants reported concerns that the lack of employment opportunities was resulting in refugees being locked into unskilled labour positions which reduced their opportunities for further education. The commitment to send money to family left behind is very strong and many refugees will travel to rural areas to take on low-skilled or seasonal jobs for that reason. In many rural areas, the main options are seasonal fruit picking or working in the abattoirs. Services reported significant drops in the numbers of refugees accessing their services during the fruit picking seasons. The intensity of the work and the lack of services in rural areas usually mean that services (including English language and counselling) are interrupted during this period.

Secondary movement of humanitarian entrants to rural areas where they can find unskilled or semi-skilled work opportunities has meant that some rural communities have experienced large influxes of refugees without the accompanying infrastructure and resources to support them. In most areas where refugees have been attracted by employment opportunities (again primarily seasonal fruit-picking or meatworks), there are no funded settlement programs. The sector reported problems with a lack of housing and overcrowding. Transport is another major issue. Workplaces which commonly attract refugees are often poorly served by public transport services.

RCOA recommends that DIAC explore ways of responding to the needs of refugees who have moved to rural areas to seek work.

8.8.4 Welfare to Work Changes

In the consultations, many concerns were raised about the Job Capacity Assessments (JCAs) which were introduced as part of the Welfare to Work changes. Participants in the consultation reported that refugees had to undertake a Job Capacity Assessment within days of arriving in the country. Sometimes, the appointments were in different parts of the city with different Job Network providers for members of the same family, creating logistical and transport problems. This is adding unnecessary stress to what is already a difficult and stressful time for most refugees. RCOA has received a number of reports about refugees attending JCAs where the assessors were not aware that the client was a refugee and where they had no understanding of the refugee experience or of the settlement process. Assessors are also unprepared for dealing with sensitive

issues around past trauma and torture which may impact on a refugee's ability to enter employment. There is a high need for refugee clients to have an advocate accompany them to JCAs as, in many cases, refugees, especially in early stages of settlement, find it very difficult to advocate for themselves. Refugees are also more likely to deny any potential barriers to employment and this can lead to incorrect assessments.

RCOA recommends

- ***That refugees be exempt from work obligations for the first six months after arrival.***
- ***That Job Capacity Assessors be alerted to the special needs of refugees, to enable them to tailor services accordingly.***
- ***That Job Capacity Assessors receive cultural training with a specific focus on the experiences of refugees.***

8.9 Family relations and the law

Service providers in the consultations raised concerns that the settlement process was impacting on relationships within some refugee families. In some cases, settlement pressures were resulting in problems with the law. The resettlement process can place a range of stresses on families. Power dynamics in the family can change dramatically. Refugee men often feel disempowered. They move from a situation where they had full responsibility for their family and a degree of power within their local community to one where they struggle to find work, do not speak the language and have few social networks. In many cases, women do not experience the same loss of power. Often they have continuity of occupation, through their role as family carer; in some cases, their power within the new environment increases.

Parenting may also become more difficult in the new environment. Children tend to learn English more quickly than their parents, they mix with other children who have different values and traditions and they tend to integrate into the new society much more rapidly. Previous methods for disciplining children are either ineffective or inappropriate in the Australian context. Generational conflict may arise.

The strain on families, therefore, may be quite profound. In some cases it leads to domestic violence, family breakdown and child protection concerns. Many refugee families do not understand the legal context and are confused and dismayed when the police or government officials interfere in what they see as a family problem. The refugee experience often means that there is a lack of trust in government authorities and police, and few feel comfortable approaching the police if there is a problem, especially within the family. In the absence of traditional support structures and processes, problems within families can deteriorate to the point of police involvement.

Some in the consultations suggested greater emphasis on educating families (particularly parents) about Australian law, particularly in relation to domestic violence and child protection. While this is part of the solution, the problem is much more complex in that humanitarian entrants need to be given early warning of the difficulties they may face as a family. They need to understand the role of the police and government in the Australian context, but also need support and understanding to help them negotiate their way through this difficult stage of settlement.

RCOA recommends

- ***That DIAC and/or the Department of Family and Community Services and Indigenous Affairs (FACSIA) increase funding for projects which address the support needs of families, with a particular focus on addressing the disempowerment of refugee men.***
- ***That information about the Australian legal system and the role of police and government authorities be included in on-arrival orientation.***
- ***That information about the difficulties that families may face and where to seek help be included as part of AUSCO and on-arrival orientation.***

8.10 Community Relations

The Council has for some time argued that there needs to be a targeted approach to community relations prior to directly settling refugees in a particular area. The recent events in Tamworth demonstrate the necessity of this. Negative publicity and unhelpful and inaccurate media portrayals of refugees in some areas of Australia have contributed to tension within communities. If we are to counter racism against refugees, then there needs to be an emphasis on promoting positive images of refugees and promoting understanding of the humanitarian program and the refugee experience. Greater support is needed for capacity building within refugee communities, to support the development of leadership and assist transition to active roles in Australian civil society.

RCOA recommends:

- ***That the Australian Government develop public education programs focussed on promoting positive images of refugees and on helping the Australian public understand the role of the offshore humanitarian program and the backgrounds of the refugees who have come to Australia.***
- ***That increased resources be directed at community capacity building activities within refugee communities.***

8.11 Access to interpreters

The lack of availability of interpreters in certain languages is a major impediment to refugees accessing mainstream services. The consultation reported difficulties in accessing suitable interpreters for some newly arrived entrant groups (such as Karen or Chin from Burma). Access can be difficult in certain areas particularly for on-site interpreters. It was suggested that it may be useful to encourage interpreting as an employment pathway for refugees. There is also a need for greater training of bilingual workers.

Availability of interpreters is also a major issue in rural and regional areas. For instance, it was reported that refugees in some areas are unable to access a face-to-face interpreter within 90km of a regional centre. The reluctance of mainstream services to use interpreters is also an issue.

Preparation for the arrival of new language groups should include ensuring that sufficient accredited interpreters are available. In cases where there has been little previous migration by certain language groups, there may need to be procedures to ensure that interpreters can be accessed quickly. The use of international interpreting services is an option in exceptional cases.

RCOA recommends that more preparation be made to ensure that new arrivals have access to appropriate interpreter services.

8.12 Specific issues related to rural and regional settlement

RCOA would like to acknowledge DIAC's efforts in the past year in promoting regional and rural settlement and in settlement planning. However, some issues of concern remain and they have been detailed above.

8.12.1 Infrastructure and services

There were general concerns about the lack of infrastructure and support in rural and regional areas and the difficulties faced by refugees trying to access existing services. Urban centres provide reasonably sophisticated levels of infrastructure that are of benefit to many humanitarian entrants, particularly in the early stages of settlement when there is greater reliance on services and public transport. In rural areas these levels of infrastructure are not available in the same way. Therefore, it is important to consider carefully the proximity of shops, schools and hospitals, the availability of childcare facilities, the reliability of telecommunications and (most importantly) the availability and reliability of public transport prior to settling humanitarian entrants in rural and regional areas.

In regard to services and support, some areas reported that there is no full time settlement worker available in the area. Some settlement workers see these areas as too far to travel. There are few specialised settlement services operating in rural areas and, in some regions, the settlement committee meets only once every three months.

There was a strong consensus about the positive response from services and the general goodwill to make things work in rural areas. Creativity in service provision has also been a way to deal with challenging circumstances. However, the lack of resources and support has resulted in great pressure on small agencies, with staff and volunteers at risk of burnout.

The lack of an accessible and reliable transport system was considered to be one of the major obstacles for effective settlement in rural and regional areas. Lack of availability of public transport was frequently reported, resulting in isolation for many refugees or in volunteers and workers burning out. One of the most affected groups is refugee women, who are often unable to access English classes and childcare services. Some situations were described where a 20 minute trip in the car could take two hours using public transport. This situation has led to illegal driving becoming an issue in a number of rural areas.

RCOA believes that it is essential to consider the systems and structures that are in place for regional and rural settlement and their capacity to respond. With few specialised settlement services operating in regional areas, it is important that mainstream services are sensitive to the needs of refugees and have the ability to respond to their diverse and complex issues.

RCOA recommends that further research be completed on alternative transport systems for refugees in rural areas and best practice models be identified and implemented in areas of greatest need.

8.12.2 Planning

An issue raised through the consultation was settlement planning for rural and regional areas. There was a perception that planning is reserved for metropolitan areas, rather than rural areas, and that settlement workers are allocated to specific regions based on numbers of people rather than needs. It was considered that services should be based on individuals' needs and not on numbers.

Participants emphasised that it was important to have more information from DIAC about the humanitarian entrants arriving and clear agreement about which services are responsible for different aspects of their support. It was also considered essential to improve current communication systems. Rural and regional communities need to have plenty of advance notice when new entrants are arriving. Preparation time is vital for rural areas, to ensure that appropriate services are readily available. Preparation for rural areas may not be able to be completed as quickly or easily as for metropolitan areas. Rural and regional areas require specific information about new arrivals, such as country of origin, language, total numbers, visa numbers, family size and composition, as well as some background cultural information about country of origin and conditions in the country of first asylum. This information enables staff and service providers in rural areas to prepare for the practicalities of dealing appropriately with new arrivals and ensures that the local community has an understanding of the new entrants and their specific needs.

Another concern raised was that some areas in the country with good infrastructure, strong local government support and additional capacity already in place to welcome refugees are not receiving new arrivals. However, other areas with limited capacity and experience in welcoming humanitarian entrants have been allocated new entrants. It was considered that this might be related to perceptions of unemployment, rather than the actual capacity of a region to find employment solutions for newly-arrived refugees.

RCOA recommends

- ***That DIAC ensures that settlement and other services in rural and regional areas have key information about new arrivals well in advance, so that preparations can be made to ensure that the specific needs of entrants are able to be met.***

9. Organisations Consulted

In the preparation of this submission, the Refugee Council of Australia had excellent support from a wide range of organisations across Australia. The following organisations participated in consultations conducted by RCOA or contributed ideas directly:

Adelaide Institute of TAFE, SA
Adult Community Education, North Coast, NSW
Adult Migration Education Service, WA
Afghan United Association, SA
Afghani Community, Vic
African Communities Council, SA
African Women's Federation, SA
AMES Education, Vic
AMES Settlement, Vic
Anglicare North Coast, NSW
Anglicare SA
Anglicare Sydney, NSW
Anglicare Victoria
Association for Services to Torture and Trauma Survivors (ASeTTS), WA
Association of Liberian Communities of Australia, SA
Assyrian Community, NSW
Asylum Seeker Welcome Centre, SA
Auburn Council, NSW
Auburn Migrant Resource Centre, NSW
Australian Centre for Languages (ACL), NSW
Australian Council for Tamil Refugees, NSW
Australian Refugee Association, SA
Bankstown Area Multicultural Network, NSW
Baulkham Hills Holroyd Parramatta Migrant Resource Centre, NSW
Blacktown Migrant Resource Centre, NSW
Canterbury-Bankstown Migrant Resource Centre, NSW
CASE for Refugees, WA
Centacare – Adelaide Archdiocese, SA
Centacare – Wagga Wagga Diocese, NSW
Centrecare Migrant Services, WA
Centrelink NSW – Coffs Harbour, Fairfield, Newcastle, Tamworth, Wollongong
Centrelink Victoria – Epping, Richmond
Christian World Service, Qld
City of Casey, Vic
City of Greater Dandenong, Vic
City of Yarra, Vic
Clarence River Women's Refuge, Grafton, NSW
Coalition for Asylum Seekers, Refugees and Detainees (CARAD), WA
Coffs Coast Community College, NSW
Coffs Harbour City Council, NSW
Coffs Harbour Refugee Settlement Service, NSW
Collingwood English Language School, Vic
Community, Qld
Community Health Service, Toowoomba, Qld
Council of Churches of WA
Cranbourne Information & Support Service, Vic
Darfur Australia Network, Vic
Drug and Alcohol Multicultural Education Centre, Fairfield, NSW
Ecumenical Migration Centre, Vic
Edmund Rice Centre, Mirrabooka, WA
Education Queensland
Eritrean Community Association, Qld
Eritrean Women and Family Support Network, Qld
Ethiopian Australian Association, Qld
Fairfield City Council, NSW
Fairfield Community Resource Centre, NSW
Fairfield Migrant Resource Centre, NSW
Fairfield Multicultural Health Service, NSW
Fairfield Parent Support, NSW
Fitzroy Learning Network, Vic
Free Kindergarten Association of Victoria
Good Shepherd Social Justice Network, Vic
Griffith Multicultural Council, NSW
Hunter Institute of TAFE, NSW
Hunter New England Health, NSW
Illawarra Institute of TAFE, NSW
Illawarra Legal Centre, NSW
Illawarra Multicultural Services, NSW
Inclusive Directions, SA
Iraqi Community, NSW
Islamic Women's Association, Qld
Jesuit Social Services, Vic
Legal Services Commission, SA
Liberian Association, Qld
Liberian Community, NSW
Liberian Community, Vic
Liberian Community Association, Sydney
Lifeline, Qld
Lismore City Council, NSW
Lismore Community Settlement Services Scheme, NSW
Liverpool Migrant Resource Centre, NSW
Lutheran Community Care, SA
Match Housing, Qld
Melaleuca Refugee Centre, NT

Mercy Refugee Service, NSW
 Metropolitan Migrant Resource Centre, WA
 Mid-North Coast Inclusive Service Association, NSW
 Migrant Health Newcastle, NSW
 Migrant Women's Group, Grafton, NSW
 Mission Australia, NSW
 Multicultural Council of Wagga Wagga, NSW
 Multicultural Development Association, Qld
 Multicultural Women's Advocacy Service, WA
 Murray Mallee Training Co, Vic
 National Council of Churches in Australia
 Newcastle and Hunter Institute of TAFE, NSW
 Newcastle and Hunter Region Migrant Resource Centre, NSW
 North Coast Community Health Centre, NSW
 North Coast Multicultural Workers Network, NSW
 North Coast TAFE Outreach Program, NSW
 North Yarra Community Health Centre, Vic
 Northern Migrant Resource Centre, Vic
 NSW Department of Education and Training
 NSW Department of Housing
 NSW Fire Brigades
 NSW Police Force – Auburn, Wagga Wagga
 NSW Refugee Health Service
 Ogaden Community, Vic
 Oromia Support Group, Vic
 Overseas Chinese Association of South Australia
 Plenty Valley Community Health, Vic
 Port Adelaide Enfield Council, SA
 Queensland Police Service
 Queensland Program of Assistance to Survivors of Torture and Trauma
 Red Cross NSW
 Red Cross Victoria
 Refugee and Immigration Legal Service, Qld
 Refugee Health Issues Network, NSW
 RMIT University, Vic
 Romero Centre, Qld
 Rural Multicultural Health – North Coast, NSW
 Rwandan Association of Queensland
 St Vincent de Paul Society – NSW/ACT State Council
 St Vincent de Paul Society – Wagga Wagga, NSW
 St Vincent de Paul Society – WA State Council
 Service for the Treatment and Rehabilitation of Torture and Trauma Survivors, NSW
 Sierra Leone Community, NSW
 Sierra Leone Descendants Association of Queensland
 Sisters of Charity, Qld
 South Australia Migrant Resource Centre
 South Central Migrant Resource Centre, Vic
 South Eastern Region Migrant Resource Centre, Vic
 South-Eastern Sydney and Illawarra Area Health Service, NSW
 South Metropolitan Migrant Resource Centre, WA
 Southern Tasmania Migrant Resource Centre, Tas
 Spiritus (Anglicare), Qld
 Springvale Community Aid and Advice Bureau, Vic
 Strategic Community Assistance to Refugee Families (SCARF), NSW
 Sudanese Community, NSW
 Sudanese Community, Qld
 Sudanese Community Association, Qld
 Sunraysia Institute of TAFE, Swan Hill, Vic
 Swan Hill Regional City Council, Vic
 Sydney Children's Hospital, NSW
 Tasmanian Institute of Law Enforcement Studies, University of Tasmania
 Tenants Union of Victoria
 The Generalist Project, NSW
 The Smith Family, NSW
 Toowoomba City Council, Qld
 Toowoomba Health Services, Qld
 Toowoomba Refugee and Migrant Support Service (TRAMS), Qld
 Transcultural Rural Mental Health Project, Tamworth, NSW
 Uniting Care Burnside, NSW
 Uniting Church, Brisbane, Qld
 Uniting Church Community Issues Group, SA
 Uniting Church, Dulwich Hill and Hurlstone Park Parish, NSW
 Uniting Church – WA Synod
 Uyghur Welfare, SA
 Victoria Police – Swan Hill
 Victorian Foundation for the Survivors of Torture
 Vietnamese Community Australia, SA
 WA Department of Health
 Wagga Wagga City Council, NSW
 Wandana Community Centre, SA
 Warrawong Intensive English Centre, NSW
 WEA Illawarra, NSW
 Whittlesea Community Connections, Vic
 Woodville Community Services, NSW
 Woolgoolga Neighbourhood Centre, NSW
 Young Christian Workers, NSW

Appendix 1:

A community support model for SHP proposers and entrants

In its response (24 November 2006) to the Australian Government discussion paper: "Measures to improve settlement outcomes for humanitarian entrants", the Refugee Council outlined the following model of support for Special Humanitarian Program (SHP) proposers and entrants:

An alternative model of support for Special Humanitarian Program proposers and entrants

The Refugee Council proposes an alternative model that addresses the concerns raised in the discussion paper ("*Measures to improve settlement outcomes for humanitarian entrants*") about the limited capacity of some proposers to provide adequate support to humanitarian entrants. This model enhances the potential for successful and positive settlement outcomes for both proposers and entrants, involves voluntary and community organisations in providing support and maintains the SHP's focus on humanitarian need and the reuniting of split families.

Building a network of voluntary and NGO partners

Under RCOA's model, the Department of Immigration and Citizenship (DIAC) would invite organisations to register as either Volunteer SHP Support Groups or Specialised SHP Support Agencies.

Volunteer SHP Support Groups: Volunteer and community-based organisations would be invited to register with DIAC as support groups for SHP proposers. As part of the registration process, each volunteer group would be required to develop an appropriate system of police checks, training and supervision. Volunteers' roles would be restricted to the skills for which volunteers are best suited, such as social support, encouraging new arrivals to build local connections and a limited range of practical tasks. Registered Volunteer SHP Support Groups would be provided funding by DIAC for training and the coordination of volunteers. This training would include cultural awareness, providing support within appropriate boundaries and referral processes to CCSN, IHSS, SGP and other agencies.

SHP Support Agencies: In addition, selected settlement agencies would be funded through an appropriate program (e.g. CCSN, IHSS or SGP) to provide support to SHP entrants and proposers with more complex needs. Each agency would be asked to build partnerships with registered Volunteer SHP Support Groups in their locality, so that SHP entrants and proposers could be given additional support by volunteers, at whatever level was appropriate.

The application process, partnership and review

With the networks in place, DIAC would invite all interested proposers to lodge SHP applications which would then undergo a five-step process:

Step 1 - Processing of SHP application: All SHP applications would be processed by DIAC purely on humanitarian criteria, with priority given to reuniting split families.

Step 2 - Assessment of support required: Once a SHP application has been approved, DIAC (possibly with input from external panel members) would make an assessment of what level of support the SHP entrants and their proposer needed to settle successfully, determining whether the proposer:

1. Could support the SHP entrants individually;
2. Needs a moderate level of support which could be provided by a Volunteer SHP Support Group; or
3. Needs a higher level of support which would require the involvement of a SHP Support Agency with background volunteer support.

Step 3 - Support options offered to SHP proposer: Where DIAC has determined that a proposer would benefit from the support of a volunteer group or specialist agency, DIAC would then approach the proposer to offer a number of options of organisations which could offer the appropriate level of support, with the proposer choosing the organisation or group they would like to approach.

Step 4 - Development of Settlement Plan: Once the proposer has chosen an appropriate organisation, DIAC, the proposer and the organisation would then enter into a written agreement or a Settlement Plan (translated as required), clarifying what support would be offered through IHSS and other programs and outlining the respective rights and responsibilities of each party, in order to ensure maximum clarity before the humanitarian entrants arrive.

Step 5 - Review: This partnership would then be reviewed (with the assistance of an external party) at agreed regular intervals to ensure the partnership was working to the maximum benefit of the SHP entrant/s and the proposer.

Individual proposers who would not require volunteer or professional support would also sign up to a Settlement Plan, receive the appropriate level of IHSS support and go through the induction checklist in the same way as groups.

The advantages of this model

RCOA believes that this model has several advantages:

- It ensures that the key concerns outlined in the discussion paper about adequate scrutiny and support of SHP proposers are addressed.
- It ensures that the SHP maintains its focus on those in greatest humanitarian need, including family reunion considerations, rather than focusing solely on potential for effective settlement.
- It does not disadvantage a proposer on the basis of their personal circumstances, but ensures that the proposer gets the right level of support.
- It does not force volunteer groups into a position where they are, in effect or by default, influencing the success or failure of SHP applications.
- It provides checks and balances to ensure that the best use is made of volunteer support and that volunteers are focused on the work they can do best.
- It involves professional settlement agencies to provide targeted support where the need is greater and it encourages these agencies to work in partnership with voluntary groups, to broaden community support for the SHP proposer and entrants and to enable a transition (at an appropriate time) away from professional support to broader community-based support.