



Australian Government
Department of Immigration
and Citizenship

Discussion paper

Integrated Humanitarian Settlement Strategy:
helping refugees and humanitarian entrants settle in Australia

July 2009



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Foreword

Australia can be proud of the role we play in supporting people from all around the world in need of resettlement. However, relocating people is only the first step in the process. The Australian Government sees real value in delivering an effective and robust settlement program to humanitarian entrants after they arrive in Australia. Strong evidence exists to show that early assistance through settlement programs, targeted to individual needs, supports humanitarian entrants to settle more quickly and successfully adjust to the changes in their lives. Our support aims to provide individuals with the skills and confidence needed to commence their new lives in Australia.

The Integrated Humanitarian Settlement Strategy (IHSS) supports humanitarian entrants during the initial settlement period with a range of assistance including airport reception, finding accommodation, delivery of household goods, community orientation and referrals to mainstream services.

The government is committed to continual improvement through investigating better ways to deliver our programs. The settlement programs administered by the Department of Immigration and Citizenship are no exception. The next tender for the provision of IHSS services offers an opportunity to examine the current IHSS service delivery arrangements, assess the areas working well and enhance those areas identified as requiring improvement.

As key stakeholders and interested parties, your experience in assisting newly-arrived humanitarian entrants settle in Australia is greatly valued and your feedback and insights concerning this program will be very useful. I invite your views on how the program could be improved to provide more positive settlement outcomes to humanitarian entrants.



A handwritten signature in black ink, appearing to read 'Laurie Ferguson'.

Laurie Ferguson MP

Parliamentary Secretary for Multicultural Affairs and Settlement Services

1 Introduction

1.1 Purpose of this paper

Australia has a long and proud history of resettling people in humanitarian need and the Australian Government is committed to helping new arrivals become active participants in the community as soon as possible after arrival. In recognition that humanitarian entrants often face additional challenges to those faced by other migrants, humanitarian entrants receive specialised assistance during their initial settlement period.

A key vehicle through which this assistance is provided is the Integrated Humanitarian Settlement Strategy (IHSS). The IHSS program is administered by the Department of Immigration and Citizenship and is currently delivered in 20 contract regions across Australia by contracted service providers.

Current IHSS contracts commenced on 1 October 2005 and will cease on 30 June 2010. The department intends to release a tender later this year for the delivery of IHSS services from 2010.

Prior to the commencement of the tender process, the department invites your views on how to best deliver IHSS services. In developing this discussion paper, the department has reviewed information about current IHSS service delivery arrangements from a range of sources.¹

Through this process a number of areas have been identified to date for closer attention. Part 4 of this paper highlights these areas. We seek your ideas on these and any other comments on possible changes to IHSS service delivery arrangements.

It is important to recognise that this paper is being released in a climate of considerable economic uncertainty—not just for Australia but for countries and governments around the world. Pragmatically, it is not a climate in which we can promote or seek any significant expansion of initial settlement services in either scope or cost. The department is particularly interested in gauging your views on how to better target and deliver IHSS services in a way that is, ideally, cost neutral. There may be ways of achieving enhanced service delivery within current costs.

The department appreciates that some sections of the community services sector do not favour open tendering as a procurement method, citing it places adverse pressures on positive and efficient collaboration within the sector.² The department, however, is committed to undertaking a tender process for the next IHSS contract period while seeking to maintain collaborative arrangements in the community sector. It is therefore interested in your views about how things may be done better or more efficiently in the future.

1.2 Broader consultation process

In addition to inviting your comment on this discussion paper, the department will hold consultations in each capital city. Consultation sessions will provide an additional or alternative opportunity to put forward your views about the current IHSS program and ideas for its improvement.

The department will also conduct focus groups with IHSS clients in selected locations across the country. The aim of these sessions is to gain a better understanding of the client experience.

1. The sources include annual quality assurance (QA) program reviews (2007–09), six-monthly service provider reporting, client surveys, annual service provider conferences, program audits and reviews, findings of the 2006 Inter-departmental Committee on Humanitarian Settlement and consultations with national and state and territory office staff, the Refugee Resettlement Advisory Council and the Settlement Council of Australia.

2. Refugee Council of Australia (2009) *Australia's Refugee and Humanitarian Program: Community views on current challenges and future directions*, p 42.

1.3 Making a submission

The department invites your written submissions in response to this discussion paper by **31 July 2009**.

The department prefers submissions to be sent electronically to: ihss.tender@immi.gov.au

Alternatively, you can post written comments to:

Director
IHSS Tender Team
Department of Immigration and Citizenship
PO Box 25
Belconnen ACT 2616

You are welcome to put forward views and ideas that are not specifically canvassed in this paper. You are also welcome to address the specific questions asked in the paper. Early, concise responses would be appreciated.

Submissions received may be used to inform the development of tender documentation and any resulting contract.

We do not propose public discussion about, or publication of, submissions received in response to this discussion paper. Nonetheless, in the interest of informed public debate, submissions may be made available upon request. Submissions will not be treated as confidential unless they are clearly marked confidential.

In any case, however, requests for access to confidential submissions under the *Freedom of Information Act 1982* (Cth) (FOI Act) will be determined in accordance with that Act, including the privacy and confidential information provisions. Proposed changes to the FOI Act (currently before parliament) may in the future impact the release of confidential submissions.

2 Background

2.1 Size and composition of Australia's Humanitarian Program

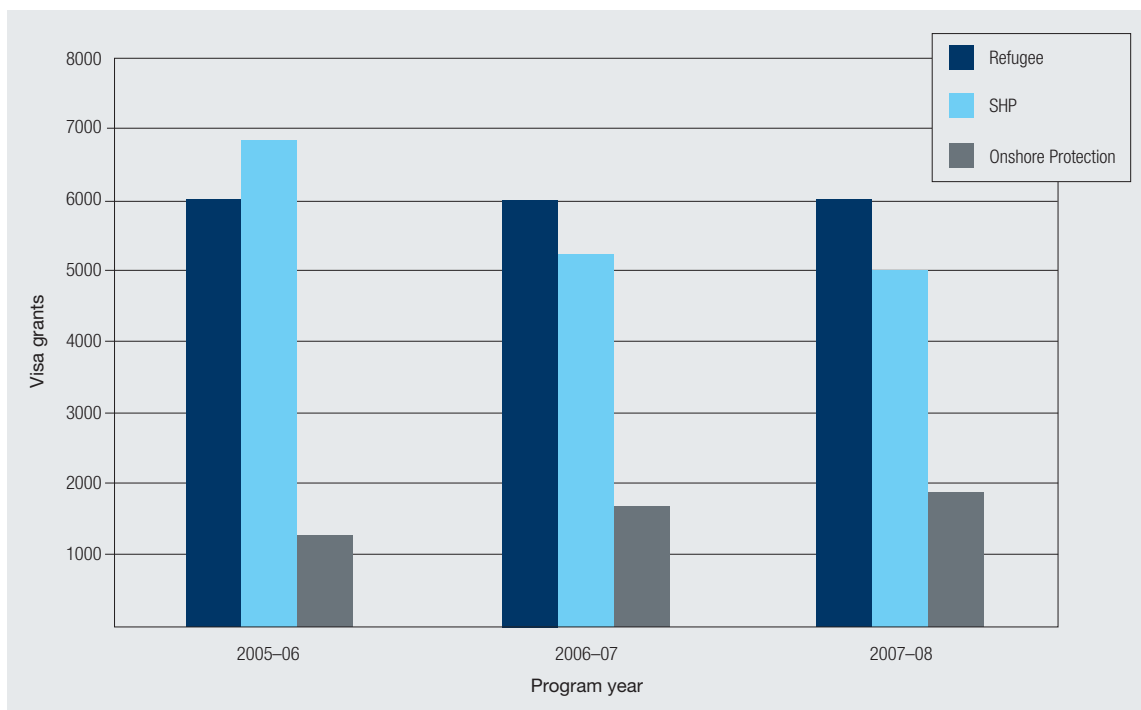
Australia's Humanitarian Program aims to assist people in humanitarian need overseas for whom resettlement in another country may be the only available option. The Humanitarian Program has two components:

- The offshore (resettlement) component offers resettlement for people overseas who are in need of humanitarian assistance and who have no other option available to them. Entrants under this category will be granted a refugee visa or a Global Special Humanitarian visa under the Special Humanitarian Program (SHP).³
- The onshore (asylum or protection) component offers protection to asylum seekers who have entered Australia and engaged Australia's protection obligations. Entrants under this category may be granted a Protection visa or other humanitarian visa.

The total number of places available under the Humanitarian Program in 2008–09 is 13 500—of which 6500 are refugees and 7000 are SHP entrants and onshore Protection visa grants.

The following figure shows the changing composition of the Humanitarian Program since the 2005–06 program year.

Figure 1: Components of the Humanitarian Program



For further information about Australia's Humanitarian Program please visit:

www.immi.gov.au/visas/humanitarian/

3. The Special Humanitarian Program (SHP) was introduced in 1981 to assist people who are subject to substantial discrimination amounting to a gross violation of human rights in their home country and who are living outside their home country. Applications for SHP visas must be supported by a proposer (an Australian citizen, permanent Australian resident or organisation in Australia), who is expected to provide settlement assistance to SHP entrants. Proposers must also meet the travel costs of SHP entrants.

2.2 Arrivals

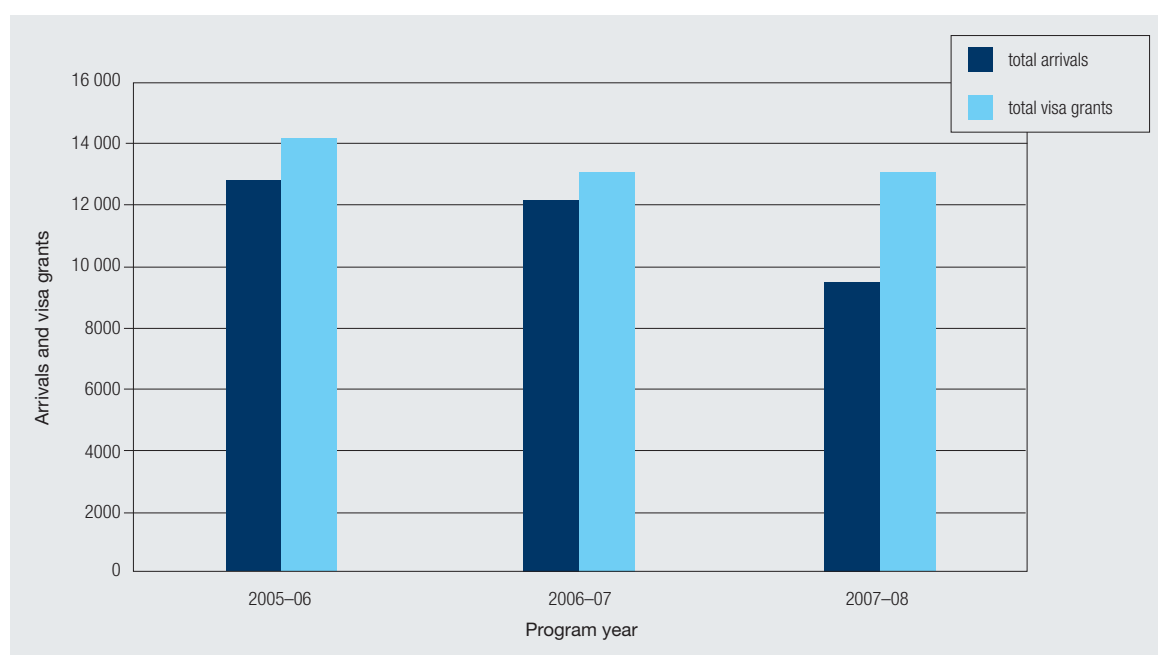
Actual arrivals under the Humanitarian Program may differ considerably from program planning numbers (as evidenced in Figure 2). For example, a number of factors can impact on the time it takes for an entrant to arrive in Australia after their visa is granted. These include:

- delays in being granted an exit permit to leave the country
- political climate and environmental situations
- emergency evacuations
- fitness to travel
- travel arrangements.

These factors also mean that the arrival of humanitarian entrants is not evenly distributed throughout the year. Another reason for the disparity between program planning numbers and actual arrivals is due to the number of onshore grants of Protection and other humanitarian visas.

The following figure shows the number of arrivals to Australia under the Humanitarian Program since the 2005–06 program year compared to actual visa grants under the program.

Figure 2: Total arrivals compared to visa grants under the Humanitarian program

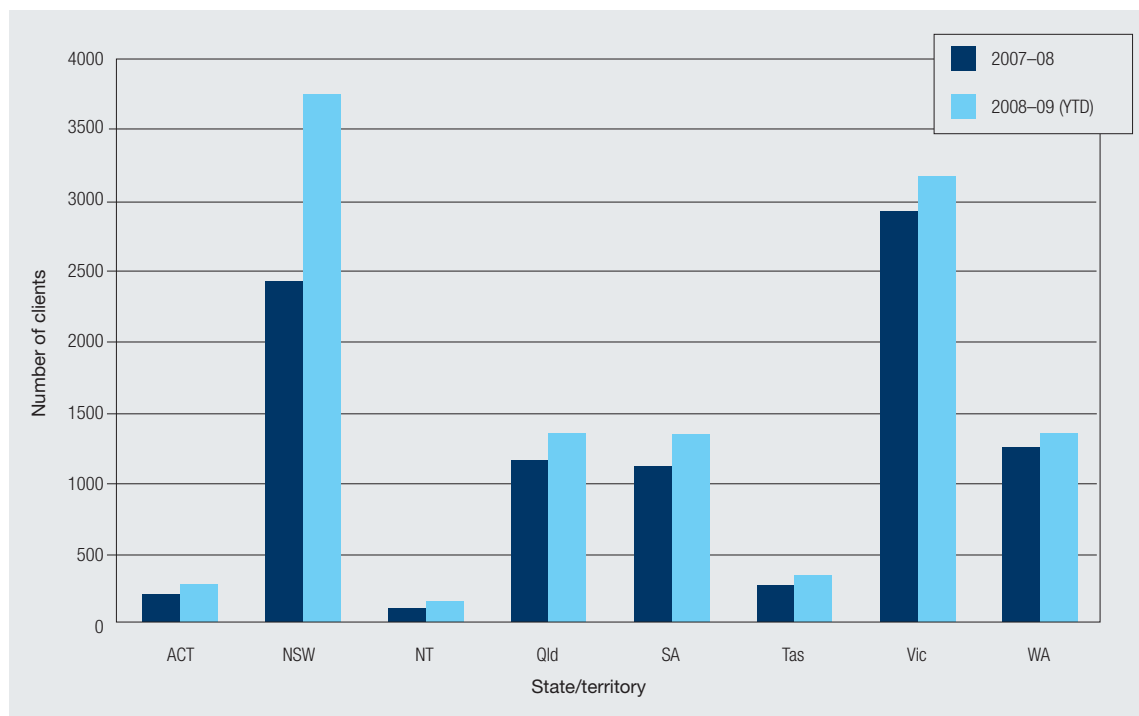


The department has limited influence over where entrants settle in Australia. In almost all SHP cases, entrants will settle with or close to their proposers. In approximately half of all refugee cases, an entrant will ask to be settled close to a family member (known as a 'link') already living in Australia. Ideally the department would like to distribute settlement of humanitarian entrants around Australia based on the capacity of the locations to welcome and support new arrivals. This would avoid the demand for limited resources in locations which have a high concentration of humanitarian entrants. However, evidence shows that a decision to settle an entrant away from a known link results in movement or transfer shortly after arrival to be closer to the link.

The department has discretion over the settlement destination of only a relatively small number of 'unlinked' refugee entrants each year—approximately 3000.

The graph below shows the spread of IHSS clients settled across Australia over the last two program years. Please note the figures for the 2008–09 program year are as at 24 June 2009.

Figure 3: IHSS arrivals by state and territory settled



The 2009–10 Budget announced that the department would move to a four-year planning framework for the Humanitarian Program commencing in July 2009. The department anticipates this change will enable Australia to respond more flexibly to protracted refugee situations, commit to longer-term resettlement needs, provide greater certainty to communities that particular caseloads will continue to be resettled past one year and allow service providers to enter into longer-term planning for delivery of services based on a steady flow of entrants.⁴

2.3 History of humanitarian settlement support and the IHSS

The Australian Government has a long history of providing settlement assistance to the people it resettles, although it was not until the late 1970s that the need for more specialised settlement assistance for humanitarian entrants was identified. The Community Refugee Settlement Scheme (CRSS) was established in 1979 to support humanitarian entrants who did not wish to live in migrant hostels and preferred to move directly into the general community. The cornerstone of the CRSS was a network of volunteer groups who provided assistance with finding accommodation and employment, general orientation and social support.

A review of migrant settlement services in the mid 1980s resulted in the closure of several migrant hostels in favour of self-contained, self-catering units with co-located support. The department established the On Arrival Accommodation (OAA) program to deliver this kind of accommodation to high need entrants, that is, those arriving without proposers or released from detention without community or family support. OAA clients were eligible for 13 weeks accommodation in government-leased flats. The OAA operated alongside the CRSS and support from proposers.

4. Department of Immigration and Citizenship (2008) *Australia's Humanitarian Program 2009-2010 and beyond: Discussion paper*, pp 7–9.

In 1995 the department entered into a national contract for the provision of property management and ancillary services for OAA. Under these arrangements, entrants were allocated to either the OAA or CRSS programs based primarily on their visa category with no focus on relative need. Almost half of all entrants were assumed to be receiving assistance from their proposers and received no immediate settlement assistance under OAA or CRSS.

In 1997 the IHSS was developed as a national framework for improving humanitarian settlement services. The strategy aimed to make more effective use of settlement services for humanitarian entrants through partnerships with community organisations and improving links between settlement planning activities and service delivery.

In 1998 the Auditor General concluded there was a considerable disparity between the settlement support received by entrants assisted through the OAA and CRSS and those who went straight into the community (generally SHP entrants).⁵ Consequently, the department moved to providing settlement support services based on assessed need. The department expressed its intention that any new program to support humanitarian entrants to settle in Australia should be explicit in its aim of respecting entrants' autonomy and not encouraging dependency. The program should provide entrants with the skills and tools to reach self-sufficiency and make their own way along the settlement path as soon as possible.

As a result of these factors, the IHSS evolved into a suite of specialised services for humanitarian entrants. The first national tender for IHSS services was conducted in 1999 and the new services commenced in early 2000.

In 2003 the department undertook an independent evaluation of the IHSS and a review of settlement services for migrants and humanitarian entrants.⁶ Recommendations from these reviews resulted in significant changes to IHSS service delivery arrangements including:

- more comprehensive client needs assessments, with improved proposer support measures
- coordinated and planned service delivery
- streamlined contract management
- the introduction of 20 contract regions across Australia with only one contract per region
- expansion of the household goods package to SHP entrants.

5. Australian National Audit Office (1998) *Provision of Migrant Settlement Services by DIMA*.

6. Department of Immigration and Multicultural and Indigenous Affairs (2003) *Evaluation of the Integrated Humanitarian Settlement Strategy (IHSS)*, report prepared by Urbis Keys Young; Department of Immigration and Multicultural and Indigenous Affairs (2003) *Report of the Review of Settlement Services for Migrants and Humanitarian Entrants*.

3 Features of the current IHSS program

3.1 Program aim

The aim of the IHSS is to provide settlement support to refugees and other humanitarian entrants to assist them to settle successfully in Australia, participate effectively in the community and access services available in the general community. The IHSS is funded by the Australian Government and is delivered through contracted service providers in all states and territories.

Assistance is provided to entrants for 6–12 months after arrival. Services are delivered through a case management approach whereby the needs of an entrant are assessed and a plan is developed to deliver services in a coordinated way.

3.2 Eligibility

Individuals granted a visa under the Humanitarian Program, whether offshore or onshore, are eligible for IHSS services. Entitlement to services may vary from case to case depending on assessed need. Service providers assess each entrant or entrant family prior to their arrival in Australia based on the information available in order to identify the level of settlement services required. The needs analysis is finalised after the entrant or family arrives.

With respect to SHP entrants, the department expects proposers to provide them with a range of support including airport reception, initial accommodation, and referrals to mainstream services, thus reducing the level of service required through the IHSS. Where a proposer is unable to meet the settlement needs of the SHP entrant, settlement services will be delivered through the IHSS by a contracted service provider. Where circumstances warrant, an SHP entrant may receive full IHSS services.

Some Protection visa holders (and individuals granted onshore humanitarian visas through ministerial intervention) may have lived in Australia for many years prior to their visa grant and therefore may not need settlement assistance through the IHSS.

3.3 Current services

The current IHSS service delivery arrangements evolved from recommendations made in the *Review of Settlement Services for Migrants and Humanitarian Entrants* and findings of an evaluation of the IHSS conducted in 2003.⁷ Broadly, the evaluation concluded there was inadequate integration of IHSS service delivery and a lack of coordination between service providers resulting in both service gaps and a degree of service duplication.

The program is delivered through the following service provider models: single provider; consortium; or prime service provider with subcontractors. Most contracts are managed by lead agencies within consortium partnerships or by a prime service provider who subcontracts some services to draw in appropriately skilled or specialist providers.

7. Department of Immigration and Multicultural and Indigenous Affairs (2003) *Report of the Review of Settlement Services for Migrants and Humanitarian Entrants*; Department of Immigration and Multicultural and Indigenous Affairs (2003) *Evaluation of the Integrated Humanitarian Settlement Strategy (IHSS)*, report prepared by Urbis Keys Young.

The current IHSS program delivers the following principal services:

On-Arrival Reception and Assistance

- transit assistance to entrants during domestic stop-overs (for refugee entrants only)
- airport reception and transport to suitable accommodation
- initial orientation of accommodation to assist entrants understand their new environment
- emergency medical attention, clothing and footwear
- a package of culturally appropriate food.

Case Coordination, Information and Referrals

- needs assessment and tailored case coordination plan
- information and referral to other settlement service providers such as Adult Migrant English Program and mainstream agencies such as Centrelink, Medicare and health services
- proposer assessment and support
- community orientation and introduction to Australian culture and life skills
- information on refugee experiences and settlement needs.

Accommodation Services

- fully-subsidised rent and utilities for the first four weeks after arrival (for most refugee entrants from March 2008)
- suitable and affordable accommodation
- a package of basic household goods
- tenancy training.

Short-term Torture and Trauma Counselling

- short-term torture and trauma counselling
- information to health care providers about the impact of torture and trauma on entrant's health.

Volunteer Coordination

- recruit, train and develop volunteers to contribute to the delivery of IHSS services.

Advocacy and Raising Community Awareness

- raising awareness of humanitarian settlement needs through the provision of information, training sessions and advice to mainstream agencies.

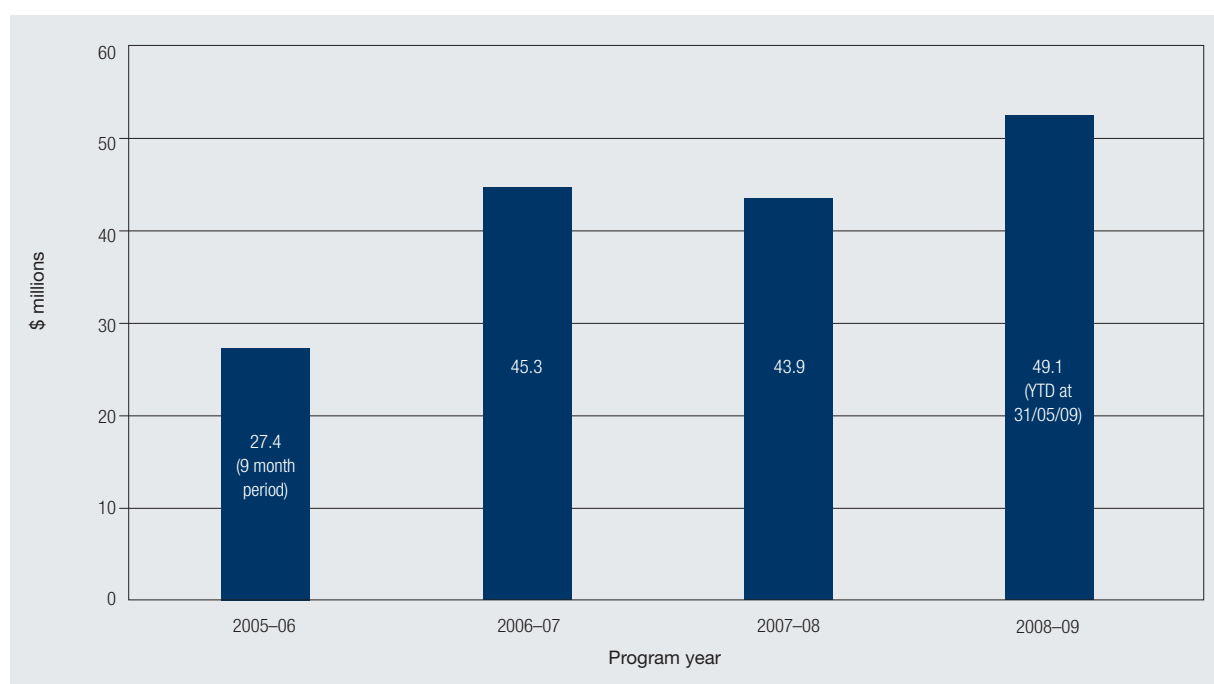
3.4 Expenditure

As services under the IHSS program are provided to actual arrivals (rather than program allocations) and onshore Protection visa holders, expenditure can fluctuate significantly from year to year.

The expenditure for the 2008–09 program year encompasses an expanded program following the introduction of enhanced ‘in-kind support’ measures in 2008⁸ and increases to accommodation services payments (where applicable) resulting from reviews of rents and vacancy rates across Australia in 2007 and 2009.

The graph below shows IHSS expenditure over the last four program years. As the current contract commenced in October 2005, the figures for 2005–06 account for a nine-month period only and figures for 2008–09 are year to date at 31 May 2009.

Figure 4: IHSS expenditure since the commencement of current contracts



8. In March 2008, the government extended ‘in-kind support’ assistance under the IHSS. These changes were implemented in response to findings from the 2006 Inter-departmental Committee on Humanitarian Settlement which concluded humanitarian entrants would benefit from greater financial support during their first few weeks in Australia. Enhanced ‘in-kind support’ measures provide refugee entrants living in rented premises with fully subsidised rent and utilities for the first four weeks after arrival, and all entrants with a reasonable transport allowance for the same period.

4 Future direction of the IHSS program

The department is committed to strengthening the program and is seeking your ideas, views and comments for improving the design and delivery of the services. The sections below highlight some of the areas that have been identified to date for further attention.⁹

4.1 IHSS objectives, service model and principles

The current contract states the prime objective of the agreement between the department and service providers is to ensure humanitarian entrants:

- are able to resettle and rebuild their lives in Australia in a way which enables them to become participating members of the Australian community
- provided with a full range of services which they are assessed as needing under the IHSS
- treated and provided with services in accordance with the principles (see Attachment A).

There is considerable local and international debate about what constitutes successful settlement and general agreement that it is difficult to design an effective measure of successful settlement.¹⁰ The department seeks your views on what are realistic and achievable outcomes from an initial settlement program, such as the IHSS, keeping in mind outcomes need to be both measurable and accountable.

The current IHSS service delivery model is a suite of services delivered through a coordinated case management approach. The model was adopted to promote greater integration and better coordination of the services provided to entrants. It is timely to reflect on the overarching model of service delivery and to consider what service model is likely to deliver the best settlement outcomes for refugees and humanitarian entrants.

A set of core principles underpins the delivery of current IHSS services. Service providers are required to deliver IHSS services in accordance with these principles, ensuring that the respect and dignity of the individual is paramount. It is important that IHSS services are delivered to a consistently high standard and take into account an individual's culture, traditions and religious values. The department is interested in your ideas on whether the current principles can be improved.

Question 1	How can the objectives of the IHSS program be better defined?
Question 2	How could the overarching IHSS service delivery model be improved?
Question 3	Which IHSS principles should be changed? Are there principles which should be added?

9. The key sources which have been used to identify issues with the current IHSS program are those outlined in note 1. In particular, the department's annual IHSS quality assurance (QA) reviews have been a critical source of review of the current program. The QA program was introduced in 2007 to assess whether service providers were meeting their contracted performance requirements and whether management controls were working effectively. In 2007 the department conducted a comprehensive quality assessment of all aspects of each contract. Findings from this review were incorporated into annual planning and reporting processes and implementation of findings were monitored. The 2008 QA review focused on those areas identified in the previous year's review—with specific emphasis on service improvement. This review also assessed other targeted areas, such as the implementation of in-kind support. The 2009 QA review followed the same process as undertaken in 2008. In addition to the annual QA program, the department conducts regular client contact visits in all states and territories whereby departmental officers visit IHSS clients to assess whether they are receiving the appropriate level and standard of services. These QA processes have considerably assisted the department to identify areas for improvement with the current contract and take timely action to facilitate change or improve contract performance.

10. Department of Immigration and Citizenship (2007) *Review of Planning and Delivery of Integrated Humanitarian Settlement Services*, report prepared by Ernst & Young, p 9.

4.2 Securing affordable accommodation and providing household goods

It is recognised that providing accommodation services to humanitarian entrants is particularly challenging. Considerations such as family size and proximity to services and public transport, contribute to the ongoing challenge, as well as the tight housing market. In addition, some entrants require a high degree of cultural orientation, while others arrive with high expectations about the standard and costs of housing they can expect in Australia. Service providers are often challenged to manage these varying needs and expectations.

Current IHSS services are delivered within a framework that places emphasis on assisting entrants into secure long-term accommodation on arrival, or shortly thereafter. Generally a long-term housing outcome would be met by a service provider assisting an entrant or family into a six-month lease on a rental property. In the current high-priced and competitive rental market this can be difficult to achieve despite the fact service providers utilise a range of solutions to deliver housing outcomes including head-leasing, community based housing and shared housing arrangements. Some profiles of entrants, for example single people and large families, are particularly hard to place in appropriate long-term accommodation.

Short-term or temporary housing is widely and increasingly used by service providers while appropriate longer-term options are sought. It is worth considering the opportunities short-term accommodation may offer — particularly if it is provided in a group or clustered setting. Group or cluster accommodation could enable a more intensive and tailored provision of orientation and settlement information to clients with very high needs such as those coming from protracted camp situations, those who indicate a likelihood of settlement difficulty or who face heightened risk of social isolation. It has the additional potential benefit of providing a living environment where people in similar circumstances can connect and support each other.

The department recognises that flexibility is important to cater for the different market conditions and state tenancy laws that can impact on the housing options available in different parts of Australia. It is understood that an accommodation model that works well in one area or with a particular profile of humanitarian entrants may not necessarily work well across the country or with particular cultural needs and humanitarian family profiles.

There are other matters to consider when targeting accommodation services to meet the needs of humanitarian arrivals. For example, how important is it to continue to provide in-kind support to meet the costs of accommodation and utilities for refugees in the first four weeks after arrival? Should accommodation services be provided for longer than six months? Would this reduce the relative vulnerability of those who sign an initial six-month lease on a property, yet remain in high need of assistance at the expiry of that lease?

Concerns have also been raised that SHP entrants may receive a reduced level of tenancy and accommodation support which contributes to them later being at heightened risk of tenancy problems, including eviction. The department considers that structured tenancy training should provide entrants with the knowledge and skills to meet their everyday tenancy obligations, and navigate the private rental market with minimum assistance. The department is interested to hear if improvements can be made to meet this goal.

The current package of household goods provided to individuals or families on a needs basis helps in delivering sustainable accommodation outcomes. Feedback to date suggests the current package of goods, as stipulated in IHSS contracts, is sufficient. Notwithstanding, it has been suggested the list of goods be 'refreshed' to ensure its continuing relevance to the current social environment (for example DVD players could usefully be included in the package in recognition of the settlement resources now available on DVD). It has further been suggested that measures are introduced to guarantee a consistent standard of furniture and household appliances is provided throughout all contract regions, while still recognising regional variations such as different climates.

Question 4	What different accommodation models could effectively be used to house refugees and humanitarian entrants on arrival?
Question 5	What benefits do you see in the provision of initial group or cluster accommodation? Which entrant groups could this model of accommodation best target?
Question 6	For what period of time should entrants be delivered accommodation services under the IHSS program?
Question 7	What improvements can be made to the current package of essential household goods?

4.3 Delivering effective referrals and information

Case Coordination, Information and Referral (CCIR) is the central coordination mechanism to other services within the IHSS suite and a critical referral point to other settlement services including the Adult Migrant English Program (AMEP), Settlement Grants Program (SGP), and other external community services. Under CCIR, service providers are required to assess entrants' settlement needs and develop individually tailored case coordination plans to meet those needs. This process requires service providers to make numerous referrals and linkages with mainstream, community and essential government services (including Centrelink and Medicare), schools, banks, health services and community support groups.

The current IHSS contract specifies tight timeframes (within two working days of arrival) for entrants to be registered with essential services such as Centrelink and Medicare. However, some entrants have reported that they are taken too soon to Centrelink and other mainstream services. The challenge for the department and service providers alike is to balance the delivery of essential referrals and registrations, while being sensitive to individual needs.

IHSS is part of a broader community service sector in which many organisations are involved in providing services, including settlement services, to humanitarian entrants. The department recognises the importance of IHSS service providers linking entrants to the broader community service sector in a way that is tailored to individual needs and utilises the capacity and expertise of the sector. Supported referrals to other settlement programs, sporting groups, social and community groups, religious and youth groups, provide entrants with an opportunity not only to interact with other new arrivals, but also with the wider Australian community. It is therefore important that IHSS service providers have a strong awareness of the programs run by other government service delivery agencies and the community services sector and make timely referrals so entrants can quickly benefit from these programs.

The department also recognises that past changes to funding arrangements for settlement services have, arguably, had a negative impact on relationships within the sector and adversely affected client referral patterns.¹¹ The department is interested in identifying ways in which it can encourage service providers, community agencies and community groups to work cooperatively in the best interests of humanitarian entrants.

Another element of the CCIR service type is the provision of information to entrants about life in Australia, its laws, and general life skills. Service providers are responsible for delivering information to entrants about topics as diverse as money and budgeting, using public transport, child care and child-rearing, and the schooling system. For entrants to gain the most benefit from this information it must be delivered at the right time so entrants are not overwhelmed with information.

11. Refugee Council of Australia (2009) *Australia's Refugee and Humanitarian Program: Community views on current challenges and future directions*, p 42.

Internal departmental reviews¹² show that the quality of information provided under this requirement varies between IHSS service providers. Feedback has suggested entrants may benefit from repeating the key messages of the offshore Australian Cultural Orientation (AUSCO) program shortly after arrival in Australia. Using AUSCO (which is currently undergoing an evaluation) would give IHSS service providers a consistent base curriculum for the provision of cultural orientation, allowing them to build on the curriculum as needed. The method of delivering initial practical and cultural orientation information is linked to the accommodation model used for housing entrants on-arrival. Group or communal accommodation on-arrival could present an opportunity to provide more structured and intensive initial practical and cultural orientation.

Evidence suggests that humanitarian entrants require ongoing support and information to learn and adapt to Australian norms in gender relationships and adolescent behaviour, and parental roles and responsibilities.¹³ It is clearly important that new arrivals gain an adequate understanding of the laws surrounding, for example, child protection, family violence and juvenile justice issues.¹⁴ The department is interested in ideas on how the information and support provided to families, young people and individuals to assist in their successful cultural transition can be strengthened.

Question 8	How can IHSS service providers best build and maintain effective working relationships with other community services providers and government agencies?
Question 9	What core information should be provided to humanitarian entrants shortly after arrival? In what timeframe should this be provided?
Question 10	What client benefits would be achieved from the provision of initial information in the areas of family relationships and cultural transition issues?

4.4 Improving on-arrival health services

Many new arrivals have lived in war-torn environments or refugee camps where their access to health services was limited. Many will have suffered years of poor nutrition and a high proportion of entrants will arrive in Australia with significant health issues requiring prompt medical treatment.¹⁵

Meeting the on-arrival health needs of clients falls under the CCIR service component. While the IHSS contract provides clear direction to service providers about the health needs of entrants arriving with health undertakings, health alerts, and those who have had a pre-departure medical screening, it is less prescriptive about how to comprehensively address the general health needs of entrants.

Service providers report difficulties identifying doctors or medical practices with sufficient knowledge and experience in managing refugee health needs and a willingness to bulk bill patients and use the Doctor's Priority Line for interpreting. Clients have reported they would prefer to have access to general practitioners close to their homes as it is difficult to travel long distances to access medical treatment, especially when dealing with sick children and relying on public transport.

12. Department of Immigration and Citizenship, Annual IHSS program QA reviews 2007–09.

13. Department of Immigration and Citizenship (2007) *NSW Settlement trends and needs of new arrivals—2007*, pp 8–11, 32.

14. The National Council to Reduce Violence against Women and their Children (2009) *Time for Action: The National Council's Plan for Australia to Reduce Violence against Women and their Children, 2009–2021*, p 50. This report in part highlights the need to support refugees in transition through orientation to Australian laws and the Australian legal system, including principles of gender equality and the value placed on respectful relationships in Australian society.

15. Victorian Foundation for Survivors of Torture (2004) *Towards a Health Strategy for Refugees and Asylum Seekers in Victoria*, pp 13–14.

Research shows the early settlement period is an important time to introduce people to treatment and prevention services as it helps build a positive relationship with health care services and aids early identification and treatment of health problems.¹⁶ The department is interested to hear whether comprehensive health screening soon after arrival for entrants, including SHP entrants, would benefit entrants and the greater community.

It is noted that most state governments operate specialist refugee health services which deliver comprehensive health screening and referral services for newly arrived entrants. These services generally provide standard initial health assessments, public health screening and immunisation, and supported referral to existing services for continuing care—in particular, general practitioners. The department is of the view that humanitarian entrants will benefit from having access to specialist refugee health services shortly after arrival, and may consider the appropriateness of stipulating the use of state refugee health services or specialist refugee health clinics where they exist.

Evidence suggests that entrants would benefit from more information about preventative health measures, including good nutrition, healthy lifestyles, sexual health and immunisation. The department is interested to gather your views on whether preventative health information should be delivered through the IHSS program, or whether accessing this information through referral to mainstream health services is more appropriate.

Question 11	Should the department do more to encourage IHSS service providers to use state refugee health services, where they exist?
Question 12	How could information about preventative health measures be best delivered?

4.5 Short-term torture and trauma counselling

Under current contractual arrangements, short-term torture and trauma counselling (STTC) services are voluntary and accessed at the discretion of the entrant.

In the 2006–07 program year, 58 per cent of entrants accessed STTC services at least once during their time in IHSS, of which 59 per cent went on to receive subsequent counselling.¹⁷ Participation figures for the 2007–08 program year are higher with 71 per cent of entrants accessing an initial STTC session, and 72 per cent of those entrants receiving subsequent counselling.¹⁸ The disparity in results over the two years relates in part to most service providers in the latter year referring all entrants for an initial assessment. This approach was recommended by an evaluation of STTC undertaken in 2007, however was not incorporated into contractual arrangements.¹⁹

The majority of IHSS service providers deliver information about STTC to entrants shortly after arrival and assist entrants to access counselling when they express an interest in participating. In both the above mentioned program years (2006–07 and 2007–08), entrants accessing counselling received an average of six sessions.²⁰

16. Victorian Department of Human Services (2008) Refugee health and wellbeing action plan 2008–2010: Current and future initiatives, p 25.

17. Humanitarian Entrant Management System (HEMS) 'Number of torture and trauma counselling sessions per entrant—by state and contract region' (2006–07).

18. HEMS 'Number of torture and trauma counselling sessions per entrant—by state and contract region' (2007–08).

19. Department of Immigration and Citizenship (2007) Evaluation of Short Term Torture and Trauma Counselling Services, report prepared by Health Outcomes Australia, pp 27–28.

20. HEMS 'Number of torture and trauma counselling sessions per entrant—by state and contract region' (2006–07).

Generally, entrants who access counselling prefer to do so after they have attended to their basic settlement needs such as finding a house, getting their children into school, starting English classes and addressing their medical needs. This can result in entrants receiving counselling when other components of the program are complete and they are otherwise ready to exit the program. A relatively high percentage of cases who continue to receive IHSS services for longer than 12 months (25 per cent)²¹ are those who are receiving STTC only.

The STTC services delivered under the IHSS are closely aligned with those delivered through the Program of Assistance for Survivors of Torture and Trauma (PASTT) administered by the Department of Health and Ageing. Under the IHSS, STTC provides psychological health needs assessments and subsequent short-term counselling for entrants as required. For clients who are assessed as requiring ongoing counselling or clinical services, STTC providers generally refer entrants to PASTT. The interdependence between the STTC and PASTT services has created a somewhat false distinction between ‘short-term’ counselling and what has widely become known as the ‘longer-term’ counselling services provided by PASTT. This has created challenges in contract interpretation for departmental contract managers and service providers alike.

Evidence suggests the emphasis of the current STTC service could be more clearly articulated in order to support successful transition and adjustment to Australian life. The department is considering various options on how best to manage STTC in the future, including removing STTC from the suite of IHSS services and operating it separately but alongside the program.

Question 13	Should all entrants be referred to a STTC provider for an initial assessment of their counselling needs shortly after arrival?
Question 14	How should STTC be structured to ensure that interventions are provided in the most optimal and timely manner?

4.6 Engaging volunteers

Volunteers play an important role in providing support and assistance to humanitarian entrants. Under the supervision of a case coordinator, volunteers may assist in meeting entrants at the airport, transporting entrants to appointments, orienting people to their local community and providing social interaction and friendship. It is widely acknowledged that volunteers have a considerable body of experience and have significantly contributed to successful settlement outcomes.

Under the current IHSS contract, service providers are required to operate a volunteer program. Specifically, service providers are required to implement and maintain a volunteer management framework which includes the development of procedures and processes for volunteer recruitment and engagement, vetting and training.

The operation and management of the volunteer coordination service component varies across the IHSS program. Some service providers manage robust and successful volunteer programs (with more than 100 active volunteers), while other providers struggle to attract and retain volunteers. It is also the case that a minority of volunteers have not always been happy with the conditions under which they volunteer. Industry groups and internal stakeholders report that some volunteers feel under-valued and under-utilised and others have expressed concern that long-standing volunteer groups are unable to continue to be identified as part of a group and must register as individuals to volunteer with the IHSS.²²

21. HEMS ‘Average time spent by case in IHSS by state’ (2007–08).

22. Refugee Council of Australia (2008) Australia’s Refugee and Humanitarian Program: Community views on current challenges and future directions, p 32.

The department wishes to explore ways to improve the IHSS volunteer program. One suggestion is that operating a volunteer program could be an optional extra rather than a contracted requirement for service providers. This would benefit those service providers who (perhaps through no fault of their own) are unable to attract and retain volunteers. Essentially, this raises the question of whether volunteer coordination should be a formal part of the IHSS service structure or whether service providers should be permitted to engage volunteers if and when they choose, under terms and conditions specified in the contract.

Question 15	How can we best target volunteers and provide them with meaningful and satisfying engagement within the IHSS program?
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4.7 Promoting regional settlement

More than half the 20 current IHSS contract regions cover areas in regional Australia.

The Australian Government is committed to supporting regional settlement. On the surface, there are many good reasons to promote regional settlement. A 2004 study commissioned by the Brotherhood of St Laurence, for example, found that refugees saw a number of advantages to regional settlement including good employment prospects, smaller and more welcoming communities, and more affordable housing.²³

Although there are a number of regional locations which might be suitable for humanitarian settlement, there are a range of factors that make it challenging to deliver sustainable regional settlement options—not least of which is the fact (discussed earlier in section 2.2) that the department has discretion over the settlement destination of only a relatively small number of unlinked refugee entrants each year.

Further, before directly settling unlinked humanitarian entrants in new regional locations, the department considers it important that new arrivals are not isolated but have the support of a certain ‘critical mass’ of other new arrivals. Evidence suggests a number of families need to be present in a regional area for a sustainable community to develop. Various other factors need to be taken into account when facilitating regional settlement including:

- the ongoing flow of arrivals, preferably from the same cultural background
- affordable housing
- employment opportunities
- relevant state and local government support
- community support
- appropriate infrastructure and the availability of mainstream and settlement services.

When these factors are not present, entrants tend to move to large metropolitan areas shortly after arrival in order to be closer to community groups (which are generally larger and more established in large cities) or due to the belief they will have better educational and employment opportunities. While entrants have the right to move within the country according to personal choices, the department believes that significant relocation within the early settlement period may be destabilising.

In recent years the department has trialled small-scale regional settlement pilot projects in new locations including Shepparton (Victoria), Mt Gambier (South Australia), and Ballarat (Victoria). These have largely been successful although areas for improvement have been identified.²⁴

23. Taylor, J. and Stanovic, D. (2005) *Refugees and Regional Settlement – Balancing priorities*, p v.

24. Department of Immigration and Citizenship, *Shepparton Regional Humanitarian Settlement Pilot—Evaluation report (November 2007)*; *Regional Humanitarian Settlement Pilot, Mt Gambier—Evaluation report (November 2008)*; *Regional Humanitarian Settlement Pilot, Ballarat—Evaluation report (January 2009)*, reports prepared by Margaret Piper and Associates.

The department notes that much regional settlement occurs through spontaneous factors rather than being directed by the department (for example, through entrants choosing to move to a regional area or sponsorship by people living in regional areas). The department feels there may be benefit in focusing more actively on locations where new communities are developing through internal migration and secondary movements. It is hoped this will support the development of stable and sustainable migrant communities in regional areas that will attract further migration through links and sponsorship.

Question 16	How can regional settlement be better sustained to reduce the incidence of secondary movement shortly after arrival? Would this also encourage internal migration and secondary movement to regional areas?
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4.8 Defining IHSS contract regions

The next tender provides the department with the opportunity to redefine contract regions to identify whether some existing regions should be merged, boundaries modified, or new regions developed. Feedback received from various sources suggests that large contract regions with core settlement locations vast distances apart are difficult to service and monitor. This fact could support a move to establish separate contract regions in those regional settlement locations where we know there is a sustainable existing pocket of settlement of relatively new arrivals, and where there is the appropriate infrastructure, services, and opportunities available on the ground.

In a similar vein, some metropolitan contract regions contain numerous core settlement locations boasting affordable accommodation, solid infrastructure and experienced settlement providers which could potentially be separated into smaller contract areas. In examining the options to develop new contract regions, it is important that the department is confident all contract regions have the capacity to support the full suite of IHSS services, including affordable accommodation.

Question 17	What benefits could be gained in establishing additional contract areas in non-metropolitan regions—particularly in existing settlement regions with good infrastructure and local services?
Question 18	How could the IHSS metropolitan contract regions be restructured in light of changing demographics and the availability of affordable housing?

4.9 Strengthening support for SHP entrants and their proposers

SHP entrants make up approximately 40 per cent of the arrivals under the Humanitarian Program each year and their proposers play an important role in assisting SHP entrants to transition into the Australian community. Along with paying the SHP entrants' airfares, proposers are expected to meet the settlement needs of SHP entrants including airport reception, initial accommodation and referrals to mainstream services. It is widely acknowledged that some proposers find it difficult to provide this support as they are generally recently-arrived humanitarian entrants themselves, who are still attending to their own settlement issues. Many proposers have limited financial resources, are without steady employment and have only basic English language skills. As a result, feedback from a number of sources indicates that SHP entrants are not always receiving the necessary and ongoing settlement support they require through the IHSS.

Evidence suggests that pre-arrival capacity assessments with proposers are often undertaken over the telephone and in many cases left until after the entrant arrives. The department sees merit in face-to-face contact with a proposer prior to the arrival of the SHP entrant to identify their capacity to support the entrant. Where capacity is limited, proposers may benefit from the provision of practical solutions or referrals to mainstream and settlement services to build their capacity to assist entrants, and also further their own settlement.

While an initial capacity assessment is generally undertaken with a proposer prior to the arrival of an SHP entrant, assessments are not always routinely reviewed or monitored thereafter to determine whether the SHP entrant's settlement needs are being met by the proposer or whether ongoing support through the IHSS is required. Further, there is often limited assessment of the settlement needs of the SHP entrant independent of the proposer. The department can see merit in a comprehensive review of proposer capacity prior to SHP entrant arrival, assessment of settlement needs of SHP entrants on-arrival with the entrant, followed by a staged review of settlement assistance delivered to SHP entrants by proposers to identify whether settlement outcomes are being achieved. It is anticipated this approach would assist in the early identification of ongoing support needs of proposers and SHP entrants.

The department is currently developing a range of information products to more effectively inform proposers about their responsibilities and about the settlement support services available to assist them—both before and after the arrival of their relative/s in Australia. While the development and dissemination of these information products will assist proposers to better understand their role and the support available to them, the department is keen to identify whether there are other initiatives (beyond those already mentioned in this paper) that would help ensure SHP entrants are provided with equal opportunity to achieve positive settlement outcomes.

Under current contractual arrangements, transit assistance is only available to refugee category entrants and not SHP entrants. Often the provision of transit assistance is out of the scope and means of proposers and SHP entrants are left to navigate the Australian airport system, including meeting connecting flights, alone. This can be a challenging and daunting experience for newly arrived SHP entrants, especially for those having to transfer between airport terminals and those waiting several hours for connecting flights. Suggestions have been made that SHP entrants would benefit from transit assistance from IHSS service providers.

Question 19	To what extent do you consider proposers would benefit from early face-to-face assessment of their capacity to assist SHP entrants and onward referral to build their capacity?
Question 20	Do you think regular monitoring of the capacity of proposers to provide settlement services, and staggered assessment of SHP entrants' settlement needs, will reduce the relative vulnerability of these groups?
Question 21	Will making proposers more aware of their responsibilities and the support available help to ensure SHP entrants are adequately supported in their initial settlement phase? What other initiatives could the department explore to better support proposers?

Attachment A: IHSS principles

- Humanitarian entrants are individuals who have the inherent right to respect for their human worth and dignity.
- Humanitarian entrants are informed and involved in making choices and decisions.
- Services are designed and administered to promote humanitarian entrants' competence and to discourage dependency.
- The health and well-being of humanitarian entrants are protected.
- The best interests of children are a vital concern.
- The least intrusive and the least disruptive option which offers the highest degree of stability and certainty is selected.
- Traditional, cultural and religious values are respected.
- Services and decisions are ethical and humanitarian entrants are not exploited.
- Services promote participation of humanitarian entrants in the wider community and their understanding of legal obligations.
- Organisations providing services are accountable to those who use their services and the Australian Government.
- SHP entrants are enabled to access services in a coordinated way which minimises gaps and duplication between services received.
- Services are delivered in a manner which is sensitive to the situation of newly-arrived humanitarian entrants.
- Services to humanitarian entrants are delivered to a consistent standard across Australia.

