Defending human rights:
Community-based asylum seekers in Queensland

"Everybody is going through a lot, especially people like me who have been living for eight years, that's like in jail. I know you are touching everything, but you can't have it – sometimes you can't touch, you can just see. It's like in prison, in the detention centre, and living in the community also, I think they are the same."

(Asylum seeker participant)

"We have signed the human rights declaration and we have said that we will listen to asylum seeker claims and make a determination whether they deserve protection or not. And that's all that it is. Get on with the job, do it, don't punish people and play God with their lives, and have children starving and losing their hearing over not being able to visit a doctor. This is completely unnecessary."

(Service provider participant)

"Clearly forcing significant numbers of people into poverty-like circumstances is a serious humanitarian concern, with important human rights implications. The right to flee persecution and seek protection is a fundamental human right, and measures which impact on an individual's ability to exercise this right must be seen as contrary to the spirit of the 1951 Refugee Convention. Importantly, under international law no country is allowed to return someone to another country where they face torture or death (this principle is known as non-refoulement). This includes 'constructive' non-refoulement, whereby someone is not physically forced to return but is forced nonetheless due to the harsh treatment of the host country. Amnesty International continues to have grave concerns that Australia is at serious risk of breaching its non-refoulement obligation if it continues to make the situation so intolerable that asylum seekers have no choice but to return home to a country where they risk persecution."

(Amnesty International 2004)
The UQ Boilerhouse Community Engagement Centre is based in the Faculty of Social and Behavioural Sciences at The University of Queensland.

The Boilerhouse acts to facilitate just and sustainable community outcomes. To achieve this purpose, the centre engages with diverse stakeholders from the private, public, and community sectors in developing informed and collaborative responses to both existing and emerging community issues.

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The University of Queensland
11 Salisbury Road, Ipswich
September 2005

ISBN: 1864998296
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Preface

This report documents a research project which explores the experiences of community-based asylum seekers while applying for protection in Australia. As a preface to this report, it should be noted that:

- This project was initiated by the Refugee Claimants Support Centre and the UQ Boilerhouse Community Engagement Centre, The University of Queensland;
- Funding was provided by the UnitingCare Centre for Social Justice Advocacy and Education Fund and Multicultural Affairs Queensland, Department of the Premier and Cabinet;
- In-kind support was provided by the Refugee Claimants Support Centre and the UQ Boilerhouse Community Engagement Centre, The University of Queensland;
- Research was undertaken by the UQ Boilerhouse Community Engagement Centre, The University of Queensland;

Acknowledgements

This project has relied heavily on in-kind support and assistance from many people. I would firstly like to thank the funders of the research, the UnitingCare Centre for Social Justice and Multicultural Affairs Queensland, for providing the funding to allow the project to proceed.

This project would not have been possible without the help and support of Gaby Heuft from the Refugee Claimants Support Centre. Gaby has been involved with discussions relating to this project since 2003, and has been both a mine of information and source of inspiration, through her tireless commitment to supporting and advocating for the needs of her clients. Alisia Bentz has also offered great support and assistance through the life of this project, and together with Gaby has been key in linking us with potential participants.

Many thanks also to reference group members, for finding the time to provide input and attend meetings despite numerous other commitments. Particular thanks must also go to all who volunteered their time to contribute to the project, both students from UQ and volunteers from the RCSC, whose input has been invaluable: Ann Garred, Caitlin Whiteman, Collene Etheridge, Leah Mercer, Dayna McKenzie, Sonia Bentancour, Stephen Campbell, Laurie Lewis, Carrie Munro, Bec Somersmith and Eleanor Kettle. Special thanks go to Caitlin and Collene for drafting the material included in Section 5 of this report.

Final but particular thanks go to those who agreed to participate in the study. Given that lack of time and resources is a key difficulty for organisations that support asylum seekers, we appreciate the willingness shown by all to assist with the research, and thank you for finding that extra time. To the asylum seekers who agreed to share their experiences, we recognize and appreciate that the decision to take part may not have been easy, and that talking about experiences yet again can be both difficult and distressing. I would like to offer my sincere thanks and appreciation to all who took part, and express my hope that by allowing us to document your experiences, this report will help to raise awareness and contribute to addressing the issues that have been raised in the research.

Research team

Sue Scull, Jodi-Ann Borg, Caitlin Whiteman, Collene Etheridge, Gaby Heuft, Alisia Bentz, Ann Garred

Research advisor

Geoff Woolcock, UQ Boilerhouse Community Engagement Centre, The University of Queensland

Confidentiality

The data collected during the course of this research remains confidential in recognition of privacy laws and ethical research practices. Every effort has been made to protect the identity of the various participants in the research process, in order to facilitate open and honest communication. Given that the population of community-based asylum seekers in Queensland is close-knit, certain information, particularly demographic information, has been withheld from this report to avoid identification of those who participated.

Intellectual property

Title to intellectual property rights in respect of all facets of this research project including development, design and this report, is vested in the UQ Boilerhouse Community Engagement Centre and Multicultural Affairs Queensland.
Disclaimer

The views expressed in this report are those of the author, and do not necessarily reflect those of the UnitingCare Centre for Social Justice, Multicultural Affairs Queensland, or the Refugee Claimants Support Centre. Whilst all care has been exercised in the presentation and interpretation of the data collected, no assumed or implied responsibility is taken for the reliability and accuracy of the underlying data and information.

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<thead>
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<td>ACTS</td>
<td>Australian Care and Trauma Services</td>
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<td>ASAS</td>
<td>Asylum Seekers Assistance Scheme</td>
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<td>BCC</td>
<td>Brisbane City Council</td>
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<td>BRASHN</td>
<td>Brisbane Refugee and Asylum Seeker Health Network</td>
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<td>BVE</td>
<td>Bridging Visa E</td>
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<td>CIC</td>
<td>Canada Immigration Centre</td>
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<td>CNS</td>
<td>Community Networks of Support</td>
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<td>CSG</td>
<td>Community support groups</td>
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<tr>
<td>DIMIA</td>
<td>Department of Immigration and Multicultural and Indigenous Affairs</td>
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<td>GCG</td>
<td>Gateway Community Group</td>
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<td>GCRSG</td>
<td>Gateway Community Refugee Support Group</td>
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<td>GSS</td>
<td>Good Shepherd Sisters</td>
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<td>IFHP</td>
<td>Interim Federal Health Program</td>
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<td>IRB</td>
<td>Immigration and Refugee Board</td>
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<td>IRPA</td>
<td>Immigration and Refugee Protection Act 2002</td>
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<tr>
<td>IWSS</td>
<td>Immigrant Women’s Support Service</td>
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<td>NASS</td>
<td>National Asylum Support Service</td>
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<tr>
<td>NESB</td>
<td>Non-English speaking background</td>
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<td>NHS</td>
<td>National Health Service</td>
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<td>NIA</td>
<td>Nationality, Immigration and Asylum Act</td>
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<td>OECD</td>
<td>Organisation for Economic Cooperation and Development</td>
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<td>PBS</td>
<td>Pharmaceutical Benefits Scheme</td>
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<td>PRWORA</td>
<td>Personal Responsibility and Work Opportunity Reconciliation Act</td>
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<td>QIRCH</td>
<td>Queensland Integrated Refugee Community Health Clinic</td>
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<td>QPASTT</td>
<td>Queensland Program of Assistance to Survivors of Torture and Trauma</td>
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<td>QPILCH</td>
<td>Queensland Public Interest Law Clearinghouse</td>
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<td>Refugee Assistance Program</td>
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<td>Refugee Claimants Support Centre</td>
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<td>RHP</td>
<td>Red Hill Paddington</td>
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<td>RHP-RSG</td>
<td>Red Hill Paddington Refugee Support Group</td>
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<td>RRT</td>
<td>Refugee Review Tribunal</td>
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<td>RSG</td>
<td>Refugee support group</td>
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<td>SAAP</td>
<td>Supported Accommodation Assistance Program</td>
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<td>SBICLS</td>
<td>South Brisbane Immigration and Community Legal Service</td>
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<tr>
<td>TAFE</td>
<td>Technical and Further Education</td>
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<tr>
<td>TPV</td>
<td>Temporary protection visa</td>
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<td>UDHR</td>
<td>Universal Declaration of Human Rights</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNHCR</td>
<td>United Nations High Commission for Refugees</td>
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Executive summary

Project background

An asylum seeker is someone who, fearing persecution in their country of residence, has applied for, or is in the process of applying for, protection as a refugee. Community-based asylum seekers, or refugee claimants as they are also known, arrive in Australia with valid documentation and apply for asylum after arrival. In recent years, great attention has been placed upon the plight of asylum seekers in Australian detention centres, while at the same time, asylum seekers who remain in the community while their claims are processed have been overlooked. While the difficulties experienced by asylum seekers are well understood by those in the community who work to support them, until recently there has been little documented evidence of this, particularly in Queensland. The UQ Boilerhouse Community Engagement Centre, in partnership with the Refugee Claimants Support Centre, was funded by the UnitingCare Centre for Social Justice and Multicultural Affairs Queensland to undertake a small scale qualitative research project to increase understanding about the experiences of community-based asylum seekers in Queensland.

Methodology

The aim of the research was to provide asylum seekers and support organisations with an opportunity to speak out, and therefore qualitative research was considered the most appropriate methodology. The two particular target groups for the project were asylum seekers on Bridging Visa E, and organisations and community support groups which provide welfare assistance and support to them. The primary method used for data collection was semi-structured interviews, all of which were tape-recorded and transcribed for the purposes of analysis. The research was guided by a project reference group, together with the Refugee Claimants Support Centre, which played a key role in the identification of potential participants.

The project faced a number of limitations including limited funding, a relatively short time frame for data collection, difficulty in accessing and recruiting participants, and the use of a single gatekeeper to address this issue. Despite these however, a total of 38 people participated in this research; 21 asylum seekers and 17 representatives from organisations and support groups that work with asylum seekers.

Results - interviews with asylum seekers

Work - None of the 15 participants currently on a BVE have permission to work; eight have never had the right to work, while seven did at some point in the past, but subsequently lost these rights at various stages of appeal. For those who have had work permission, several participants noted that it had taken between one and four months to find work, primarily due to a lack of Australian work experience or an Australian reference. However, all who were seeking employment were successful in finding a job. Denial of work permission not only creates severe financial difficulties and dependency but also leads to depression and frustration, as asylum seekers are unable to keep busy or make a contribution to the community. This in turn affects their self-esteem and dignity.

Financial support - While participants with work permission were generally able to support themselves financially once they had secured employment, those without are forced to rely heavily on community organisations for financial support and emergency relief. Typically, such organisations may provide accommodation costs, bills, food and/or food vouchers, medical expenses and bus tickets. Small amounts of cash may also be made available although in total, asylum seekers tend to have around $50 a week or less, part or all of which will be in the form of vouchers.

Health care - fourteen participants without work permission are not entitled to access Medicare or the Pharmaceutical Benefits Scheme, meaning that visiting a doctor and accessing medicines is extremely difficult. This is of particular concern given that 12 participants reported negative changes to their health since arriving in Australia. They believe this is largely due to the stress and depression they experience while awaiting an outcome on their application. A network of health professionals has been established who are willing to provide pro bono services, and more recently a newly established clinic has been able to provide some primary health care and free pharmaceuticals and diagnostic testing. Lack of continuing funding however suggests that if the clinic is unable to continue to offer this service, health care would remain a serious concern for asylum seekers.

Housing - lack of affordable accommodation is a major issue, and many asylum seekers are reliant upon friends and family, free accommodation or rental payments provided by community groups and organisations. Three participants reported being homeless for short periods, while a number are effectively homeless due to restricted access to longer-term accommodation; often a place to stay is only available for a few days or weeks. Community organisations play a key role in securing shelter for asylum seekers.
**Education** - Only one participant in this study has school aged children; they now have access to state schools following lobbying of federal and state politicians. Study opportunities for participants in this study have been fairly limited. Adult education has primarily focused on English classes, with eight participants undertaking these, primarily through community organisations due to lack of access to federally funded English programs.

**Transport** - Transport emerged as another key area of need for community-based asylum seekers, with the major means of support being bus tickets distributed by the RCSC. These are funded by donations, and supply is not guaranteed, therefore participants reported using tickets only for important occasions, such as medical or immigration appointments. Diminished funding for bus tickets raises concern about future transport assistance for asylum seekers.

**Legal assistance** - the key source of legal assistance is the South Brisbane Immigration and Community Legal Service (SBICLS), which specialises in immigration and refugee law. Nine participants received help from SBICLS to complete their application for protection, while another eight completed them on their own. The remaining four received help from family or community members, although this can be problematic if they are unaware of legislation such as the 45 day rule.

**Key issues for community-based asylum seekers** - lack of work permission and access to Medicare are key, together with access to accommodation and the basics needed to survive.

**Results - interviews with welfare providers**

**Key issues for welfare providers** - four main areas of concern were identified; current government policy, for example the lack of work permission, and the legal system; lack of funding and resources for community organisations to be able to support asylum seekers; community attitudes and support for asylum seekers; and lack of appropriate information and knowledge.

**Addressing key issues** - three main courses of action were identified

- Asylum seeker policy - removal or amendment of the 45 day rule, to allow asylum seekers access to employment and Medicare;
- Application processing - reduce the processing time for asylum applications; allow access to Ministerial discretion at an earlier stage in the application process; undertake a review of the Refugee Review Tribunal to ensure it is an independent body; establish a system to monitor the return of failed asylum seekers.
- Community education - raise awareness about the circumstances of community-based asylum seekers; dismantle common fallacies so the situation of community-based asylum seekers is properly understood.

**Recommendations**

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<th>1. Access to work rights and basic living allowance</th>
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<td>1.1 Asylum seekers should be given permission to work in order to support themselves.</td>
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<td>1.2 At the same time, a basic living allowance should be available to vulnerable groups who are unable to work.</td>
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<td>1.3 The right to work and/or a basic living allowance should be available to asylum seekers from submitting their DIMIA application until a final decision is received on their case.</td>
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<th>2. Review of visa application process</th>
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<td>2.1 The visa application process should be reviewed and specific timelines applied to the consideration of applications at all stages</td>
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<td>2.2 A model of complementary protection should be implemented to ensure that those with a valid claim for protection, but who fail to meet the narrow UN definition of a refugee, still have access to a protection visa.</td>
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<td>2.3 Processes used by the RRT should be reviewed to ensure that asylum seekers have access to an independent and impartial decision making process that is based on the merits of each individual case.</td>
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<th>3. Additional funding for community sector organisations</th>
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<tr>
<td>3.1 Additional resources need to be made available to community sector organisations who have adopted the responsibility for the welfare of asylum seekers</td>
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<td>3.2 Funding should be sufficient to ensure that the responsibility of financial support for asylum seekers is removed from the community sector</td>
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<td>3.3 Appropriate training and supervision should be made available to community sector staff and volunteers working with asylum seekers</td>
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<th>4. Community education</th>
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<tr>
<td>4.1 Targeted and widespread community education is required to disseminate accurate information to the community, to access those with little knowledge or understanding about community-based asylum seekers</td>
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<td>4.2 An important advocacy role should focus on the inclusion of education about refugees and asylum seekers in the school curriculum.</td>
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<tr>
<td>4.3 Continue advocacy on behalf of asylum seekers within both the community and political arenas.</td>
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1. Introduction

This report documents research undertaken to explore the experiences of community-based asylum seekers in Australia. Community-based asylum seekers, or refugee claimants as they are also known, arrive in Australia with valid documentation and apply for asylum after arrival. In recent years, great attention has been placed upon the plight of asylum seekers in Australian detention centres, while at the same time, asylum seekers who remain in the community while their claims are processed have been overlooked. As a result, they have become “a forgotten community” (Amnesty International 2004).

The difficulties experienced by asylum seekers are well understood by those in the community who work to support them, but there is little documented evidence of this. Given that little empirical research has previously been undertaken, particularly in Queensland, the aim of this project has been to gather primary and secondary data from asylum seekers and service providers in order to:

- Increase understanding about the experiences of Queensland’s community-based asylum seekers;
- Identify services and groups offering support to community-based asylum seekers, and determine any difficulties they encounter in providing welfare assistance;
- Analyse how Australia is meeting, or failing to meet, its obligations as a signatory to the UN Refugee Convention;
- Compare the rights and entitlements of community-based asylum seekers in Australia with those provided in a range of other OECD countries.

This report documents the findings of this research, which was conducted in two stages. The first stage focused on the experiences of asylum seekers since applying for protection in Australia. The second stage continued research with asylum seekers, but was broadened to include organisations and community support groups (hereafter referred to as service providers). The report draws heavily on the participants’ own words, thus providing an opportunity for asylum seekers’ voices to be heard.

The University of Queensland and the Refugee Claimants Support Centre have been involved in discussions around the need to undertake research in Queensland for more than three years. Funding was eventually secured for the first stage of the research from the UnitingCare Centre for Social Justice in 2004, while the second stage was funded by Multicultural Affairs Queensland in 2005, with in-kind support for both stages being provided by the Refugee Claimants Support Centre (RCSC) and the UQ Boilerhouse Community Engagement Centre. The project was carried out over a 12-month period from September 2004 - August 2005. Working together with the RCSC and a project reference group, the research brought together key stakeholders from the community to increase understanding about the experiences of community-based asylum seekers. These findings are important and enlightening, and present a crucial ‘lived’ perspective on this particular issue.

1.1 Asylum seekers and refugees

An asylum seeker is someone who, fearing persecution in their country of residence, has applied for, or is in the process of applying for, protection as a refugee. A refugee is defined as a person who,

“owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable, or owing to such fear, is unwilling to avail himself of the protection of that country” (Article 1, Refugee Convention).

By applying for protection, asylum seekers are exercising their rights under international law to seek safety from persecution (Refugee Claimants Support Centre 2003). Australia is one of 142 signatory countries to the United Nations Convention relating to the Status of Refugees (hereafter referred to as the Refugee Convention) and the 1967 Protocol relating to the Status of Refugees, which means that it is obliged to protect refugees on its territory and treat them according to internationally-recognised standards.

In 2004 it is estimated that there are over 19 million refugees, asylum seekers and persons of concern to the United Nations High Commission for Refugees (UNHCR) worldwide (UNHCR 2005). Contrary to popular belief, Australia receives relatively few refugees by world standards and while countries such as the United Kingdom and the United States maintain annual quotas of approximately 90,000 applications, Australia’s annual quota under its Refugee and Humanitarian Program stands at approximately 13,000 places; 6000 of these are reserved for offshore refugees while the remaining 7000 places are allocated...
to the Special Humanitarian Program and for onshore protection needs (Department of Immigration and Multicultural and Indigenous Affairs 2005).

1.2 On shore and off shore asylum seekers

In Australia, a distinction is made between on-shore and off-shore asylum seekers. Off-shore applicants apply for asylum outside of Australia, and once refugee status has been conferred, are selected for permanent resettlement within Australia from overseas (Mares 2001). Those who are selected for resettlement enter Australia with a visa that entitles them to permanent residence and resettlement benefits (Refugee Claimants Support Centre 2003).

On-shore asylum seekers apply for protection once they arrive in Australia, and find themselves in one of two situations, depending on their documentation when they entered the country. Those who arrive without valid documentation, such as a passport or visa, are detained in a detention centre while they await the outcome of their application for protection. Those in detention whose claims for asylum are subsequently accepted are released into the community on a temporary protection visa (TPV), and they can only be granted a permanent protection visa after 30 months, unless a shorter period of time is allowed by the Minister of Immigration. In addition to temporary residency, TPV holders are only entitled to restricted access to the full range of services available to off-shore refugees, and consequently experience much disadvantage.2 TPV holders are also unable to bring immediate family members to Australia.

Alternatively, onshore asylum seekers who arrive with a valid visa and subsequently apply for protection are provided with a Bridging Visa E, which entitles them to live in the community while they await the outcome of their application (Mares 2001). Asylum seekers on bridging visas most often have come to Australia on a tourist or student visa and seek asylum after arrival in Australia (Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004).

At the current time in Australia, community-based asylum seekers are denied access to most mainstream social services including employment assistance, income support, English language classes, and health and education services. Amnesty International estimates that there are currently approximately 8,000 to 10,000 community-based asylum seekers living in Australia (Amnesty International 2004), while the RCSC estimates that approximately 200 to 300 are living in the Brisbane area. It is hard to gain greater accuracy about either the Australian or Queensland population, due to a lack of publicly available data.

1.3 Applying for protection

After arrival in Australia, an asylum seeker must lodge an application for protection with DIMIA, who will make a primary decision on the case. If the decision is positive, the applicant is usually granted permanent residency and is given access to settlement services. If the decision is negative, the applicant has the opportunity to lodge an appeal with the Refugee Review Tribunal (RRT) within 28 days of having been deemed to have received the primary decision from DIMIA. The appeal process with the RRT, from submission of application through to receiving a decision, can take up to two years or more, although recently many decisions have reportedly been made more quickly. The RRT may overturn the primary decision, in which case the applicant is granted permanent residency and access to relevant services, whereas if the RRT decision is also negative, the applicant has one of four options, each of which must be pursued within 28 days. The options include judicial review before the High Court or Federal Court, although this considers only whether an error in law has been committed, it does not look again into the merits of a particular case. A second option is humanitarian consideration, which can be made through an application to the Minister for Immigration under Section 417 of the Migration Act, to substitute a more favourable decision in the public interest. Another option is that a second protection visa application can be made to the RRT, if allowed by the Minister, or departure (Refugee Claimants Support Centre 2003). Both judicial review and humanitarian consideration can take several years, during which time applicants are not allowed to work and are denied access to income support.

1.4 Legislative changes

Legislative changes since 1996 have further limited the rights of community-based asylum seekers, particularly the ‘45 day rule’, which came into effect on 1 July 1997. Prior to this date, asylum seekers were granted a Bridging Visa E (BVE) with full work rights and access to the Medicare health system (McNulty 2001). Under the 45 day rule, such visas are now only granted to those who submit their application for asylum within 45 days of arriving within Australia. If this deadline is not met, a BVE is issued which denies asylum seekers the right to work and study, as well as access to Medicare or

2 Given the specific focus of this report, “asylum seeker” is hereafter used in this report to refer to those who live in the community while they await the outcome of their protection application, rather than those in detention.
Centrelink benefits while their claim for asylum is considered (Australian Catholic Migrant and Refugee Office 1999a).

A common theme in the literature suggests that the 45 day rule assumes asylum seekers coming to Australia have prior knowledge about the protection system and the application process, and that they have the capacity to lodge an application soon after arrival (Australian Catholic Migrant and Refugee Office 1999a). However, it has been recognized that genuine asylum seekers most often do not lodge applications in the prescribed time for a number of reasons including:

- Uncertainty and unfamiliarity with the system and new environment, and a lack of knowledge about how to lodge an application for a protection visa;
- Misinformation from well-meaning family or community members;
- Language barriers and mental health issues;
- Fear of authorities and government institutions;
- The need to lodge an application only after having been in Australia for some time, for example those who are on a student visa (Refugee Claimants Support Centre 2003).

The 45 day rule therefore leaves many asylum seekers without the right to work, and thus any means to support themselves.

It is important to note that at the time of writing this report, numerous changes have been proposed and in some cases adopted in relation to the Migration Act. While many of these changes relate to TPV holders and asylum seekers in immigration detention, it is possible that broader amendments may be made as a result of the Palmer Inquiry and the current Senate inquiry into the administration and operation of the Migration Act. It remains to be seen whether further legislative changes will be made in relation to community-based asylum seekers; however the adopted changes, including the use of immigration detention only as a last measure, are welcome.

1.5 Living in the community

In addition to those who fail to apply for asylum within 45 days, other categories of community based asylum seekers are also denied work permission. Since July 1998, the current determination system restricts asylum seekers who apply to the courts for a judicial review, or who approach the Minister for humanitarian consideration on a BVE, from working while their case is being heard (Hotham Mission 2003). The loss of work rights and associated lack of a tax file number results in the loss of Medicare entitlements (Hotham Mission 2003). It also means that holders of a BVE are not entitled to access to English classes, resettlement assistance or access to public housing (Refugee Claimants Support Centre 2003). The appeals process through the RRT, judicial system and Ministerial intervention commonly takes a period of three years, during which time asylum seekers have no means of support.

The Asylum Seeker Assistance Scheme (ASAS) was first implemented in 1993, to provide a small sum of money to asylum seekers who were unable to work, or unable to obtain work. The scheme is currently administered by the Australian Red Cross, with funding from DIMIA (McNulty 2001). Legislative changes in 1996 meant that asylum seekers were only eligible to receive ASAS if they had been awaiting a primary decision on their protection application for more than six months (McNulty 2001). If an appeal is made to the RRT, asylum seekers usually lose their entitlement to ASAS payments.

These legislative changes, including changed eligibility criteria for the ASAS, have created a group of people in Australia who are denied access to any benefits and who are without permission to work. They are also unable to undertake voluntary work that would ordinarily attract a wage, which means that asylum seekers are forbidden from undertaking voluntary work in return for food or accommodation. This lack of access has left many community based asylum seekers dependent on charitable organisations and the goodwill of individuals for their survival (Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004). In this way, current policy has shifted the cost of supporting community based asylum seekers to the community sector. Small, often under-resourced community organisations and groups, particularly church-based organisations, have become the primary source of basic financial and emotional support to individuals with nowhere else to turn. While little research has been undertaken to explore the impact on such organisations, a recent report looking at community-based asylum seekers in Melbourne found that while existing organisations have a demonstrated capacity to meet the specific needs of asylum seekers living in the community, they are currently under-funded and under-resourced, and rely heavily on community support to be able to undertake their work; major agencies alone have over 350 regular volunteers to assist with their work (McNevin 2005:41)

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3 It should be noted that some cases have only taken six months, while others have taken up to as long as 15 years (Refugee Claimants Support Centre 2003).
Findings from this recent research conducted by the Hotham Mission (2003) reveal that asylum seekers on BVE are impoverished and live in abject poverty, with practically no mainstream support available to them. The severity of these issues, together with long waiting periods and the extended passivity of this group, has resulted in high levels of anxiety, depression, mental health issues and an overall decrease in health and nutrition. Family breakdown, in terms of both separation and divorce, were also experienced. The Hotham Mission found that BVEs had the greatest impact on single mothers, young asylum seekers, and individuals and families who have lost entitlements to ASAS. Inevitably, community-based asylum seekers experience social exclusion as a result of being unemployed, or from having limited English language skills. While communities do what they can, under-resourcing means that support is often limited and services are usually designed for short-term support rather than long waiting periods which most asylum seekers experience (Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004). As a result, many asylum seekers experience difficulties in relation to income and employment, housing, health care access and education.

### Table 1. The entitlements of asylum seekers living in the community

<table>
<thead>
<tr>
<th>Entitlements</th>
<th>Asylum seekers living in the community (BVE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commonwealth income support</td>
<td>• No access to any benefits provided by Centrelink</td>
</tr>
<tr>
<td></td>
<td>• If primary decision not received within six months, individuals may qualify for ASAS. If eligible, this entitles them to 89% of the special benefit</td>
</tr>
<tr>
<td></td>
<td>• ASAS benefits are lost if they appeal a decision beyond the Refugee Review Tribunal</td>
</tr>
<tr>
<td>Work rights</td>
<td>• Dependent on applying for a protection visa within 45 days of arriving within Australia</td>
</tr>
<tr>
<td></td>
<td>• Work rights are withheld if an appeal is lodged against an RRT decision</td>
</tr>
<tr>
<td>Medical benefits</td>
<td>• Only eligible for Medicare if permitted to work</td>
</tr>
<tr>
<td></td>
<td>• No Health Care Card</td>
</tr>
<tr>
<td></td>
<td>• Not eligible for torture and trauma services</td>
</tr>
<tr>
<td>Housing</td>
<td>• Not eligible for government housing assistance</td>
</tr>
<tr>
<td>Settlement support</td>
<td>• Not entitled to access to DIMIA-funded settlement services</td>
</tr>
<tr>
<td>Education</td>
<td>• May get access to primary and secondary schooling following consultation - subject to state policy</td>
</tr>
<tr>
<td></td>
<td>• Effective preclusion from tertiary education due to imposition of full fees</td>
</tr>
<tr>
<td>Travel</td>
<td>• Overseas travel, even if permitted, voids the protection submission</td>
</tr>
<tr>
<td>English classes</td>
<td>• Not eligible for federally funded English language programs or translating and interpreter services</td>
</tr>
<tr>
<td>Family reunion</td>
<td>• No family reunion rights, even for spouse and children</td>
</tr>
</tbody>
</table>

NB: This table has been adapted to show the entitlements of community-based asylum seekers while awaiting determination (Brotherhood of St Laurence 2002).

#### 1.6 Income and Employment

Research has indicated income and employment, along with housing, is a major need of asylum seekers (McLeod 1996). In Australia, social security benefits allocated to the most disadvantaged exclude one of the most impoverished groups, community based asylum seekers (McLeod 1996). Those with work permission have to accept the assistance offered by non-government funded programs, if available, such as the Basic Living Assistance Program provided by the Hotham Mission (Mitchell 2004a). Currently the program provides monthly cash relief, which offers a maximum of $30 per week. While barely sufficient, this amount is able to provide some basic food items and limited transport and communication (Mitchell and Kirsner 2004). Like all community based organisations offering support to asylum seekers, there is no regular funding for schemes such as the Basic Living Assistance Program, which rely upon donations given by community and church groups, trusts and individuals (Mitchell 2004a).

Given this limited assistance, it is common for asylum seekers to experience financial debt, for example due to unpaid legal bills, loans, rent or medical treatment (Hotham Mission 2003). Previous research has acknowledged that most asylum seekers would actually prefer to support themselves rather than receive social security (McLeod 1996). Importantly, asylum seekers want to give something back to Australia, and work has been recognized as meaningful task which provides an important means of keeping busy
and maintaining skills (McLeod 1996). However, restrictions may prevent many asylum seekers from undertaking employment, or even engaging in purposeful activity such as volunteer work (Australian Catholic Migrant and Refugee Office 1999a).

1.7 Housing

Recent research in Queensland has indicated asylum seekers on a BVE are in a constant crisis with regards to housing. Asylum seekers on BVEs are not eligible for housing assistance, and for those without work permission the lack of financial independence makes it extremely difficult, if not impossible, to secure stable housing (Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004). As a consequence, the location and provision of long-term housing is extremely difficult (Mitchell 2001). It is common for asylum seekers to find housing in single rooms in houses for a whole family, garages, and spaces in backrooms of factories without essential amenities such as showers and sometimes even toilets (Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004).

The private rental market is not an affordable option for asylum seekers without work permission, while those with an income still need to overcome language, cultural and discrimination barriers. The lack of affordable housing intensifies difficulties for asylum seekers, who are already vulnerable and facing poverty. The urgent need to find housing has meant that a number of asylum seekers find themselves residing in sub-standard and overcrowded rented accommodation (San Pedro 2001).

1.8 Health

As has been noted, asylum seekers without work permission are also ineligible for a Medicare card, and so are unable to access the healthcare system in Australia. Community-based asylum seekers tend to under use medical services despite the need for assistance, due to a range of factors including isolation, lack of entitlement, and financial hardship (Hotham Mission 2003). Research shows that an alarmingly high number of asylum seekers have been refused medical treatment, particularly general medical or dental treatment, the most common reasons for which are the lack of a Medicare card, lack of sufficient money to pay for required services, or lack of sufficient identification (Hotham Mission 2003).

Access to pharmaceuticals is also of concern, as individuals without a Medicare or a Health Care card are not entitled to the Pharmaceuticals Benefit Scheme (PBS) (Hotham Mission 2003). The PBS provides subsidised pharmaceuticals for card holders, and those who are ineligible must pay full price for medicines. This is particularly concerning due to the severe financial hardship that asylum seekers without Medicare cards face due to their inability to work or receive financial assistance.

Anxiety and mental health issues are recurring among asylum seekers (Hotham Mission 2003). Research reported greater anxiety among men due to lack of work permission, whereas women were more likely to be anxious about the lack of Medicare entitlements and the impact of this on children (Hotham Mission 2003). Single mothers expressed concern and were particularly anxious about the difficulty of accessing medical services, especially outside of office hours in the case of an emergency, due to isolation, lack of transport and lack of funds (Hotham Mission 2003). Asylum seekers also highlighted the impact of not having the opportunity to volunteer or study, as well as a lack of funds for recreation activities (Hotham Mission 2003).

1.9 Education

English language skills are essential to be able to work and participate in Australian society. Although the literature concerning education for community-based asylum seekers is limited, it is acknowledged that asylum seekers with BVEs are not eligible for government funded English classes, unless they are able to pay full fees (McLeod 1996). For many asylum seekers, this is not a realistic option. Children of asylum seekers are also affected by the BVE as there is no right to access education. While children may be able to access primary and secondary education, this is subject to consultation and depends on state policy (McLeod 1996).

The literature on asylum seekers living in the community is limited, though growing, and indicates that current policy is having the effect of undermining the self-esteem of genuine asylum seekers, while the imposed dependency challenges their dignity and sense of identity, and considerably magnifies their suffering (Hotham Mission 2003; McNevin 2005). Many asylum seekers already suffer the long-term effects of surviving torture, famine, discrimination and persecution, and are now in addition to this, being forced into poverty. Yet as Amnesty International has noted, “forcing significant numbers of people into poverty-like circumstances is a serious humanitarian concern, with important human rights implications” (Amnesty International 2004).

Little research has explored these issues more fully until recently, with the publication of three reports exploring welfare issues and housing needs of community-based asylum seekers (Hotham Mission...
2003; Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004; McNevin 2005). The current project set out to complement this emerging research by undertaking a relatively small, in-depth exploration of the situation for community-based asylum seekers in Queensland. The key strength of this approach is the use of qualitative methodology, which has allowed asylum seekers to talk in detail about their experiences and difficulties they have encountered since arriving in Australia. The results of this project are presented in this report.
2. **Methodology**

The aim of the research was to provide asylum seekers and support organisations with an opportunity to speak out, and therefore qualitative research was considered the most appropriate methodology. Specifically the aim of the study was to:

- Increase understanding about the experiences of Queensland’s community-based asylum seekers;
- Identify services and individuals which offer assistance to community-based asylum seekers, and determine any difficulties they encounter in providing support;
- Analyse how Australia is meeting, or failing to meet, its obligations as a signatory to the Refugee Convention;
- Compare the rights and entitlements of community-based asylum seekers in Australia with those provided in a range of other OECD countries.

There were two particular target groups for the project; asylum seekers on Bridging Visa E, and organisations and community support groups which provide welfare assistance and support to all asylum seekers.

**Project reference group**

A reference group was established in the early stages of the project to provide input and guidance for the research team, and to assist in major decision-making. Individuals were identified in consultation with the RCSC, and consisted of local community-based professionals, RCSC clients, and a local government representative, all of whom had knowledge of and interest in issues affecting community-based asylum seekers. In recognition of time constraints, the group only met at the start of each project stage, with the remaining communication being conducted by e-mail.

**Participant recruitment and research sample**

While the recruitment of participants was initially envisaged as being a major challenge, the project was able to benefit from the strong relationships that the RCSC has with its clients. Additionally, efforts were made to publicise the project among RCSC clients via the development of small posters which were displayed at the RCSC, the circulation of information sheets, and discussion of the research at monthly meetings with asylum seekers. This allowed the research team to find willing participants in a relatively short period of time. For participants from organisations working with asylum seekers, a list of stakeholders was drawn up with assistance from the reference group, who were then contacted individually and invited to participate. All who were contacted agreed to take part.

A total of 38 people participated in this research, 21 asylum seekers and 17 representatives from organisations and support groups that work with asylum seekers.

**Informed consent**

This research was cleared by the University of Queensland’s Behavioural and Social Sciences Ethics Committee. When taking part in University research, participants are usually required to give their informed consent by reading an information sheet and subsequently signing a consent form. In this project, it was felt that this requirement may increase reluctance among potential participants to take part. As a result, the usual consent procedure was amended to allow participants to give their informed consent verbally. An information sheet and consent form were given to the participant to read, or were read to the participant if they did not read English. The interviewer then signed the consent form on the basis of the participant’s verbal consent to participate.

**Development of interview schedule**

The selected method of data collection was semi-structured interviews, to allow the collection of comparable data while providing an opportunity for participants to expand on or raise issues of particular importance to them. Two schedules were developed, one for asylum seekers and one for service providers. For interviews with asylum seekers, questions did not relate to participants’ experiences prior to arrival in Australia, but instead focused on the key issues they had faced in Australia, such as their

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4 24 asylum seekers were actually interviewed as part of the research, but lack of time for tape transcription meant that three were precluded from the analysis.
protection application, employment and housing. The schedule was circulated for feedback, and subsequently finalised. The use of the schedule did result in some interviews being more structured than others, as some participants were more anxious and therefore less willing to talk freely. However, where people were willing to talk in more detail, this was encouraged and all participants were invited to share further comments at the end of the interview.

The schedule used in service provider interviews sought to learn about the assistance that organisations are providing to asylum seekers, the difficulties such organisations face in their work, and the things that are required to address these. Similarly, this draft schedule was also circulated for comment prior to finalising.

**Interviews**

All interviews were conducted in person by the researcher and a team of volunteers. All but two of the participants were interviewed in English; the exceptions, who were interviewed at the same time, were interviewed using an interpreter. The location of the interview was chosen by the participant, and included the RCSC, a local library, coffee shops, participants’ homes and places of work. Most interviews lasted between 45 and 90 minutes. Interviews commenced with the provision of an information sheet and signing of the consent form. Participants were advised that they could choose not to answer questions if they preferred. Interviews with asylum seekers were anonymous, with participants identified via an identification number and the date of the interview. All interviews, with both asylum seekers and organisational representatives, were tape-recorded, and the recordings transcribed to give detailed transcripts. Tapes were subsequently erased. At the end of interviews with asylum seekers, travel expenses were provided, where incurred, and a $30 voucher was later given as thanks for participating in the study. The reference group had discussed the appropriateness of providing such an incentive, and while it was felt to be appropriate, it was also thought to be important that this should not be used as an incentive to unduly influence people. A compromise meant that participants were only informed of the voucher when they attended for interview.

**Limitations of the study**

The major challenge of the project was the limited funding available, which meant that the research team largely provided their time on an in-kind basis. The project proceeded in two stages; the first involved interviews with asylum seekers, while the second phase allowed additional interviews to be conducted with asylum seekers, together with interviews with welfare organisations and support groups. While the project ran over a period of 12 months, data gathering and report completion was limited to a four month period, which was sufficient for data collection and analysis, but had implications for the recruitment of participants, as little additional time could be spent in the preliminary stages of the project to build critical trust and relationships with potential participants. This was essential given that the target group of participants, while not exactly a hidden population, could potentially be reluctant to participate in research for a number of reasons:

- Fear of being identified and concern over confidentiality;
- Fear of jeopardizing their claim for a protection visa;
- Mistrust and lack of understanding of the purpose and process of research;
- Reluctance to discuss their experiences yet again, given the distress and upset this can cause;
- Poor health, particularly mental health.

This challenge was largely overcome thanks to assistance from the RCSC, which endorsed the research and undertook participant recruitment. The RCSC was crucial in linking the research team with participants, and the researcher was able to benefit from the relationships and trust the RCSC has developed with their clients over the years.

Other limitations arising include the lack of funding for professional interpreters or for translation of project material. A nominal fee had been included in the project budget for interpreters, but this was well below the standard rate. Again, it is felt this did not have a large impact on the study as only two participants required an interpreter. Although not a professional interpreter, the person used was known to the participants, and therefore already had a relationship of trust with each participant. As a result, it is likely that this had some advantage over using a professional interpreter unknown to the participants, which could potentially have inhibited them. However, it needs to be acknowledged that the interpreter used was not accredited.

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5 Research undertaken by the Culture, Diversity and Community program ordinarily devotes time to building understanding about the project, in the process developing trust and relationships. Such preliminary work also provides an opportunity for community members to have greater involvement in the research process. The tight timeframe for this project was such that this methodology could not be used.

6 This refers to the first stage of the study, when only limited funding was available for interpreters.
Another limitation to be noted was that two of the interviews involved two participants being interviewed simultaneously, either through preference or lack of space. Efforts were made to ask questions of each participant individually, but it should be noted that the presence of another person at the interview may have resulted in some bias in the responses received.

Similarly, it must be acknowledged that our participants were recruited through a single gate keeper, the RCSC. While this organisation works with many asylum seekers in Queensland, there are inevitably others with whom it has no contact. Using the RCSC as the main link between the research team and the participants is likely to have created bias in the sample, and therefore the results reported here cannot be said to be fully representative of community-based asylum seekers across the state. It is highly likely however, that similar issues are experienced.
3. Experiences of community-based asylum seekers in Queensland

While statistical data relating to the number of community-based asylum seekers on BVEs living in Queensland is not made publicly available, the RCSC estimates the total to be approximately 200 - 300, most of whom are located in the south east of the state. A key aim of this research was to provide asylum seekers with an opportunity to talk about their experiences of seeking asylum in Australia, and in so doing, explore the reality of the impact of current government policy. As a result, this section draws heavily upon participants' own words. Attention was not given to the reasons why people were seeking asylum, because as a signatory to the 1951 United Nation Convention on Refugees, individuals have the right to come to Australia to seek asylum, and as such should be afforded some means of support while they await a final decision on their application.

A priority in the reporting of these results has been to maintain the confidentiality of all participants. The community-based asylum seeker population is relatively small and close knit in Queensland, and as noted previously, all participants were contacted through the RCSC. It has therefore been necessary to omit certain information to maintain confidentiality, and as a result, a small number of significant issues raised by participants have not been reported. However, it was felt to be more important to keep assurances given to participants regarding confidentiality, and so any identifiable information has been removed.

The first section provides a broad overview of the sample, and is followed by a consideration of issues such as employment, health care, housing, education, legal assistance and transport. The section concludes by highlighting what participants consider to be the key issues facing community-based asylum seekers in Australia.

3.1 Project sample

A total of 21 asylum seekers participated in this study, including 12 men and nine women, all of whom were on, or had been on a BVE.

<table>
<thead>
<tr>
<th>Age on arrival in Australia</th>
<th>Region of origin</th>
<th>Year of asylum application</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 20</td>
<td>Asia</td>
<td>5 1996 - 97</td>
</tr>
<tr>
<td>20 - 29</td>
<td>Africa</td>
<td>9 1998 - 99</td>
</tr>
<tr>
<td>30 - 39</td>
<td>Europe</td>
<td>2 2000 - 01</td>
</tr>
<tr>
<td>40 - 49</td>
<td>Latin America</td>
<td>2 2002 - 03</td>
</tr>
<tr>
<td>50 - 59</td>
<td>Middle East</td>
<td>3 2004 - 05</td>
</tr>
</tbody>
</table>

Of the 21 participants, eight came to Australia alone, 10 came with family members while three came with friends. Seven already had family members in Australia when they arrived, and most lived with those relatives at least in the early days following their arrival. Twelve knew no one when they arrived in Australia, while another had contact with an acquaintance they had not yet met. Fourteen people arrived in Brisbane, and have lived there ever since, while others have spent varying periods of time in other parts of Australia. Those staying with relatives moved out after an initial period of time, which ranged from a few months to two or three years, for a number of reasons including the need to feel more independent and less of a burden, or because relatives moved away.

Participants were asked about any help they received on arrival in Australia. All participants with relatives or friends in Australia received help from them, usually in the form of accommodation and other types of support. For those without family or friends, five received assistance from organisations such as the RCSC or the Australian Red Cross, while two received help from a local community with links to their home country. Several people reported approaching people in the street, and making friends that way with people who were then able to help them. Four reported receiving no help, which made the experience extremely stressful, as they had to try to locate relevant information while using up limited resources to survive.

Eleven of the 21 participants spoke little or no English when they arrived, and therefore needed greater assistance to overcome the language barrier. Several of the African participants spoke English in their home countries, but still found it difficult to communicate in "Australian English". At the time of this study.

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6 Six participants in this study had already been granted permanent residency when they took part, and were asked to talk about their experiences prior to receiving a final decision on their application.
however, nearly all the 21 participants spoke English to a reasonable standard, with only two participants requiring the assistance of an interpreter to take part in interviews.

3.2 Visa status

All participants in this study arrived in Australia with valid visas.

<table>
<thead>
<tr>
<th>Visa type</th>
<th>Visitor</th>
<th>Student</th>
<th>Business</th>
<th>Unsure of type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>13</td>
<td>3</td>
<td>4</td>
<td>1</td>
</tr>
</tbody>
</table>

Those who came to Australia as students had intended to return to their home countries after completing their studies, although as the security situations deteriorated during their time in Australia, they subsequently applied for protection once their studies were completed. Those who arrived as students were obviously affected by the 45 day rule, as they arrived in Australia intending to return to their home countries after study:

“... because I came here as a student, my plan was not to stay here, but to go back, and then [events in home country], I could not go back, so I don’t have any idea to what’s the rules, you know?”

Another four individuals were affected by the 45 day rule simply because they were unaware of its existence. Two participants noted that they had been unable to afford to pay for legal assistance to complete their applications, but received voluntary help through a member of their church. Unfortunately, the volunteer was not a migration agent and was unaware of the 45 day rule. As a result both participants failed to apply in the required time, and so lost their right to work, study, or Medicare:

“The one that helped us originally from the church, he was not familiar with things, he didn’t come from that background, he was in commerce, and he was not aware that we could get permission to do all that.”

Similarly, another participant who arrived alone and who spoke little English at that time explained how by the time they had found assistance through some local organisations, the 45 days had passed:

“I think the 45 days had already passed, I did not know about the 45 days, because we tried our best to find more information on how we are going to do it, at the time we get to the Red Cross and the Red Cross told us to go to South Brisbane [Immigration and Community Legal Service].

Another participant highlighted that having escaped the authorities in their own country, they were concerned about approaching the authorities in another country as they were afraid about what would happen:

“It was sort of a hardship for me to understand what to apply ... because I was running out from the authorities in my country. At the same time I have to go to the authorities in Australia. And ahh, it was hard for me to understand their level of communication. Whether they would hand me straight to the other side, or whether they would lock me in a cell. Some people told me they would lock me in a cell.”

This illustrates the difficulty for many asylum seekers on arrival in a new country, particularly those who arrive alone and/or who do not speak English. Trying to obtain relevant information and understand the legislative requirements of applying for asylum can be daunting, confusing and time-consuming, and it is unrealistic to think this can always be achieved within a 45 day period. A failure to lodge an application in that time however, does not necessarily imply that such individuals do not have a valid claim for protection, it is simply a reflection of individual circumstance.

Obtaining relevant information is crucial prior to submitting an application for protection. Nine participants were referred by friends or organisations to a community legal service, the South Brisbane Immigration and Community Legal Service (SBICLS), who offered help either to complete the application form, or by taking on particular cases. Eight applicants stated that they received no help to complete their application forms, although most spoke good English at the time of their application submission. The other four participants who spoke little English when they arrived received help from family members (two individuals) or through a church (two individuals).
Participants were asked about their current status in the application process. Six have already been granted permanent residency, while the remaining 15 are still awaiting a decision, and are highly anxious about their future. The length of time since applying for protection ranges from a few months to nearly nine years:

![Graph showing length of time since applying for a protection visa](image)

Of those still awaiting a decision, 11 have applied for Ministerial intervention, five of whom have been waiting approximately two years to learn of the outcome of this appeal. Two participants have appealed to the High Court and are still awaiting a decision after one and three years respectively, while another two have appealed to the Federal Court. All participants are on, or have been on a BVE. These visas require frequent renewal, for which participants must travel to DIMIA. The amount of time that the visa will be extended by is at the discretion of DIMIA, which means participants are always unsure as to the length of extension they will be granted each time they apply:

"I don’t know, because I keep renewing it, every two months, you are going to get the visa, every six weeks, and then now it’s four weeks to go, I am going there in two weeks time."

Visa status affects every aspect of the lives of asylum seekers in this study. While introduced as a deterrent to non-genuine asylum seekers, the 45 day rule acts to punish many who are likely in the future to be recognized as genuine refugees. Lack of access to employment means no income, which not only creates difficulties in terms of everyday living, but also to obtain appropriate legal assistance in applying for asylum. One participant noted the expense of using the option of judicial review, and the difficulty of covering such costs:

"Even at the court, just to appeal, just to put in your paper, your applications it’s around $2000, $1500, just a paper. And then plus you have to pay your solicitor and all those things."

While this participant had work rights and a job at the time many do not, and remain dependent on the support of others. Participants reported facing complex legal processes and legislative changes, which made it difficult to obtain an accurate understanding of their situation. One participant said they had won an appeal to the Federal Court, and that previously in such a situation, individuals would have been allowed to stay. New legislation brought in shortly before their trial hearing though, meant that despite having won the review application, their case was referred back to the RRT, where it was subsequently rejected.

The length of time that many people have been waiting to hear of the outcome of their application is striking, with well over half the participants have been waiting for more than three years, while two people have been waiting for nearly nine years. During this time of waiting for a decision on their future lives and safety, participants reported experiencing enormous stress and pressure. Participants described their experiences of awaiting the decisions on their cases, and the impact the uncertainty has had:
“It’s very stressful because you don’t know, it happens that you just appeal and then you wait, and you don’t know when you would hear from them. All of a sudden, they’ll say we are having a hearing in the next few weeks or next month, so then you have to be prepared and it’s all tension you know. You can never sleep peacefully because you don’t know when you wake up the next day if you’re going to live here, you’re in danger anywhere. It’s not very good, because you flee from your country, you just don’t want to live there, you just want to forget everything and live in another place, and that is more torturous.”

“Always I don’t know what is going to happen next so, and if I don’t feel safe, then everything doesn’t make any sense you know, so that’s the big problem.”

“I’ve not heard anything, no. So that’s why I’m scared, that one day I will get mad and kill myself, if you are kept in like this situation, it’s nothing changed, it’s very hard you know.”

“Like it’s not a kind of life I am happy with … I always feel I’m unsafe.”

During this time, many are refused permission to be able to function independently while living in the community because of the restrictions of their BVE, which creates a range of difficulties.

### 3.3 Work

As noted previously, the introduction of the 45 day rule in 1997 has meant that any individual lodging an application for asylum after 45 days of arriving in Australia is denied permission to work. For the participants in this study, all who now been granted permanent residency did initially have permission to work, and only one had this revoked during the appeal process. However, none of the 15 participants who are currently on a BVE currently have work permission. Eight have never had the right to work, study or access Medicare, while seven participants did at some point in the past but have since lost these rights at various stages of appeal.

For the eight participants who had work rights in the past, all who had wanted to find a job had been successful and were able to support themselves. Several participants noted that it had taken a while to find work, between one and four months, primarily due to a lack of Australian work experience or an Australian reference. It was particularly hard for participants with low levels of English language skills. However, once work was found most participants reported working until their work rights were withdrawn. The most effective way of securing a job was through friends and contacts, particularly those at the RCSC, although two participants reported finding work from a newspaper. Without the help of networks, finding employment is much more of a struggle:

“Actually it was very easy, because we had lots of friends here [RCSC], they actually helped us. If … just me go to the streets and go for a job, it’s impossible. I tried, I went to lots of restaurants, applied, just no, no thank you. But we had lots of friends so it was very easy for us.”

Participants who reported losing their work rights after a negative decision from the RRT spoke of the significant impact this had had on them, having started to build up their lives in this country, then finding themselves in a completely changed situation:

“It’s hard when you’ve been working, and you’ve been earning money and doing stuff. You know maybe you’ve got a car and are living alright, you know? And then all of a sudden the means of getting the money is just cut off. And there’s no other way of earning money. … It is very hard to survive you know, … you have to be dependent.”

Another participant who lost their work rights over two years ago understands the rationale behind this policy, but considers it to be flawed:

“I know withdrawing my work permission … they’re [the government] trying to put me in a very bad situation, to make me leave the country. But they have to think about, I’ve been in this country, before I lost my work permission, for four years, and I’ve got lots of friends, and they are willing to support me any time, any way. So it won’t be a big pressure for me. So that’s why I think it’s silly, because by withdrawing my work permission, I’m not able to work, so I can’t pay tax.”

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8 Two married female participants were not looking for paid employment.
Participants were also asked whether they had undertaken any voluntary work. Regulations governing voluntary work are complex and confusing and are not widely understood. Some voluntary work is allowed, providing that it is not work that would ordinarily command a wage. So for example, asylum seekers without work rights are not able to undertake work in return for accommodation or food, or other types of work that would ordinarily be undertaken by a paid employee. It is therefore difficult to determine with any certainty what voluntary work is and is not allowed. Eleven participants stated that they had at some point undertaken some work on a voluntary basis in a range of community organisations such as the Australian Red Cross, as well as in public buildings such as hospitals and galleries. While most recognized the value of doing such work, three people noted that the lack of assistance with transport costs from the volunteer organisation made it problematic for them to attend:

“I tried to get voluntary work, but some is not accessible, some is far from where I live, some is away from transport. Now I’ve got a car but there is no car park, so it’s not feasible for me working as a volunteer.”

The way in which participants discussed the work they had done highlights the importance they place upon being able to participate and contribute to society in some way, and how difficult it would be if they were unable to do this. A couple of participants explained what they enjoyed about voluntary work, and how difficult it would be if this was not allowed:

“Yeah, because that’s how I keep myself positive, and healthy, otherwise it’s been a long time, almost five years, just for me day and night, all the same, because if I can’t volunteer there’s no way for me to survive. So I don’t know what will happen in the future, still I have not any idea, but I have to keep myself busy and then I can survive. That’s how I survive, I don’t mind about money or things like that, all I care is just to get out from this thing.”

“That’s something [losing right to volunteer] that would really depress me, if I don’t have work rights at the moment. That’s what really depressed me also, you don’t need to get paid but at least go and do something, with your happiness you do something in the community, at least it takes away your worries. Otherwise you are just locked in a place...”

It is clear from these comments that the need to undertake meaningful work is not simply related to money, but the need to keep busy, to feel useful and to make a contribution by working, as this participant noted when describing how not being able to work affected them:

“I am seeing myself sitting in the house. Every day just sitting there. It drives me crazy. It stresses...it disturbs my mental wellbeing. It puts me down, lowers my self esteem. And also, my brain is taken backwards. In that if I was working, it would assist me more. ... It's not about the money, but it brings joy to see that you are doing something. And it helps to improve your self esteem.”

Four participants reported that they had lost the right to undertake voluntary work when they lost their work permission, and talked about the significant impact this has had on their lives. One individual had been undertaking voluntary work to obtain food and accommodation, something that is not permitted under DIMIA regulations. The individual was unaware of this restriction, and described the shock on learning that this was not permitted:

“I went to the Immigration department to say that I was basically volunteering in return for my accommodation, because obviously I was unable to pay, and they told me, well you have to speak to the manager right now, and tell them that you cannot do that any more, because you are not allowed to do any volunteer job at all. So I was just crying and shocked at that, because you know, it just ties you up, you just don't think, you know just the very bottom line you can expect, no right to work, no income at all, can’t even volunteer to survive. Yeah, so it was one of the hardest points for me really, but it’s gone fortunately, it’s over.”

Asylum seekers on BVE are not entitled to government benefits of any kind, and therefore the only access to an income is to find work. By being denied the right to work, people are left to live in the community with no means of support whatsoever. As a result, they become completely dependent on the good will and charity of individuals and organisations in the community sector. The lack of access to work rights is therefore a key issue, if not the key issue facing participants in this study, causing a range of problems:

“Well sometimes I can’t send my children to school because there’s no food to send with them you know, and I feel oh so terrible.”
“Because since I’ve been here I’ve never worked, it’s like I never feel like having money ... all the dreams I have, it’s just all gone because there’s no money, I never see money, I never touch like yes, there’s money there. I never plan for nothing, because I’m not sure if I’m going to get it or not.”

“Like, now I have the flu, for days now, but I can’t even, I don’t even have money to buy Panadol”

Participants reported often finding it difficult to survive on the support that is available, and there is also concern about the continuation of such sources of support. However a range of related issues were also identified including boredom and stress:

“It psychologically brings you down. You feel, you know, rejected, unwanted, confused, you feel miserable, because there’s no good, there isn’t anything in life, just living and waiting for whatever.”

Another issue raised by participants is the way in which the lack of income makes them feel like they are a burden, due to their total reliance on others. Whether people rely on family, friends or community organisations, the feeling of being a burden is often present, and increases the stress and frustration people experience:

“The one thing that’s a major worry is just to be a burden to the community, that’s very difficult.”

“When I lost my work permission, [community worker] found me somewhere to live. I went there and I sat there. They were very nice people, they were trying to make me feel at home, but I couldn’t, I was thinking I’m sitting at home, they go and work, they bring food or stuff home, and I’m just like a user, sitting at home. I couldn’t stand it.”

The fact that asylum seekers are able and willing to work, but are simply not allowed to by law, exacerbates these feelings:

“Like I’m a healthy person, I can work you know. I can do a lot of things, but it kind of feels like they’ve just tied my hands and legs there and I can’t go anywhere you know, [I] can’t do things.”

Many asylum seekers are therefore totally dependent on others and extremely restricted in terms of choice in anything that they do. Two participants described how this reliance affected them, and while acknowledging much gratitude for the help they receive, highlighted other difficulties of relying on others for things they need, such as medication:

“It’s very very generous for them you know [to buy medication] if they can just say OK, come with me and I will buy it, but I can’t just ring them and tell them, please can you buy me this because I don’t have any money. So it’s really really terrible.”

Another also spoke of the problem of depending on charity, and the impact it has if there is a problem in the sources of support that organisations provide:

“... but occasionally they [supporting organisations] forget or for some reasons don’t do on time, so that’s very difficult to ask them, ... Sometimes I just keep quiet.”

Another person added the frustration that the talents they have that they could be contributing are going to waste. Similarly, another voiced their concerns that having been denied the right to work for so long, they would never be able to work should they be granted permission in the future:

“... maybe I will never work, or maybe if the time comes for me to work maybe I will never be able to work, because I’ve never worked. It’s quite hard to live for five years with no working, your body just like, I don’t know if I’ll be able to work even if they give me work now...”

Other participants spoke of how their experiences affect their self-esteem and dignity, and one person described feeling like “a second-rate person”. Having been unaware of the existence of organisations such as the RCSC for the first couple of years while seeking asylum, their level of poverty was extreme:
feel for a person when you can’t even take a bath, we have to walk. I used to catch catfish in the river to eat, and eels from a swamp.”

The problems described above are real and immediate to the participants of this study, and impact upon their lives every day. One participant, while acknowledging that lack of access to work is a problem, nevertheless described positive outcomes from their time in Australia, but for the majority of participants their circumstances, experiences and problems are such that it is hard to maintain a positive outlook, particularly given that they have no knowledge of how or when their application will be resolved.

3.4 Financial support

Participants with work permission were generally speaking able to support themselves financially, once they had found a job. However, as most participants in this study are unable to earn an income, or have at some point been in this situation, participants were asked how they were able to support themselves. Two participants are currently being supported by family members, although this has only been the case for the last year; prior to this, they were in the same situation as the other participants.

The majority of participants reported relying heavily on the RCSC and the network of individuals and organisations with whom they work for financial support and emergency relief. This network has the sole responsibility for ensuring that community-based asylum seekers without work permission survive while they await a decision on their application for protection, which can take several years.

Typically, accommodation costs and sometimes bills are paid by community organisations, vouchers are provided for food costs, and 10 trip bus tickets are also periodically available. A small amount of cash may also be provided as emergency relief:

“I don’t usually get cash, but like bus tickets, food vouchers and accommodation, people help me with accommodation, so that’s how I survive.”

Based on the experiences of participants in this study, accommodation expenses, vouchers and cash are currently being provided by a core of organisations and support groups, including the RCSC, the Red Hill Paddington Refugee Support Group, the Refugee Assistance Program, the Tzu Chi Foundation, and the Gateway Refugee Support Group. The Australian Red Cross also provides some emergency relief in the form of food vouchers, although a number of participants reported that this supply has recently been exhausted. The Australian Red Cross is provided with an annual allocation of food vouchers, and at the current time demand has outstripped supply:

“But they have stopped at the moment, they’ve stopped giving vouchers so I get cash from others, other organisations, like humanitarian. … They didn’t tell us why; we went, they didn’t even let us know, we went as usual you know, we get money OK for this week, but they said sorry we can’t give you any more.”

Other organisations also acknowledged by participants as providing financial assistance include St Vincent de Paul, Lifeline Community Care Brisbane and the Benarrawa Refugee Support Group. Most participants are linked with these organisations through the RCSC, which provides important links for asylum seekers with other in similar positions, producing a network offering support and information sharing.

While such assistance provides an essential lifeline to asylum seekers, funds are necessarily limited and most participants have around $50 a week to live on, more for a family, part of which is likely to be in the form of food vouchers. While accommodation and electricity bills tend to be covered separately, the money participants receive has to cover all other expenses including food, telephone costs, clothing, personal items and transport. Participants can sometimes obtain 10 trip bus tickets from the RCSC, courtesy of donations or recently from the Brisbane City Council (BCC). However, as of the end of 2004 the RCSC no longer receives bus tickets from BCC. Participants receiving food vouchers from the Australian Red Cross will also be given a bus ticket, although the purpose of this is to cover transport costs to pick up food vouchers from the Australian Red Cross in the city.

With a total weekly income of approximately $50, participants face extreme poverty and hardship. Things taken for granted by many Australians are denied to asylum seekers without work permission.

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9 This was reported in the first stage of the research, in November 2004.
10 It is important to note that these are not the only organisations providing financial support and assistance to asylum seekers in Queensland, but are simply those highlighted by participants in this study. An overview of these and other organisations assisting asylum seekers is given in Appendix 1.
11 Brisbane City Council has continued this program, although it now targets newly arrived offshore refugees and no longer includes community-based asylum seekers.
Access to telephones can be problematic, with many participants in this study reporting not having access to a land line. This makes them dependent on mobile phones for communication, although their limited cash income makes it difficult to maintain their use:

"Before I was living in [suburb], so there was a telephone, a home telephone, so that was really easy for me to ring out, you know local calls and the people can ring me. But now I have just a mobile phone, and it’s very very hard, I’m just depending on people who can ring me, rather than I have to ring them. And that’s also very hard you know … sometimes I just have to call."

Access to a phone line is not only important in terms of emergencies but it is also a key means of communication, and like transport can play an important role in overcoming isolation and loneliness. Even for items such as clothing, participants may have to rely upon friends and donations:

"... because for my clothes or shoes or something, it’s extra money. It’s extra, but my friends buy me clothes, in the church, they buy me clothes so I don’t have any problem with the clothes and shoes. I’ve got plenty so that’s fine, even if it’s not what I want, it’s still clothes and shoes that I need, it’s great."

This highlights the key role played by many individuals and organisations in addition to those highlighted above, who support asylum seekers in a myriad of ways, even if not in terms of weekly rent and food vouchers. Participants spoke warmly of their gratitude and appreciation for the help and support they have received from friends and community members on many occasions. This includes gratitude to a number of professionals who provide a range of pro bono services to asylum seekers, including doctors, dentists and lawyers (see Sections 3.5 and 3.9 below).

3.5 Health care

All asylum seekers on a BVE without work permission are ineligible to enrol in Medicare, Australia’s universal system which provides eligible Australian residents with access to health care. Similarly, they are ineligible for the Pharmaceutical Benefits Scheme (PBS), which assists Australians with reduced cost medication. At the current time, 14 of the 21 participants do not have a Medicare card, which makes accessing health care at most clinics and hospitals either difficult or impossible. Yet health care is a key issue, with twelve participants in this study reporting negative changes in their health since arriving in Australia. Largely this is felt to be a direct consequence of the stress and depression they have experienced during the years of waiting for a decision about their application:

"Yes, I think because of stress you know, uncertainty, always I’m feeling tired, and sick, yeah. And when I go to see a doctor they do everything you know, blood [test] or anything, the find nothing."

"All my health issues are the result of that, because of the way it affected me. ... I brought my [health issues] and other stuff with me, but on top of that it affected my health. All my illness is stress-related."

"... I’m thinking so much about my situation, so I think sometimes it affects me. I have this headache, I think it’s unusual because, it’s because I’m kind of emotionally tortured, because I’m not happy. I think that’s my problem."

In Queensland, lack of health care access has been the source of many problems until relatively recently. In October 2002, a partnership between the Queensland Program of Assistance to Survivors of Torture and Trauma (QPASTT), the Mater Misericordiae Health Services and Queensland Health resulted in the establishment of the Queensland Integrated Refugee Community Health (QIRCH) Clinic. While not designed to provide on-going care to clients, the QIRCH clinic has recognized the exceptional circumstances that asylum seekers face, and so may assist these clients by acting as their primary care provider. That the QIRCH clinic has had a significant impact on the lives of asylum seekers in Brisbane is obvious, and was noted by many participants in this study:

"Well the clinic ... it is just heaven sent for refugees, you can imagine the benefits it has brought. But before well, I feel sorry for the refugees really, you know in my case it was OK [because of good health] but say someone with the health problems, I can’t imagine how difficult it would be."

12 The QIRCH clinic can provide health care, together with free medication and diagnostic testing. Further details about the QIRCH clinic are located in Appendix 1.
Prior to the establishment of the QIRCH clinic, most participants reported that they were able to access doctors through the RCSC. The RCSC established a network of doctors and nurses willing to provide free treatment at the RCSC on a voluntary basis, which came to be known as the Brisbane Refugee and Asylum Seeker Health Network (BRASHN). This network has been key in allowing the RCSC to arrange treatment for a number of participants, including surgery, all of which has been provided free of charge. This reportedly includes not only the QIRCH clinic, but assistance provided by other hospitals in Brisbane:

“I had a scare lately with a [health problem] and I was sent to the [hospital], again it’s all organised through the RCSC. And it was free of charge, and then there is a doctor at the QIRCH clinic that I went to, and the results were given to me there.”

One participant noted that they had not sought help from doctors in the past, and so were particularly happy at the establishment of the QIRCH clinic. When asked whether they had accessed a doctor in Australia, the participant replied:

“Oh yes, many many times before, with the Mater Hospital, the QIRCH clinic started to give us a service, a free service. Even if I am sick before there is no one who can see me, but now since they [QIRCH] started, I’ve been before like more than 20 times, yes.”

Until 2005, the QIRCH clinic was only open three days a week, and some participants reported that this was problematic. Three people interviewed before the increased opening hours noted the difficulty of falling ill on a day when the clinic was closed, and the need to seek alternative arrangements to see a doctor in such cases. This may have involved accessing the network of volunteer doctors through the RCSC, although as this is also not a full time service, participants at times had to go to the emergency department of a hospital, or pay to see a doctor privately. However, since the beginning of 2005 the clinic is now open five days per week, which should help to address these difficulties to some extent.

Another issue that the establishment of the QIRCH clinic has helped to address is access to medication. For many asylum seekers, access to the health system is only part of the difficulty, due to the cost of medication that is not available under the PBS. The QIRCH clinic negotiated an agreement with the Mater Hospital so it can now provide free medication and diagnostic testing. In the past these have been difficult for asylum seekers to obtain, and they have had to rely upon the RCSC, friends, or even on occasion the doctor who assisted them:

“And then the QIRCH clinic in the Mater Hospital, and then we started to get medication. Before that, the RCSC would give us money for medication, but now we get it free [from the QIRCH clinic], and one of the doctors used to buy them from her own money.”

“I’ve got lots of medications, which is from people who bought for me, not from the Medicare you know, the government. ... if I go there and see them [QIRCH clinic], then they will look up on the computer whether the pharmacy had this medication or not. If they do have then I will go there across the road which is good, so I can [get it].”

Participants were also asked whether they have ever had to pay for any medical assistance. Eight participants responded that they had not, while four indicated that they had. Another described how in an emergency they had been taken to a local hospital by ambulance, and then received a bill for the treatment:

“Still, they admitted me, but they were asking for the Medicare, and I said no, and they sent a bill for $800, they treated me, they gave me all the attention and everything. ... And then I spoke to RCSC and the RCSC just wrote to them and explained.”

In addition to asking whether they had ever had to pay for medical attention, participants were also asked whether they had ever been refused help. While most had not experienced this, one participant told how they have sometimes been sent home from an emergency department, or had to wait for long periods of time to receive help:

“Sometimes they didn’t treat me. I am sick, but they say you are not sick, just go home. Sometimes I’m waiting 10. 12 hours.”

Two participants also reported having access to free dental treatment, at a clinic in Brisbane, another arrangement that has been established with the help of the RCSC. While the number of voluntary dentists is limited, the RCSC is usually able to arrange for some assistance for clients experiencing dental problems, although no dental technicians are available if more complex work is required. Access to oral health care has been greatly helped in the last 12 months with the establishment of a free dental clinic, held twice a year by the Tzu Chi Foundation in partnership with QPASTT, and is open to asylum seekers and refugees.
Participants were also asked about their health since arriving in Australia. Lack of work permission or other form of income has created great poverty for a number of participants in this study, and one participant spoke of the challenge of obtaining sufficient nutrition in their diet due to their lack of money:

“As I said, financially it’s very very difficult, even eating properly is difficult. I always get sick you know, because there’s not enough nutrition. I see a doctor often, but they don’t do anything for me, because it’s not a disease, but a lack of nutrition.”

Adequate nutrition was also key to two other participants, both of whom have been diagnosed with diabetes since being in Australia. Both have to manage their illness through diet, yet have only $50 a week to live on:

“That’s the problem, I saw just a couple of months ago a dietician, but I have $50, so I can’t, especially I thought you know only expensive is meat, but even vegetables are very expensive.”

Other health issues were also discussed. Three participants described how the application process and long wait have impacted on their lives, and how these health impacts are a result of the stress they have been under during the application process.

“All my health issues are a result of that, because of the way it has affected me.”

The experiences of accessing health care as reported by participants in this study are fairly positive, even if this appears entirely due to the commitment of a small network of health care professionals. Through the RCSC, BRASHN, and more recently the QIRCH clinic, community-based asylum seekers without the means to pay for health care or medication have been assisted and supported, and are generally able to meet their most urgent health care needs. While a number of issues still need to be resolved, on the whole the interviews provide a relatively positive assessment for health care access for those without Medicare cards. However, given that the QIRCH clinic has yet to secure continuing funding, it could become a more significant issue should the QIRCH clinic close down or be unable to offer free treatment to those on BVEs.

3.6 Housing

Housing is another key issue, particularly in Brisbane at the current time due to rapid growth in the housing market and the lack of affordable accommodation. Asylum seekers often lack money to pay for accommodation, and are therefore reliant upon friends and family, free accommodation, or on rental payments made by community groups and organisations. The issue of housing in Brisbane has been explored relatively recently and a detailed report has been produced (Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004).

In this study three participants reported being homeless for short periods of time, two of whom were homeless after arrival and lived on the streets for a few days, while another reported living in a car for four days, after being given notice to leave their current accommodation. One participant spoke of the difficulty of finding somewhere to spend the nights when they were homeless:

“So there was this bar that was open until the early hours of the morning, so I was just hanging out there, talking with the bar person ... but he didn’t know I was using that to wait until the next day, because at the time I was there it was the first day. The second day I was there, but the third day I couldn’t go there again because I think he now knew that maybe I just come there to hang out until the next day. With the same clothes on. I became a bit ashamed of myself, so I didn’t go that way again. I was in King George Square. I was looking at the light and at the flowers and I kept walking around. That was how I, how the nights passed. The next morning again I start walking the street again.”

In addition to those who spent time without shelter, a number of participants have effectively been homeless due to restricted access to longer-term accommodation. While they may have had access to a range of accommodation types, much of what is available has only been short term, for perhaps a couple of weeks or months, after which alternative accommodation has had to be found:

“I would get some accommodation and they tell me I could sleep there for one week. And after that I have to move. They only give me [the accommodation] for a certain time, then I [have to] go to a different place.”

Participants reported having to move between one and 13 times, and living in a range of accommodation types such as staying with family members, living alone in a unit, sharing a house or unit, living in a
room in someone’s house, or forms of emergency accommodation such as a hotel, backpackers hostel or boarding house. Two participants also reported living in caravan parks, while another two lived in a garage.

Generally speaking, participants find accommodation through friends or family members, or with help from the RCSC and the network of community support groups. While those living with family or friends currently have less need for rental support, individuals living in other types of accommodation rely on either the donation of free accommodation by community members, or on support provided by community support groups and organisations. Such groups tend to pay rent, and may often also cover bills such as electricity. Of the participants in this study still awaiting an outcome on their decision, five noted that they are currently being assisted by community support groups, while many others reported receiving similar assistance in the past. The RCSC has played a vital role in both providing rental support, and in linking those seeking accommodation with organisations able to provide assistance. In terms of finding actual accommodation, this is often done by the community groups themselves.

At the time of interview, all participants currently have somewhere to stay, although one person is at serious risk of becoming homeless, as they were staying in temporary accommodation for two weeks. For others, the situation is precarious and a number of issues were reported which are likely to contribute to the stress experienced by participants. Key is the uncertainty that people experience about the length of time that they can live in any one place. As most people are unable to pay their own rent, they are dependent upon decisions made by others as to where and how long their accommodation will be available to them. This uncertainty can make things very difficult, as one participant explained about their current situation:

“Now they are saying they are going to put rent up … I don’t know whether she will agree to pay a little bit more, or if I will have to move again, and I hate that. Because for me, I have to tell my address to everybody again, especially the immigration people, and sometimes they don’t get the right address, they keep sending to the old address and then I will be in a problem. And that also really worries me.”

All participants currently assisted by community organisations expressed their appreciation for the support they are given, which provides them with somewhere to live. However, the lack of control over accommodation arrangements is problematic, as constant situation changes mean they must adapt once again. Added to the uncertainty participants experience in other areas of their lives, this can cause additional insecurity and anxiety:

“Because of my experience you know, I have not been secure, because every time I leave, all of a sudden, like the [community organisation], they can’t support you any more. … With short notice, I have to always, you know, even panic, where do I have to go now? … it is always difficult you know, it’s not only in my hands to find accommodation, whereas if I have money I can find you know, at very short notice I can find somewhere simple for a while, but for me where, not knowing anything, that’s the big difficulty.”

In previous moves, participants expressed concern that the short notice period they have sometimes been given creates extra challenges, given their dependence on rental support and the high costs of private rentals. One participant, who has lived in 13 places since arriving in Australia five years ago, highlighted this issue while another described how the lack of notice can cause homelessness:

“They offered me a room in [suburb] to live with a couple of refugees, so I stayed there for three months, and we were asked to leave because the owners of the house were actually taking back the house, so we had to leave by December. … Another church pastor offered me accommodation for three months … So I went there but it was harder, they offered me accommodation technically for a couple of months they said, but somebody was coming from overseas, so they rushed me to find accommodation, so I had to leave within a week.”

“I had to leave because the owner wanted to sell the house. So we all looked desperately, they gave us two weeks’ notice to leave. They all found somewhere, I couldn’t, so I had to wait for four days in my car. It was pretty good!”

A number of participants have at some stage lodged with individuals or families in their homes, and while this is one solution to the accommodation issue, it may not always be ideal. Transportation in particular can be difficult, particularly if the accommodation is a long way from the city or from transport routes, and several participants noted that this was one reason why they had to move in the past. Similarly, the long period of time that participants require accommodation support is also problematic:
"In [suburb], she helped me for a year, and that was enough for her, she gave me help and assisted me for a year.”

Four participants reported staying in hostels or boarding houses for periods of time. For one participant who had previously shared a house with another person, this was not an ideal situation, due to the lack of privacy such accommodation affords. However, two other participants spoke of bad experiences from their time in such accommodation, where drugs and alcohol created difficult situations at times:

“That house was very very very hard, because most of them are druggies, are homeless people, because they live together, five people in one house. … Each of four people have 20 friends, 20 homeless friends, so the door is not closed at all. Day and night, because some people they come and sleep on the lounge, all full sometimes, too many people.”

Both also reported experiencing racism while living this type of accommodation (see Section 3.10 below). While uncertainty and insecurity about current and future accommodation were key issues, a number of other things were also reported. One participant, who has moved five times in five years described how the continual moving has led them to give away of most of their possessions:

“Everything that I brought with me, all my personal stuff, books, I just gave away, because I just couldn't carry it from one place to another. Even my own earrings, silver earrings, because I just couldn't. Where am I going to handle all this luggage with me? So somebody in the church kept admiring my earrings, and I ended up, I took them off and gave them to her. And since then I don't need any ornaments, I don't need anything.”

Another person commented on how having accommodation does not necessarily mean that they have a home:

“You can have someone to stay with but you don't share the same. I came from somewhere where you live as a family, five or six people in the same house, you talk the same stories, you have the same meal. But with different people, like I cook my own meals, they cook their own, they do different things, I do my own. ... It's quite separate ... it's not a home.”

However, positive experiences were also reported:

“We moved to this woman who worked as a [job], they are not rich people but they invited us to live at their place. ... They didn't have a big house ... but she asked us to come and live with her ... they shared their small home with us. We even ate together.”

The experiences of participants suggest that housing insecurity is key in adding to the anxiety and stress of many community-based asylum seekers. While all currently have accommodation, there is a lack of security about its continued availability, and concern about finding somewhere else should they need to move, particularly if it is at short notice. Lack of income removes any control that asylum seekers have over where they live and when they move, and is another direct consequence of not having access to an income.

3.7 Education

Participants were asked about their access to education since applying for asylum, as it has been reported that access to education for children is difficult for community-based asylum seekers. This study involved only one participant with school aged children, and while the children now have access to education, advocacy was initially required to achieve this:

“The first time [the] principal said we don’t have a permanent visa here, and I had to pay a lot of money. And my husband went to see Mr Kevin Rudd [Federal Opposition MP]. And he talked to the [State] Education Minister and he said let her visit school, you should give free education.”

This was successful, and both children are now attending a local state school, where one is receiving additional tuition to assist with a disability. Adult participants were also asked about whether they themselves have had access to education. A key condition of BVE reported by participants is that not only are they not entitled to work, but also they are not entitled to study, although a closer examination of this restriction indicates that asylum seekers without work entitlements are allowed to study under certain circumstances. The primary restriction is that asylum seekers are unable to access educational courses which receive federal funding. The only way to undertake such courses is to pay fees as an
international student. Based on information provided by some participants in this study there appears to be some confusion over the regulations governing study, but given the high level of fees and low income, formal study has not been possible for most participants.\footnote{While three participants originally arrived in Australia to study, questions focused upon any education they have undertaken since submitting their application for their protection visa.}

Seven participants reported not undertaking any study since applying for asylum, primarily due to visa restrictions, although three already spoke English well and so had no need of English tuition. Two participants with work permission explained that they did not have enough time to study, due to the need to work to earn money to support themselves, while another said that even when they were working, they could not afford to study. The same participant also spoke of the difficulty of their situation and how this impacts on their desire to study:

"Because of the current situation, I don't believe I am in the right frame of mind to even start thinking about [education]. I want to do it, I have to do it, but it's not the best time for me to ... go for it, because I can't afford it. At the moment I can't afford it."

Eight participants have undertaken community-based English classes, which are available through a range of organisations including the RCSC. Two of these participants reported that they also currently receive help with their English language and literacy from voluntary tutors who visit them where they live. This is provided free of charge, and has been arranged through the RCSC. One of these participants has been able to access classes at TAFE as well, although they were required to pay the full rate for TAFE classes; this was achieved through assistance from a community organisation. This participant spoke little English on arrival, and has spent up to five days a week attending English classes, and now has a high level of English. Another participant however, has tried on several occasions to access TAFE courses, but has been unsuccessful:

"I tried to find to improve my English but I couldn't, I couldn't. I went in many times in [TAFE] college and asked please give me some English courses you know, just some conversation because at that time my English was poor yeah, they said if you haven't got a [permanent] visa, you have to pay, $10 an hour, as international students."

Given the participant's financial situation they were unable to pay for classes, and so attended community classes instead. While these were helpful in the beginning, their level of English is now of a standard that such classes are not particularly useful.

Five participants who formerly had both work and study rights have undertaken different courses, including a travel correspondence course, child care, and as a tutor for English as a second language. They were able to finance their study as they were also working at the time. Since losing their work rights, one of the participants is no longer able to continue with their study. Three participants had undertaken some training as part of their work on a Community Jobs Plan, around workplace health and safety, while one also undertook first aid training. Two participants also noted that they received some training before undertaking voluntary work with various organisations. One mentioned how they had been offered the opportunity to study at a local university as part of their voluntary work, but because of their visa status, they were required to pay international student fees, which the organisation was unable to cover:

"One time when I worked at [organisation] they offered for me to study, but I had to go to [university] to register, and they charged me as an international student, so the [organisation] said we cannot afford to pay that kind of money, so that's the reason I can't study."

For participants in this research, study opportunities have been fairly limited, mainly restricted to community-based English classes. Of the 11 who arrived in Australia with few or no English skills, five now have high levels of English, while another four have already reached an intermediate stage after arriving in the last 18 months or so. Two participants who still speak little English feel that it is too difficult to learn now due to their older age, and due to depression that one suffers from in particular.

3.8 Transport

While employment, health care access, housing and education are all major issues, transport emerged as another area of key need that is often overlooked. Given that most participants are supported by vouchers and paid accommodation, they have little available cash to cover transport costs. At the current time, the major means of support with transport are bus tickets distributed by the RCSC. Funding for these tickets is provided by donations, and also in the past from a pilot project funded by the Community Development Team at Brisbane City Council, who donated a sum of money to the RCSC to
purchase tickets. Each ticket is for 10 trips, and all participants depend heavily on this vital form of support. It is therefore of some concern that current supplies are dwindling, and no further funding to support this scheme is immediately apparent. While the RCSC was the most commonly reported organisation providing bus tickets to asylum seekers, some participants mentioned that they received one ticket per month from the Australian Red Cross, although this is given to cover their travel for the collection of food vouchers. Two participants also reported receiving bus tickets from other community organisations.

These tickets are an essential form of support, without which life would be considerably more difficult for many asylum seekers. Given the limited number of trips that each ticket provides, participants reported using bus tickets only for important occasions, often to attend medical appointments or to collect vouchers from community groups. A concern voiced by a couple of participants was the lack of permanency to the arrangement regarding the availability of free bus tickets, and how they may not always be able to receive a ticket every week. For one participant, this is a source of some anxiety:

“Sometimes they run out of you know, bus tickets, so it’s always uncertain when do I get the bus ticket, when you know, so I have always to use it properly, unless it’s important I would not just go you know to enjoy myself or things like that.”

“It’s only for 10 trips per month, which is you know, just for very special occasions.”

“I have difficulty in obtaining bus tickets. The RCSC used to give out tickets, but now they have them only for certain people. Right now where I am, I catch the bus every day. Sometimes I have bus tickets, sometimes not. I find it difficult to go out.”

As noted, the limited availability of transport support also makes it difficult to undertake voluntary work, which requires a regular commitment from individuals:

“… usually the volunteer work is like a commitment you know, I will go and do this work for this time, and although they don’t support me with the transport, they are not happy with me if I don’t get there on time, or if I don’t go regularly, which is very difficult.”

The importance of voluntary work to a number of participants in this study has been highlighted previously, and it would appear that without support from organisations that provide the voluntary opportunities, it is hard for asylum seekers to make a firm commitment.

Two participants who formerly had work permission had bought cars to assist with their transport difficulties but since losing the right to work, experience difficulty in using these now, particularly for those living outside of Brisbane:

“Because I am not working, it is really a bit difficult for me to move around. Sometimes you have to come to Brisbane, you have to think about petrol. … petrol these days is so expensive. … I think it is just a general problem for me, because it is a problem now because I am not working. If I am working, I should be able to buy petrol and put it in the car and go to where I am going. So, everything comes down to that.”

Lack of transport can prevent people from moving around, so that some asylum seekers may remain increasingly indoors, which can lead to greater social isolation and further stress and depression. Assistance with transport is therefore extremely important.

3.9 Legal assistance

Section 3.2 highlights assistance participants received to lodge their original application for asylum; eight participants completed their own applications, two received help from family members, two through community member from their church, and nine through the South Brisbane Immigration and Community Legal Service (SBICLS), a community legal centre. Since lodging their applications, participants have had to instigate a number of review applications at varying levels, and questions were asked about the legal assistance they have received.

RCSC clients who participate in the Writing Workshops which the Centre runs are eligible for a limited number of bus tickets, although they have to attend the workshops to receive a bus ticket, under the guidelines of the funding. This explains why some RCSC clients receive bus tickets and others do not. Asylum seekers have to attend the workshops to receive a bus ticket, under the guidelines of the funding.

Further information about SBICLS is located in Appendix 1.
The primary source of legal assistance for participants in this study is SBICLS. The service specializes in immigration and refugee law, and can provide free advice and assistance with protection visa applications. All asylum seekers are eligible to receive free advice from SBICLS and help to lodge their initial application. After this however, further assistance is only given to selected cases with most merit, as SBICLS is unable to meet demand for its services with the currently available resources.

Most participants reported receiving free assistance from the SBICLS at some point during the application process. Some received help to complete their initial application to DIMIA, while for other participants, SBICLS was able to take up their case. One participant did note however, that there is a high turnover of staff at SBICLS, which they found rather frustrating:

“It's another hard one because for four years they give me like four lawyers, and it's like you give the information there, then the other one comes to pick it up, maybe pick it up from certain yeah, that's another hard one.”

Another difficulty is the limited number of lawyers available to provide assistance to asylum seekers, due to the limited resources on which SBICLS operates. This can also create some frustration for asylum seekers who may not be able to receive as much assistance as they need. On the whole though, and despite under-resourcing, it would appear that SBICLS offers a valuable service by offering support to individuals who would find it difficult to find alternative sources of help. Legal support is vital for asylum seekers, for as one participant noted, it is not easy to know how an application should be completed:

“Sometimes I didn’t understand because even now, it's hard to understand what's expected from me, what kind of information I have to offer and things like that. Sometimes I give information, like I give information and maybe it's not relevant, and then I keep information which is very important, so probably that might be the reason why it has taken me a long time.”

Four participants received legal help through alternative sources. Two participants made contact with lawyers in the community, who assisted them on a voluntary basis, while two others were assisted by a community member they met through their church. However, the latter situation caused some difficulties, for the volunteer was not a migration agent and was therefore unaware of some of the immigration legislation around applying for asylum, including the 45 day rule. This resulted in the participants being denied access to work, study and Medicare, and demonstrates how essential it is for asylum seekers to receive timely accurate legal advice.

3.10 Additional issues

Racism and discrimination

Participants were asked whether they had personally experienced any racism or discrimination since applying for asylum in Australia. Eleven reported that they had not, while one described how the only experience they had encountered was with someone from their country of origin. Another said they had experienced very little. However, eight people reported experiencing racism or discrimination, three of whom said that this happened during the course of everyday living:

“Yes, I guess sometimes, even today when I was on the bus. ... And one of the ladies say you know, go home, where you come from. It happens, but there are many many good people as well, very very good people, very kind people, and because of them I survive. I don’t take it too hard, because of a small group of people.”

“Somebody didn’t want me to speak my own language. A taxi driver threw me out on the motor highway when there was nobody on the street. ... He did say ‘you can’t talk that rubbish in my car!’... so we had to walk, me and my girlfriend, because he didn’t like my language. And I was talking on the phone.”

These participants try to ignore such incidents, and focus on positive things. Another participant spoke of the prejudice that exists towards refugees, especially Muslims:

“You know, they are scared of the refugees sometimes, they don’t trust them. They think, especially, I told them I’m Muslim, they think everyone is the same, but it’s not true.”

Two participants experienced racism when they were living in hostels, from the other residents who were living with them:
"One guy, he was drunk and he threw a knife and he hit me in my head, just I went in hospital a couple of nurses did my eyes, a little bit of a problem [now] in the morning when I’m out in the sun, it’s just some pain. And he told me just you know, this is not your country, go back."

This participant also experienced some racist incidents on the street, but noted that it was not from many people. Another two participants described experiencing racism or discrimination in relation to work, one from a work colleague, while the other spoke of discrimination in relation to finding employment, which they felt to be a significant issue.

**Leisure activities**

Given the level of stress and anxiety experienced by many asylum seekers, the need for fulfilling activities to occupy the mind is paramount. Yet the denial of work or study rights and confusion over voluntary work can make this difficult. Participants were therefore asked about the kinds of activities they undertook to pass the time. Key activities include walking and various types of sport, including cricket, soccer, weightlifting, karate, kickboxing and athletics, although some of these may be limited to some extent due to the need to pay for activities such as the gym. It can also be difficult to get involved in some of these activities when accommodation is insecure:

"... I'm not really into it [soccer] because I can't really, I don't have a permanent place that I'm staying so I don't you know, like if you're moving all the time. Soccer has to do with playing with a particular group of people, so if you are moving all the time, you don't have access to them."

Reading is also popular, and several participants acknowledged the usefulness of the libraries in Brisbane. Not all participants have borrowing rights at the library, and therefore may spend long periods of time at the library reading. The Internet is also of interest, particularly for those who do not speak English:

"The Internet saved me, I research everything on the Internet. I can read all the newspapers that are published in my home town. I know everything that is happening in the world, and in [home country]. For my health, it is better not to know!"

Music is another interest for six participants, five of whom are involved with singing while another participant plays the drums. However, the drummer finds it difficult to do this activity in a group given that the group is paid and the participant does not have work permission. Socializing is another popular activity, although opportunities for this are relatively limited. However participants spoke of the importance of the RCSC, both as a meeting place during the day and for the range of social functions that it holds, which allow people to meet up and try to forget about things for a while:

"There are so many recreations and other things, at least we can go and be with them [other people] to get away from our worries."

For some participants such events are a key coping mechanism, although there is recognition that for some people, depression may lead to a reluctance to participate and therefore greater isolation:

"... some people would like to, because they can’t go out and make friends because they are depressed and all that. But for me, sometimes when it's like that I just want to go out."

The RCSC therefore plays a key role in the provision of social opportunities at little or no cost to asylum seekers, which for some is seen as a lifeline, a safe and friendly environment that provides a place to go for the cost of a bus ticket:

"My [relative], he had heaps of spare time, he was always here [RCSC] like you know, he came to the Centre, he was always here, just sitting there having a cup of coffee, trying to learn some English, just sitting there, because there were more people here than at home."

**Positive experiences**

The aim of this research was to explore the experiences of community-based asylum seekers in Queensland, and while much of the collected data related to negative experiences and difficulties, participants were also asked to share any good experiences they have had since applying for protection. Overwhelmingly, participants’ good experiences relate to the people they have met, those who have
supported. All participants spoke with warmth and appreciation for the friendship and assistance they have received from a variety of sources, which have contributed in different ways to making life better for asylum seekers. What was striking in the comments was the hope and optimism that was expressed. Despite the often difficult circumstances that all participants have experienced over the past few years, a number spoke positively about their experiences and their hope for the future:

"The good things is the community, they really you know help, helping me and the Centre people also. I wouldn’t be here without them."

"The good things that have happened to me while I’m waiting is the people like they help me. ... There are lots of other people that have helped me go through this difficult time, and they’re the good things that happen to me, other than that nothing."

"Also like when you’re down, and you think everything is that’s it, that’s the end of it, people that you don’t know come and help you, you know, and makes you realise that there are not just bad people, there are also good people and good things, so at the same time I was getting bad news, I was getting good people and good help and support. ... if it was only bad things you couldn’t last a week."

"The people, the ordinary people, they know you know, we get to know each other better, and they understand us better, and the friendship I make. They give to me without expecting something from you, so that’s really, I appreciate it, you know the friendships I make with the long time waiting in the community."

"It’s the people here that are very kind, and smiling, welcoming, in our country it’s not like that."

3.11 Key issues for community-based asylum seekers

Having talked about their own experiences in Australia, participants were specifically asked what they consider to be the key issues facing community-based asylum seekers as a whole. The lack of work permission and access to Medicare are key factors, together with access to accommodation and the basics needed to survive, and many participants voiced the need for asylum seekers to be given work permission. A number of other issues were also raised. Difficulties facing families were raised by three of the participants, while seven noted the problems of communication and the language barrier, and the additional disadvantage this creates for those who do not speak English.

Three participants spoke of the need for more help and assistance in a range of areas, such as legal advice, finding a job, and to help with the stress of seeking asylum. One noted that organisations like the RCSC offer what support they can, but that this is inadequate, and this is compounded by frustrations of not being able to work:

"There are some places like yours [RCSC] to help them, but it’s not enough, it’s not your [RCSC] fault but it’s hard. How many people can you help in one week, you know, you need to budget. ... I think if the government [could] organise [a] special job for these people [asylum seekers] that would be very nice. They want to work, they don’t want to get paid for free."

Another three participants highlighted the need to help asylum seekers learn about the cultural differences between their home country and Australia, and how learning about these could help people in their interactions with other Australians. A number of participants also spoke of the need to cope with everyday living while not being allowed to work, the issues that they and others are facing, and how difficult it is to live under such circumstances. The feeling of being trapped is one that was reflected in a number of interviews, with people feeling the lack of freedom and choice, resulting in not being able to do anything:

"I think the main issue is they haven’t got any freedom, or haven’t got any peaceful life. ... Even just look at me, I’m just here in a small room, I spend here more than you know eight, 10 hours I stay here. I wouldn’t do that but I haven’t got any alternative. I haven’t got a work permit, I haven’t got school, you know allowed to study, if I have got, I’ll go to school, I’ll go to work, but I must stay home, that’s all you can do."

The long waiting period for the outcome on applications was also raised by a number of participants as a key issue, with far-reaching consequences for many asylum seekers:

"The biggest problem is, most people get depression and more stress, and because they feel that it’s kind of waiting, and it’s a long time waiting, it’s no life, that could hurt
people, that’s because for the long time, for three or four years, that’s not easy, not for me. It’s four years of my life has gone by waiting and getting depressed and worried and feeling unsafe, that’s not normal, that’s no life, a life like that I don’t want to live, so the long waiting and feeling unsafe is the big thing.”

The pain of the long wait is exacerbated by not being able to work:

“I think the limitation with work permission [is the most important issue], because some of us wait a long time, some of us fortunately a short time, so if we are able to work at least we can support ourselves, and not be dependent on people. It’s not only for that time, it’s very helpful for the future, because most of us are very tired and exhausted after we’ve lost all hope. … If the time is longer, sometimes we give up, and some people get sick, and even depend on anti-depressants and things like that, and hard to recover from you know, and be fruitful again.”

The same participant uses these points to illustrate the longer-term damage that current policy is causing, and describes how future problems are developing at the moment. By denying the opportunity to participate in society while awaiting a decision, asylum seekers are likely to experience numerous barriers to future participation, if they are accepted as refugees. As a result, Australia is creating problems that will need to be addressed at some future point:

“I come across many refugees, after they are granted permission to live here, they don’t live their life, still they are struggling, struggling with normal, very very simple things, even to keep positive.”

Many participants believe they could make a valuable contribution to Australia if they were allowed to work, and would then no longer be dependent on their current sources of support. Such independence would allow asylum seekers to support themselves, and to use and develop skills. It would also provide them with confidence and self-esteem, and act as a means by which to pay their way:

“We have to give something and get what we need to survive, but this is just like holding your hands behind your back and no doing anything you know. It’s like making you a baby again, which is very bad for us.”

It is also a key means of addressing the potential development of stress-related illnesses:

“So that’s why I’m scared, that one day I will get mad and kill myself, if you are keeping in like this situation, it’s nothing changed, it’s very hard you know. People if they have got the right to work, or if they have got some freedom you know, working is freedom, working is independent. If you are kept like this, my life is nothing.”

The continual renewal of the BVE is also stressful, due to the uncertainty of not knowing how long their visa will be renewed for, or for this participant, whether it will be renewed at all:

“Each time we go to immigration, we don’t know if we will be arrested, if we will be sent away. Each time we go with those trepidations, and it works on our nervous systems, this not knowing.”

All in all, the main results are more stress and anxiety, which can last for years, potentially creating longer-term psychological damage that will inevitably require treatment in the future.
4. Provision of welfare assistance to asylum seekers

As can be seen from the previous section, many community-based asylum seekers in Australia lack any means of income while they wait a decision on their protection application, and as a result are heavily dependent upon the community and religious organisations which offer a range of help and assistance to meet their needs. As government agencies, particularly at the Federal level, have abdicated responsibility for the welfare of asylum seekers, it has increasingly been left to community organisations to ensure that their basic needs are met. To date, no research has been undertaken in Queensland to explore the work of these community organisations and the impact of government policy, and only limited research has been done elsewhere in Australia (McNevin 2005). Recent research in Melbourne found that while agencies assisting those on BVEs have a demonstrated capacity to meet the needs of community-based asylum seekers, they are under-funded and under-resourced and rely heavily on community support and volunteers to undertake their work (McNevin 2005:42). Given that Melbourne has a significantly larger population of asylum seekers, as well as more organisations to assist them, it was felt important to explore who in Queensland is currently providing welfare assistance to asylum seekers, and the impact that legislative changes have had on their work.

In Queensland there is only one organisation which works specifically with community-based asylum seekers, the Refugee Claimants Support Centre (RCSC). In recent years, a number of other organisations and community groups have also worked to assist the RCSC, particularly following the introduction of the 45 day rule given the significant increase in demands for financial assistance and accommodation. These organisations play different but complementary roles, and between them seek to meet the full range of asylum seekers’ needs. This section provides a brief overview of a number of services and support groups which offer some form of help and support to asylum seekers,16 while a more detailed overview of each organisation in Appendix 1 clarifies the role each plays. The section continues to consider the difficulties welfare providers face in their work, how these can be alleviated, and concludes by highlighting participants’ thoughts on what needs to be done to address the situation that community-based asylum seekers face.

4.1 Refugee Claimants Support Centre (RCSC)

The RCSC is the only organisation in Queensland that has been established to provide support to community-based asylum seekers. Starting as the Asylum Seeker Centre in 1995, the Centre evolved as a community response in recognition of the fact that asylum seekers in the community lacked access to services. The RCSC acted initially as an information and referral system to support asylum seekers primarily on BVEs. However, it also provides support to those who are waiting an outcome on Ministerial intervention, and continues to provide assistance to asylum seekers once they have received their permanent protection visas, until they are able to access all services and manage by themselves. Assistance was provided in a range of areas, such as in finding employment, English classes, or legal assistance. Legislative changes since 1997, particularly the introduction of the 45 day rule, has seen a shift in the role of the centre, due to the influx of people without work permission or other forms of financial support:

“...the role of the centre was changed by default, because people would show up that were suddenly not only needing a bit of help to find a job or rent a flat, but they had no money and no chances of getting any money, no access to welfare or other income support, and we needed to focus on money, low cost accommodation, food, food vouchers...”

As a result of these changes, the centre has become a provider of emergency relief and accommodation, as well as a strong community advocate, for individuals who have applied for asylum in Australia. It also acts as a facilitator of relationships between asylum seekers and the range of organisations that can offer assistance. The type of assistance the RCSC provides depends on the actual needs of individuals, and one of the Centre’s goals is to assist asylum seekers to make their own way. However, this is difficult for people without work permission or access to Medicare, and so the key areas of assistance offered include low-cost and no-cost housing, access to health care, food, education, transport, emotional support and friendship. In the past assistance was also provided in relation to finding work, but this service has decreased, as fewer asylum seekers are being granted work permission. The way in which the RCSC manages to provide such support is through its networks with a range of stakeholders, including non-government, state and local government, and a range of community support groups. Community support groups have been established with the help of the RCSC, which provides information and encouragement to assist in the support of asylum seekers. The

16 This report includes a number of organisations and groups working with community-based asylum seekers in Queensland, however it is not a complete listing of every organisation working in this field.
Centre also works with other organisations and individuals to arrange where possible, pro bono services or facilities around health or housing, for example.

The number of asylum seekers supported by the Centre fluctuates and currently stands at around 85, reflecting a decline in numbers in the last two or three years. When asylum seekers first access the RCSC, an assessment is made to determine their status and needs, and the Centre will then work with its many partners and other contacts to ensure these needs are met. This is an on-going challenge due to extremely limited resources, both financial and human, and the Centre’s great dependence on donations for the provision of emergency relief. The RCSC receives no continuing funding, and relies heavily upon an annual donation from the Sisters of the Good Shepherd, which covers the basic costs of staff, rent and office expenses. The Centre currently has two part time paid coordinators, and relies upon between 50 and 80 volunteers to assist in its work. Donations are also received from other orders and from community members, assisted by the tax deductible status that the Centre has through its auspicing body, Lifeline Community Care Brisbane. Various fundraising initiatives are also held throughout the year, as the need to provide emergency relief is a major drain on resources and requires substantial funding:

“We have to raise $41 000 this year alone to be able to keep going with the current clients and the emergency relief that we’re giving now, which I must say is very minimal. We’re giving, as an example, a family of four, a family with two children gets $100 from us per week, and that is not what keeps you alive. So we really need to work with that family to make sure that they have additional assistance, whether it be through food vouchers, or cheaper or no cost housing from a community housing service, yeah.”

The location of the RCSC in Windsor, on Brisbane’s north side, can also be problematic in terms of access, given that more affordable housing is available on the south side and asylum seekers have little or no access to subsidized public transport. However, the RCSC does what it can, and remains aware of the need to build collaborative partnerships with other organisations, to ensure that the needs of asylum seekers can be met where possible:

“We have clients that have maybe $20 in their hand per month in cash, everything else is donated, they get a basket of fruit and vegetables, that $20 a month doesn’t allow you to do anything. You may have 10 bus tickets for that month, and you need to be very careful what you do with it. So I fully understand that we cannot, we’re not able to cover a lot, our fund raising capacity is so limited we’re not able to give people what they really need. They have many many unmet needs and we’re fully aware of that, but we try to do the best that we can with the little pot of money that we have.”

While the RCSC is the primary organisation providing support to community-based asylum seekers, it works with a range of other organisations which play an essential role in helping to meet the needs of community-based asylum seekers in Queensland. These organisations include:

- **South Brisbane Immigration and Community Legal Service** - a community based legal service which can provide advice and assistance to community-based asylum seekers;
- **Queensland Program of Assistance to Survivors of Torture and Trauma** - a torture and trauma counselling service which can provide counselling for asylum seekers;
- **Queensland Integrated Refugee Community Health Clinic** - community-based asylum seekers can access medical assistance, include free pharmaceuticals and diagnostic testing;
- **Australian Red Cross** - administers the Asylum Seekers Assistance Scheme, which is funded by DIMIA, and can also provide some emergency relief funds;
- **Immigrant Women’s Support Service** - provides support to women from a non-English speaking background who have experienced domestic and/or sexual violence, and can assist asylum seekers with counselling and support, and some limited emergency relief funds;
- **Buddhist Tzu Chi Foundation** - a community-based organisation which provides assistance in the form of food, some transport costs, and emergency payments for medical and/or education related expenses, together with social support and friendship;
- **Refugee Assistance Program** - provides assistance to refugees and asylum seekers through community groups comprised of volunteers. Assistance may be in the form of rent, food, emergency relief or other help such as photocopying, as well as social support and friendship;
- **Buddies Refugee Support Group** - an independent community group on the Sunshine Coast which provides hospitality and support in the form of picnics or home stays;
- **Brisbane Refugee and Asylum Seeker Health Network** - a network of health professionals which has worked with the RCSC to establish a network of medical support and assistance for asylum seekers;
- **Scattered People Choir** - comprised of asylum seekers, refugees and their supporters, the Choir provides social support and a therapeutic process for people to express themselves while having fun;
• **Good Shepherd Sisters** - an international congregation of Catholic sisters who provide support to asylum seekers around Australia via the provision of funding to organisations which work to assist them, such as the RCSC;

• **Community networks of support** - a range of community support groups were established via the Community Networks of Support project undertaken by the RCSC in 2001. Groups of community members volunteer to work with community-based asylum seekers and support them with their basic needs. This involves one or more of financial assistance, which is supported via fundraising activities, accommodation, and friendship and emotional support. While some groups have declined in activity, a number continue to be active including:

  o **Benarrawa Community Association** - provides practical and emotional support to asylum seekers, and makes some financial contribution to other organisations;

  o **Gateway Community Refugee Support Group** - provides accommodation and meets the basic needs for two asylum seeker families;

  o **Kyabra Community Association** - provides accommodation and meets the basic needs of one asylum seeker family;

  o **Red Hill Paddington Refugee Support Group** - works to secure low cost or no cost housing for asylum seekers, and provides assistance to meet basic needs.

It is important to note that in addition to the forms of support highlighted above, most agencies also undertake a range of other work around community education and advocacy. Further details about these organisations and the work they do is included in Appendix 1.

### 4.2 Key issues for welfare providers

To gain an understanding of any challenges that welfare providers may face in their work with asylum seekers, participants were asked about the difficulties they faced in their work. Four main areas of concern were identified:

#### 4.2.1 Current government policy and the legal system

Many of the difficulties organisations face arise from current government policy towards community-based asylum seekers, together with the legal system that is in place to assess claims for protection. Several organisations identified the lack of work permission for asylum seekers to be the major difficulty they face in their work, as it has resulted in significant numbers of asylum seekers living in the community for often long periods of time, with no means of income. As a result, the responsibility for the care of such individuals has fallen upon a relatively narrow range of organisations in the community sector, which creates numerous difficulties.

Small community-based and church organisations, often with minimal funding, have been left to develop ways of supporting these individuals. Without access to Medicare, finding appropriate health care has in the past been problematic. At the current time this issue has to some extent been alleviated by the establishment of the QIRCH clinic, although if this were to close, access to health care could once again become a serious issue. Another major issue in terms of supporting people without income is accommodation, which has become increasingly problematic in recent years as the housing boom has resulted in a shortage of affordable housing:

“Cheap housing is another big issue, huge, because housing is the single biggest bill. ... Where do you find housing that is low cost, or no cost? How many households can I reach to ask them for a bed to spare, a granny flat, a guest room, how many people are there that you can ask to share their house?”

The length of time that asylum seekers must wait for a final decision also impacts on this, for while it may be possible to find free or subsidized accommodation for a few months, it is harder when someone may be without income for several years. At the same time, once accommodation has been found other material needs also need to be met, and again asylum seekers require assistance to meet these:

“People should be able to work, this is not right. It’s not right for the community, we have to entice the community to work on behalf of asylum seekers, to go and earn money or make money or raise funds just so people can have shelter and food. This is really tragic. ... So I think the single biggest problem that we have is that people can’t work, or don’t have access to services that could help them into work.”

In the past when all asylum seekers had work permission, the main forms of support required were referral, community support and friendship, assistance with finding work and English classes, as well as
advocacy work and community education. Now the need for financial support has been added to this, and organisations often end up with little time to undertake work outside of fundraising:

"I think this is what we struggle with most, and this saps our energies and capacity to respond in the way that we should, and to do the community education that we could, and you know, do everything else so much better."

While the 45 day rule is the major difficulty, other problems in the system were also identified. The length of time that it takes for the application process to be completed causes severe hardship, with waiting periods of three to five years being relatively common, and some taking eight to 10 years or more. Such long periods of time for individuals without access to income are extremely stressful and frustrating both for asylum seekers and the organisations who are trying to support them:

"Key issues? How long it takes, it takes forever, you could die waiting for the department [of Immigration] to make its mind up."

At the same time, immigration laws are inflexible, with humanitarian cases for example, having to fail first with both DIMIA and the RRT before being presented to the Minister for intervention.

4.2.2 Funding and resources

Organisations working with asylum seekers need funding both to maintain their own organisation, and to ensure they have sufficient staff and resources to efficiently and effectively respond to client needs. With increased numbers of asylum seekers requiring financial support, organisations also need to find funding to provide emergency relief and accommodation.

Very few participants in this study receive direct financial contributions specifically to work with asylum seekers, with smaller community organisations and centres simply adding the work to their existing caseload. This has had an obvious impact on capacity:

"It's a time issue I suppose, because we're not funded to do the work. I have to fit my contribution in without damaging [name of organisation], and that's a real difficulty, it's a real juggling act."

Funding may be non-existent, insufficient or unpredictable, which makes it difficult for organisations to plan longer-term work activities. This unpredictability impacts directly on asylum seekers, and indirectly on other organisations:

"When some of our clients are receiving financial support [from this organisation], but it has been on and off, on and off, and that's why the client had to come back to us, oh such and such has stopped my support, could you help me a little bit more?"

Several organisations access funds which are non-recurrent; these funds allow work to start but make it difficult for good projects to continue, regardless of their success:

"You can have a terrific project, such as the community networks of support ..., but those projects need to keep going, and we cannot get renewed funding."

Since the introduction of the 45 day rule, these limited and unpredictable budgets have had to fund the basic needs of asylum seekers as well as organisational operating costs. Most organisations have responded by trying to fund raise and attract donations, but such income sources are unreliable as well as time consuming and resource intensive to secure. The need to fundraise often takes staff away from other work; however, fund raising is vital to ensure asylum seekers can be supported. The capacity to raise funds is a significant difficulty for all involved in supporting community-based asylum seekers, particularly for community support groups and organisations which only assist asylum seekers such as the RCSC. This is exacerbated by organisations such as DIMIA, and other government agencies which refer asylum seekers to the RCSC yet provide no financial support for this work. Fundraising is further complicated by the large amount of funds required to support people without income, and while community events succeed in raising a few thousand dollars, higher living costs require significant amounts of funds to be raised.

The limited and unreliable funding creates a range of pressures for organisations and their staff members. The heavy caseload that some organisations have often places staff under extreme pressure, which may be intensified by concern that asylum seekers may be returned if their case fails. Community members of volunteer support groups also experience intense pressure to raise sufficient funds to ensure they can meet the basic needs of the people they support. This pressure is often intensified by the length of time that asylum seekers require support for:
“... it’s the sheer frustration of it all, and largely you know, the pressure sometimes of trying to raise that money to support the family.”

“The pressure of fund raising and collecting donations and book-keeping those funds and distributing them, and making an assessment of where to help and how to help with how much. The constant pressure is unreasonable.”

Many organisations, although supportive of asylum seekers, are unable to provide direct assistance due to the impact this would have on their funding sources. Some funding, for example that provided by DIMIA to organisations providing settlement services, places restrictions on such organisations from giving assistance to community-based asylum seekers. One participant reported that organisations which rely on the general public for support may also have concerns about alienating this funding source:

“So many organisations struggle with that dilemma, and at its extreme, it has the effect of silencing an organisation, even though its heart is very much for the vulnerable, but to stand up requires more collective courage than the organisation is able to muster, because of the implications of doing that, and the funding losses.”

Scarcity of funding has led many organisations working with asylum seekers to rely heavily on volunteers from the community. The majority of organisations interviewed in this study rely on volunteers to undertake a large part of part of their work, which can be problematic in a number of ways. Organisations such as the RCSC which use large numbers of volunteers often find it difficult to provide the level of coordination and supervision that is required for this kind of work. Two participants noted the importance not only of coordination, but of supervision and training for both staff and volunteers, to ensure that they are adequately equipped to deal with often challenging situations:

“The difficulties are more the emotional side of it, because a lot of clients have been waiting for a long time, and their emotions can sometimes be unstable. And it’s frustration, fear, everything all together. And because we are not experts, we are only the person who stands by their side when they need help, it’s hard.”

It is important when working with vulnerable groups such as asylum seekers that workers have access to adequate support. Reliance on volunteers is essential for a number of community support groups, to undertake fundraising and support work. A number of groups reported that volunteer recruitment was in recent months becoming more challenging. After an initial upsurge in support and enthusiasm at the end of 2001, following the Tampa crisis and the establishment of the Community Networks of Support project, some participants reported declining interest and enthusiasm. This is of concern as fundraising activities will cease without sufficient volunteers, meaning greater numbers of asylum seekers will be dependent on the RCSC.

4.2.3 Community support for asylum seekers

Organisations highlighted a range of community issues which can also create difficulties for their work with asylum seekers. At a broad level, community attitudes have a significant effect on government policy, and community education to raise awareness about asylum seekers and refugees is considered to be a crucial part of many organisations’ work. While participants noted that overall support for refugees within the community appears to have increased in recent years, it is difficult to assess the depth of such attitudinal change, and there is concern that this could revert to a more hostile position, thus making it harder for organisations to raise funds in support of asylum seekers. Alternatively, as government policy undergoes welcome changes in relation to detention for example, there is some concern that this may send a message that the “asylum seeker” problem has been addressed, thus reducing the sense of urgency and again making it harder to encourage people to be part of a community response. It is also the case that organisations feel that many community members are unaware that there are asylum seekers who live in the community, some of whom have no access to any form of income.

Participants reported that support for asylum seekers within the community has increased over the last few years, although it is unclear as yet how sustainable this will be. Several support groups also noted that this increase has been followed by a decline in volunteer numbers in recent times, with two reporting difficulties in recruiting new volunteers. The enthusiasm and capacity to continue voluntary work in support of asylum seekers is affected by the length of time that support is required for, as people

17 In recent weeks (August 2005) there have been a number of changes regarding the release from detention of asylum seekers. As more asylum seekers are released from detention, there is concern that the issue may become less visible.
tend to lose energy, particularly if the group does not have a direct relationship with the family. One participant noted that some community members and other potential support groups want to hear about asylum seekers, to know who they are supporting. While this is understandable, it may not be the most appropriate strategy for the asylum seeker and their family, who face extremely difficult circumstances:

"What we've actually always tried to do is not identify the family in any way, and most people want to hear the story, and want you to drag them out in front of them. ... And the families actually don't want, it's humiliating for them, it's difficult enough for them. They don't want people to come and help, what does that mean anyway, [is it] in return for something?"

Another issue relates to the complexities of asylum seekers' lives and experiences here in Australia, which can be challenging for the groups working to support them, and raises the question of how community members cope with the complexities of working with asylum seekers. While they may be driven by a commitment to help, they may lack the necessary resources to draw upon and appropriate emotional support:

"I think [you need to be] really clear about issues, around boundaries, people wanting to give too much, to the point of burning out, people wanting to know too much to the point of being invasive and insensitive to refugee claimants needs, ... and then of course, how you deal with, the first time that somebody you've completely committed yourself to supporting gets to that last point where they will be, you know [returned to their home country]."

For organisations that undertake a community development approach, working with asylum seekers is also hard due to the commitment of working in a developmental and empowering way to support people, yet trying to work in this way with individuals who have no alternative options:

"And I guess that's a really huge one, how do you maintain the sense of people's dignity ... when they really are at the mercy of what you can do?"

Similarly, there is concern that in line with community development principles, community centres work on issues of importance to the local community, and therefore if support and willingness to assist asylum seekers wanes among community members, this important work is unlikely to continue.

4.2.4 Lack of appropriate information and knowledge

While goodwill exists in the community, a lack of information for those who wish to assist asylum seekers can create difficulties. There is no clear referral pathway to the RCSC, the organisation best placed to assess and support asylum seekers in the first instance. Two participants noted that the lack of information about available support mechanisms results in some community groups and members doing what they can to assist, despite being uninformed about key issues. This can be potentially hazardous in relation to applying for a protection visa, particularly if supporters are unaware of the 45 day rule and the asylum seeker fails to apply in that time:

"If they access churches ... they are often unclear of a referral path, and often try to do some of their own assisting before they run into problems. They reinvent the wheel, which is sad because a lot of time can pass before people are referred on. ... Sadly, even some organisations that I've heard about are not approaching [the RCSC] and are trying to help ... by themselves first, and only contact someone else when they are struggling, and by that time a lot of damage has been done. I mean damage on the legal front"

Lack of information can also be difficult for support groups who are unable to clarify the situation regarding individual cases, making it problematic to know the best course of action to take to support an asylum seeker's application. Supporters may also have insufficient knowledge about what asylum seekers have been through, or any understanding of their cultural background. One participant spoke of the difficulty for their organisation in relation to these cultural differences:

"I think the other thing is to be supporting a support group who are just you know, community minded people who give things in good faith with rose coloured glasses on to support, and bring them to the understanding that because you have done this or done that, you can't expect that there'll be a normal response back.

It is important that community members understand that asylum seekers may not react as they normally would due to the traumatic circumstances that they are in, as well as being aware of the way in which culture may influence a person's response.
4.3 Overcoming the challenges

Having identified the above challenges, organisations were asked what could be done to address these. Much of the required assistance arises from a number of systemic issues, which are discussed in more detail below. However, the following forms of assistance were also identified as important.

- **Funding** - increased funding is necessary to help support the work of organisations, including community education and community capacity building. Non-government organisations, primarily church and other religious groups, and community groups and centres, provide a key source of current funding to many organisations. Federal funding is not available to support organisations working with asylum seekers, although some limited funding has been provided by state and local government. However, many organisations are struggling due to the high demand by asylum seekers for their services. Additional funding is required, particularly for the RCSC, due to its role as an essential information provider and support for all other organisations involved in this study. It needs to be adequately resourced to be able to continue its work effectively. Assistance with fund raising would also be of help to smaller community support groups.

- **Support** - given the pressure experienced by both staff and volunteers, participants noted the need for more support, supervision and training to be made available. At the current time, adequate supervision can be difficult for organisations with large numbers of volunteers. The key organisations that would require this include the RCSC and the community networks of support. A coordinator is required to work across these organisations to support, encourage, and build capacity of the volunteers working with asylum seekers, and to provide a link with the community to solve issues and problems.

The complexities and sensitivities of working with asylum seekers make it important to ensure that organisations have appropriate peer support supervision, while community networks require ongoing training and capacity building, particularly in terms of advocacy work. Part of the capacity building work should ensure that all who work with asylum seekers have a clear understanding of the legal system in relation to protection visa applications. This will assist organisations both in their direct support of asylum seekers, as well as in providing important contextual knowledge for advocacy work and community education. There also needs to be more support to enable people to deal with the emotional issues that arise. Concern was expressed about the large number of volunteers working in this area, and it is felt that there needs to be more skilled staff members involved in this work, so that organisations are not over-reliant on volunteers:

> "I think the provision of skilled workers in areas, because when you work with volunteers I think you open up a very vulnerable group of people to sometimes not so skilled workers, and I guess from a service point of view I feel that that's always, those issues should always be reflected upon very carefully."

While this is an important point, the over-reliance on volunteers arises from the lack of available funding for organisations working with asylum seekers, and is unlikely to change without appropriate resources being made available.

- **Collaboration** - there needs to be greater networking and collaboration among groups working to support asylum seekers, as well as greater information sharing with others in the field. There is awareness that greater collaborative practice would be beneficial, but also recognition that limited resources currently prevent more work in this area.

In addition to the above forms of assistance, participants also highlighted the need for

- **Access to statistical data** - organisations are unclear about the official number of asylum seekers living in Queensland, and it is felt such information should be made publicly available;

- **Access to government services** - there are a number of organisations that are supportive of asylum seekers and would like to provide assistance, but are unable to due to their eligibility criteria and funding restrictions. If such organisations were able to work with asylum seekers, it would allow problems to be more easily resolved in a collaborative manner, and would share the responsibility across a broader group of service providers.

- **Recognition of multiple issues** - asylum seekers are affected by multiple issues which all impact upon their situation, and which need to be understood;
4.4 Addressing the key issues - what needs to be done?

Service providers were asked about what could be done to address the issues raised in this report, such as lack of income, housing and health care. It is clear that over the last decade, the system for processing asylum claims has moved towards one of deterrence, reflected in the increasingly harsh limitations imposed on asylum seekers, and an approach in which the onus is on the asylum seeker to prove they are genuine. This has become even more so in the post 9/11 world, with the effects of the “war on terror” making it increasingly difficult for individuals to obtain visas to travel to Australia, even for a holiday:

“We get interesting reports of how the Australian embassies make sure that if you are from a refugee producing country that you prove that you, you know, have a reason to go there. So they are actively I think in the business of preventing possible asylum seekers from coming in.”

In terms of what needs to be done to address the issues raised, participants identified three main courses of action:

4.4.1 Asylum seeker policy

Removal or amendment of the 45 day rule - Current policy towards asylum seekers needs to be amended.18 Almost all participants in the study criticised the 45 day rule, and called for either its amendment or removal. It is considered to be harsh, cruel, and destructive, and will not deter people who have to flee their country to seek refuge elsewhere:

“They are punishing people that are here, who through no fault of their own had to leave their country to seek safety, and that should be treated with respect and decency while they wait for the outcome.”

Although a seemingly benign policy, the removal of work permission and therefore Medicare entitlements, forces large numbers of people into extreme poverty, the effects of which impact not only on the asylum seekers, but on those to who they turn for assistance. In this regard, the 45 day rule can be seen as a cost-shifting exercise from the Federal Government to the community sector, the primary provider of welfare to this group of people.

Asylum seekers are willing and able to work and make a contribution, and nothing is achieved by denying them this right. In this regard the policy has been described as economically irrational. Additionally, denying people the opportunity to participate and contribute to Australian society over long periods of time can cause both mental and physical ill health, which will require health care at some point:

“I mean in terms of the 45 day rule, it is economically irrational, the amount of people, it just really doesn’t make sense, like the amount of people we have seen who’ve had to, who have gotten to the point of chronic physical and mental illness because, not only of what they are denied, but what they are denied the opportunity to do. And ... eventually people need emergency care, and somewhere that’s paid for in the system ... it doesn’t make sense.”

“Some of them are going to need unemployment or sickness benefit, I mean the way they’ve been treated they’ll need sickness benefits for the rest of their lives, some of them.”

As a signatory to the UN Refugee Convention, Australia has accepted responsibility to assess the cases of people seeking asylum. Therefore, the Government needs to accept responsibility for the care of asylum seekers awaiting a final decision on their application, a responsibility which has been largely abdicated by the current Federal Government:

“But if in that they could accept that they have a degree of responsibility of caring for those people, then that would be a big improvement I think. They can still go through the legal issues and do all that they need to do, but at least they wouldn’t be dumping these people there without any you know roof over their heads and no food.”

18 Given the focus of this research, it is not possible to address the policy and systemic changes required for asylum seekers in detention.
Any policy must address the fundamental needs of asylum seekers, and should be driven by the need to protect this vulnerable group rather than any intent to punish. At a minimum, asylum seekers living in the community must have access to work permission and the Medicare system, to allow them to look after themselves and their families. Numerous barriers may prevent some people from securing work however, and therefore to ensure human rights are not infringed, asylum seekers should also be provided with access to basic housing, basic education and in certain cases, income support. This is to ensure that Australia does not have individuals living in the community without access to any form of income or income support:

"I'm not necessarily advocating that everybody should be allowed Centrelink payments, but that [it should] be reviewed on a case by case basis and that, you know, we provide that for everyone in this country. It's a basic human right and it's a community standard of ours, that everyone be allowed a certain level of income in order to survive."

Common consensus among project participants indicates that people should be treated with respect while they await a final outcome, as human beings:

"The argument is that while people are here, lawfully and legally living in Australia, we need to treat them with dignity, respect, and with reference to their human rights. And we're not doing that."

Two participants also believe that asylum seekers need to receive greater legal support in relation to their applications, to ensure that they are able to submit an application or appeal of a sufficient standard. This will ensure that all applicants receive a fair and equitable hearing based on the merits of their case, and not on their level of English or education. It is felt that more support in this and other areas is required, and that funding should be made available to those organisations which work with asylum seekers to relieve some of the pressure that has built up on community groups.

"Not least of all, because all those [people] that come into contact with asylum seekers understand what the government is doing and disagree. I have not met a single person that has met and worked or lived with asylum seekers that has come out to say the government ruling is correct."

4.4.2 Application processing

Participants identified a number of areas within the current system of application processing which need to be amended, including:

- Reduction in asylum application processing time\(^{19}\) - the most urgent and important system reform required is a reduction in the time taken to process asylum applications and appeals. One of the key issues identified in this research, for both asylum seekers and the organisations that support them, is the length of time that people are made to wait before a final decision is received. It is felt that these processing times must be reduced, and a time limit placed on the various stages of appeal, to ensure that cases are heard and finalised within a set period of time:

  "The government's now saying say for TPV holders that their cases are going to be processed in three months for the department level and three months at the RRT level, so if that can happen, why could not that be done for community based asylum seekers, you know basically speeding up the process."

There is no valid reason why processing of asylum claims should take years. It is recognised that applicants may need to acquire documentary evidence to support their cases, and that this may take some time, however, once this has been obtained, the process should be quicker. This is primarily a resource issue, with the current workload obviously proving too large for existing resources, both human and financial, and should be addressed by the provision of sufficient resources to ensure that the designated time lines are kept.

However, a reduction in processing times must not be achieved by restricting access to any of the stages of appeal. It is essential that these remain available to all asylum seekers, given the significant % who receive negative decisions from both DIMIA and the RRT, but who are subsequently granted permanent residency following Ministerial intervention.

\(^{19}\) It is important to note that towards the end of this project one participant reported that in recent months, decisions appear to be being made more quickly than in previous years. While this is a welcome change, it is too early to determine whether it will continue.
• Access to Ministerial discretion at an earlier stage in the application process - it is felt there needs to be greater flexibility in relation to the UN Convention definition of a refugee, to ensure that individuals with strong humanitarian cases can also receive protection. The system would be streamlined if such individuals could bypass the initial procedural stages of primary decision by DIMIA and review by the RRT, if they were allowed to submit an application for humanitarian consideration directly to the Minister. At the current time, applications must still proceed through each step, even for applicants who are not strictly refugees, but have strong humanitarian claims. The fact that there is such a high number of cases currently before the Minister awaiting consideration, together with a relatively high rate of positive outcomes, suggests that the system is flawed in some way, and should be reviewed:

“Certainly a complementary protection or some sort of way of access to Ministerial discretion could be made at an earlier stage, rather than having to go through the whole process … complementary protection … is where you’ve got a humanitarian claim but you’re not quite a refugee.”

• Review of the RRT - it is felt that the RRT needs to be reviewed to ensure that it offers an independent and impartial review of DIMIA decisions. Any individual can apply to become an RRT member, and members are selected on the basis of selection criteria. However, the decision on whether a member’s contract is renewed is made by the Minister for Immigration. Anecdotal evidence suggests that RRT members who often make favourable decisions for asylum seekers are unlikely to have their contracts renewed, whereas those making negative decisions are more likely to remain as RRT members. While this claim has not be substantiated, it is important that a body such as the RRT is reviewed to ensure that it is an independent body which is capable of using its decision making powers to ensure a fair and equitable hearing for all cases under consideration:

“A lawyer said to me, before the 1997 change of rules where the RRT began to be hand selected by the government, before that there was a 90% chance that you would get your protection visa after the RRT. So the first application is almost always denied because of lack of proof, because of the struggle to cope with the form filling in … so mistakes are made, they feel rushed, so I suppose that’s why the negative decisions came in, but most people got it by the RRT stage. And a few years later the same lawyer said it’s almost reversed now, we can say almost with confidence that 90% of asylum seekers are no longer successful at the RRT stage, which is completely reversed.”

One participant also argued that independent judicial reviews of DIMIA decisions are required, as asylum seekers should not have to go to the Federal Court for this purpose, with or without legal representation, where they will find themselves fighting a DIMIA lawyer.

• Monitoring of failed asylum seekers - it is also argued that a monitoring system should be implemented to ensure that the fate of returned asylum seekers is followed, as the Australian Government has to be responsible for the outcome of any decision they make in an asylum case.

Overall, it is felt that the changes that have occurred in the processing system in recent years have worked to undermine the basic system of assessment, and that overall they have caused more harm than good, without having any dramatic effect on the number of community-based asylum seekers seeking protection. The Australian Government needs to accept its responsibilities as a signatory to the Refugee Convention, and ensure that a fair and prompt assessment system exists, with appropriate access to necessary support until a final decision is made:

“I think we have to live with the fact that there will always be asylum seekers coming here and asking. And it’s not about flood gates or whatever, but it’s about responding in a humane and in a correct way. We have signed the human rights declaration and we have said that we will listen to asylum seeker claims and make a determination whether they deserve protection or not. And that’s all that it is.”

“What is wrong with Australia, that we have to be so niggardly? I mean when we look at some other countries like Pakistan who’ve got like a million or so [asylum seekers], and other countries have got thousands and thousands of people looking for a new life.”

4.4.3 Community education

Key to initiating action in the above areas is community education. While much attention has been placed on on-shore asylum seekers in recent years, most of this has been placed on unauthorised arrivals who are detained upon arrival, and little information has been available on community-based
asylum seekers. Participants believe that public opinion will be key to initiating policy change, and that widespread community education is the key means of influencing this. There needs to be a broad approach targeting groups and individuals with low levels of awareness about asylum seeker issues, and an important place to commence such activities is in schools. A good starting point will be to address the issue of “queue jumping”, to dismantle the myth that there is a “queue” that asylum seekers should join. As is known to many, including the Australian Government, no such queue exists in the current system of world wide refugee resettlement. People need to understand the reality of life in refugee camps overseas, and the length of time that people may wait before being granted residency in another country. It is also important that there is realisation that many people are unable to access this worldwide resettlement system and therefore do not have the option of entering Australia as an off-shore refugee:

“I noticed quite recently the Prime Minister saying, emphasising that point, look if people would just follow the standard procedures and apply for asylum according to the proper channels, it’s so, it’s such a seductive comment, because he says it so believingly, and my guess is that a lot of the general public probably nod their heads and say well of course you’ve got to obey the law, but I would love it if somebody stood up and said hey, this is what would happen if such and such a family applied through those proper channels, namely they wouldn’t be here, they’d still be in [a] refugee camp outside of Nairobi.”

It is important to start getting this message to those who are unaware, to address some of the prejudice that exists at the community level. Community education will be an important start to a long and difficult process, while on-going political lobbying around the issue will also be required.

In the eyes of participants in this study, the above summarises what is required to ensure that asylum seekers who seek protection in Australia are treated with respect and dignity while they await a decision on their case.
5. **Asylum seeker policy in an international context - A comparative review**

As has been demonstrated in this research, current Australian government policy means asylum seekers living in the community experience many difficulties, particularly those who have been denied work permission and access to health care due to the 45 day rule. The policy seeks to deter fraudulent claims for asylum by making conditions as harsh as possible for those who apply for protection. However, such a policy penalizes all asylum seekers, including the many genuine applicants, and leaves many individuals with no means of support. Even those initially granted work permission lose this right if they decide to appeal beyond the level of the RRT. Current policy fails to accept any government responsibility for the welfare of asylum seekers while their claims are being assessed, despite the fact that this process can take several years to complete.

To fully analyse Australia’s policy to community-based asylum seekers, it is necessary to consider its legal obligations as a signatory of the Refugee Convention, and to compare the current approach with that taken in a range of other OECD countries. This will help to understand whether Australia’s abdication of responsibility towards the welfare of asylum seekers is part of a wider global shift, or whether it is alone in leaving a vulnerable sector of the population without any means of support.

5.1 **The treatment of asylum seekers under international law**

An extensive body of international law deals with states’ obligations to refugees. Although much of this law is non-binding and/or largely unenforceable, the standards set out for the treatment of refugees in international law remain politically and ethically important. It is therefore first important to consider the extent to which Australia’s treatment of community-based asylum seekers, and indeed refugees more generally, complies with applicable international law.

International refugee law is part of a broader context of international human rights law. Under general international humanitarian and human rights law refugees are considered to have rights - simply as human beings - which are not negated by refugee status. Hence, refugees are entitled to all of the rights set out in the 1948 Universal Declaration of Human Rights and codified in the 1966 International Convention on Civil and Political Rights and the 1966 International Convention on Economic, Social and Cultural Rights. These three instruments (along with several other key treaties and declarations21) also contain articles that specify additional rights for refugees.

In addition to general humanitarian and human rights law, refugees are specifically covered by a body of international refugee law. The 1951 Convention relating to the Status of Refugees and the 1967 Protocol relating to the Status of Refugees (hereafter referred to jointly as the Refugee Convention) are the most important instruments of international refugee law. The Refugee Convention is supplemented by various non-binding international22 and regional23 declarations and conventions.

5.2 **The Refugee Convention**

The Refugee Convention provides a definition of ‘refugee’ and sets out minimum standards that states must meet in relation to refugees. According to the Convention’s rather limited definition, a refugee is an individual who is outside of the country of their nationality due to a ‘well founded fear of persecution’ based either on race, religion, nationality or political opinion. However, it is worth noting that the UNHCR also views those fleeing generalized violence, war or famine as refugees, and considers internally displaced persons (those displaced within their own country) and stateless persons to be of concern (McMaster 2002:29).

*Non-refoulement* is widely considered to be the primary and most basic of states’ obligations to refugees. According to article 32 of the Convention, a refugee must not be directly or indirectly returned to a life- or freedom-threatening situation. *Non-refoulement* is so central to refugee protection that it has become a part of customary international law, meaning that it applies to all states regardless of whether they are signatories to the Refugee Convention.

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20 Except where these refer specifically to ‘nationals’.
21 Such as the 1984 International Convention Against Torture and Other Forms of Cruel, Inhuman or Degrading Treatment or Punishment.
22 Such as the 1967 Declaration on Territorial Asylum.
23 Most importantly, Latin America’s 1984 Cartagena Declaration on Refugees and the Organisation of African Unity’s Convention Governing the Specific Aspects of Refugee Problems in Africa.
24 The only exception to this rule occurs where a refugee has been convicted of a ‘particularly serious crime’ and/or is reasonably considered to present a significant threat to the safety of the community.

51
Also relevant, particularly in the Australian context, is Article 31, which states that a refugee must not be penalized for illegal entry, provided they have ‘come directly’ from the situation of persecution and present themselves to authorities ‘without delay’, showing ‘good cause’ for their presence. International legal experts generally agree that to ‘come directly’ does not mean that the refugee cannot have passed through another country while journeying to the country in which they seek asylum (Loescher 1993:95). The article is intended to allow for brief transit through other states and movement through countries where effective protection is unavailable (Türk and Nicholson 2003:14). Furthermore, refugees have a ‘presumptive’ right to not be penalized - that is, they are to be treated as genuine refugees unless and until they are fairly determined not to be so (Türk and Nicholson 2003:14).

The Refugee Convention details the minimum entitlements of refugees with regards to their civil and political rights. Article 7 notes that refugees should, at a minimum, be entitled to the same treatment as other non-nationals. The right of refugees to non-discrimination, freedom of religion, property rights and rights of association are covered in Articles 3, 4, 13 & 14 and 15 respectively. Most importantly in the context of this report, Article 16 of the Refugee Convention declares that refugees should enjoy the same treatment as nationals with regards to access to the courts, ‘including legal assistance’. The Convention further notes that it does not impair or limit any rights granted by other international legal instruments (Article 5).

The Refugee Convention also includes a rather extensive list of economic and social rights to which refugees are entitled. An entire chapter is devoted to employment: refugees are to enjoy work rights, including the right to self-employment, equal to the most favourable treatment accorded to other non-nationals (Articles 17, 18 and 19). Chapter 4 deals with welfare, and states that refugees should be treated as favourably as possible with regards to housing, and at a minimum must receive treatment equal to that of other non-nationals (Article 21). Article 22 mandates that refugees have access to elementary education equal to nationals, and access to higher education on as favourable terms as possible. According to Article 24, the entitlement of refugees to social security should be equal to that of nationals. Article 34 notes that states should assist as much as possible in the ‘assimilation and naturalization’ of refugees. Presumably this would include access to resettlement assistance and language classes.

5.3 Asylum seekers and the Refugee Convention

Interestingly, the Refugee Convention does not deal with the determination of asylum claims, leaving states to implement their own processes (Rod and Brunton 2002:21). It is the state which ultimately confers refugee status and hence:

‘there is a discrepancy between the theory and practice of international rulings on refugees. Theoretically, any individual who fulfils the criteria of the Convention is recognized as a refugee, but in practice the individual can only benefit from that status once it has been recognized by the potential country of asylum’ (McMaster 2002:31).

This means that advocates of harsher asylum policies can argue that the provisions of the Refugee Convention do not apply to asylum seekers, but only to those who have been officially recognized as refugees by the receiving state. This argument is highly problematic as it contradicts international legal consensus and, most importantly, the UNHCR’s explicit and authoritative interpretation of the Convention. According to the UNHCR Handbook on Procedures and Criteria for Determining Refugee Status,

"a person is a refugee within the meaning of the 1951 Convention as soon as he [sic] fulfils the criteria contained in the definition. This would necessarily occur prior to the time at which his [sic] refugee status is formally determined... [this stance] has been unambiguously and consistently affirmed by the [UNHCR] Executive Committee over a twenty-five year period" (Quoted in Lauterpacht and Bethlehem 2003:115-118).

This interpretation is well-established with regards to the basic right of non-refoulement, but less commonly applied to the economic and social rights set out in the Refugee Convention. However, Australia is a wealthy country that could provide an adequate standard of living for asylum seekers. Given this, and keeping in mind the entitlements of refugees to the rights set out in the UDHR, the spirit of the Refugee Convention and the UNHCR’s consistent pleas for states to adopt generous asylum policies, it is reasonable to expect that Australia uphold all articles of the Convention.
Australia’s compliance with the Refugee Convention

Despite this, there are several areas in which Australia’s compliance with its human rights obligations under the Refugee Convention can be questioned. Firstly, the practice of detaining asylum seekers who arrive in Australia without valid documentation is widely, though not universally, agreed to violate Article 31 of the Convention, which prohibits states from penalizing unauthorized entrants. The UNHCR Executive Committee, the authority with regards to interpretation of the Refugee Convention, maintains that asylum seekers have a “presumptive entitlement” to the benefits of Article 31 unless and until they are determined not to be bona fide refugees (Türk and Nicholson 2003:14). The Executive Committee has also concluded that detention is only permissible in specific and exceptional cases where an individual poses a significant threat to national security or public order, or is likely to abscond (UNHCR Executive Committee 1986). Secondly, temporary protection visas are problematic in that they do not enable refugees to access the same level of social security as nationals, make access to education difficult, and inhibit employment due to the temporary nature of the visa (Refugee Council of Australia 2001; Department of Immigration and Multicultural and Indigenous Affairs 2003:1).

The treatment of asylum seekers living in the Australian community on bridging visas also fails to comply with the Refugee Convention. Whereas the Convention specifies that refugees should have work rights equal to the most favourable treatment of non-nationals, many asylum seekers are prevented from working either in a paid or voluntary capacity. According to the Convention, refugees should have access to financial support in the form of social security equal to that of nationals, but again asylum seekers in Australia receive no government benefits and face poverty and hardship. The Convention states that refugees are to be treated as favourably as possible with regards to housing, although asylum seekers receive no government assistance in terms of housing and, if they are unable to work, are forced to rely upon family, friends and community organisations for housing, resulting in shelter which is often temporary and uncertain. The Refugee Convention mandates that elementary education should be available to asylum seekers, and that higher education should be accessible on as favourable basis as possible. Australia’s treatment of asylum seekers does not meet these standards as children often face significant difficulties in attending school and those adult asylum seekers without work permission are effectively prevented from studying. Finally, the Convention also notes that refugees are entitled to legal access and assistance equal to nationals, while asylum seekers in Australia do not receive legal aid and must either pay for legal assistance or obtain it from community organisations.

The primary data collected in this report highlights that the key areas of concern regarding policy towards community-based asylum seekers relate to work, health, housing, education and legal assistance, while the above highlights how Australian policy currently falls well short of the standards outlined in the Refugee Convention.

Rights and entitlements in selected OECD countries

To assess how this compares with other countries, a brief overview of policy in other countries is provided, relating to the rights and entitlements they afford to community-based asylum seekers. The countries represent a range of OECD countries from North America, Europe and Australasia, and were selected to demonstrate the variations that exist in policy towards those seeking asylum.

Canada

The main legislation relevant to refugees in Canada is the Immigration and Refugee Protection Act 2002 (IRPA). Like Australia, Canada has both an offshore and an onshore refugee intake, and some asylum seekers may be detained for short periods on arrival. Onshore asylum seekers in Canada make their initial claim for protection at a port of entry or a Canada Immigration Centre (CIC). Ninety-nine percent of these claims are then referred to an independent body, the Immigration and Refugee Board (IRB) for determination. An asylum seeker is either accepted as a Permanent Resident or rejected following an oral IRB hearing. There is a limited appeals process for unsuccessful asylum seekers. The average time that a asylum seeker waits for a decision is between six and twelve months, although a substantial number experience long delays (Canadian Council for Refugees 2003a; Canadian Council for Refugees 2003b).

During the wait for determination of their claim asylum seekers are able to access a range of services by virtue of the Canadian Charter of Rights and Freedoms, which protect all persons in Canada.

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25 The Refugee Convention does not make mention of either transport or health care.
26 It should be noted that this is intended to provide a brief overview only, and lack of space precludes an in-depth examination of all policy in each country.
irrespective of their status (Citizenship and Immigration Canada 2005a). There is no requirement for their claim to be made within a certain timeframe to access these benefits.

**Employment** - Asylum seekers in Canada are not automatically entitled to work, but must apply for employment authorisation. Provision is made under the Canadian Immigration and Refugee Protection Regulations 2002 (Section 206) to provide a work permit to asylum seekers where they cannot support themselves without working (Canadian Immigration and Refugee Protection Regulations 2002). It takes approximately three months for asylum seekers to be granted employment authorisation (Murdie 2005:4).

**Welfare benefits and assistance** - Asylum seekers are eligible to access welfare benefits (social assistance) so long as they have a financial need but when they are eligible depends upon which province they live in. Assessing the situation of asylum seekers in Canada with regards to financial support is difficult because each of Canada’s 13 provinces have separate social security arrangements. In some provinces asylum seekers can apply for social assistance as soon as they submit their asylum claim, while in others they must wait until their claim is decided upon. In those provinces where assistance is not available until a decision on asylum is reached, emergency assistance is available to prevent undue hardship during the wait (Human Resources and Skill Development Canada 2004:4). Eligibility for social assistance is based on a ‘household’, which may consist of a single person, a couple with or without children, or a single parent with children (Human Resources and Skill Development Canada 2004:7). Different rates of social assistance are set by the various provincial governments, and take into account the cost of living and other entitlement factors.

Under the IRPA asylum seekers are entitled to representation, at their own cost, while subject to proceedings under the Act. However, most asylum seekers lack the financial resources to pay for legal services and are therefore largely reliant upon government legal aid, the availability and quality of which varies between provinces. Whilst legal aid is provided to asylum seekers by provincial governments in Quebec, Newfoundland, Alberta, Ontario, British Columbia and Manitoba, elsewhere asylum seekers may need to rely upon community organisations and free legal clinics for assistance (Frecker, Duquette et al. 2002).

**Healthcare** - The Interim Federal Health Program (IFHP) allows asylum seekers to receive emergency and essential health services while they await the outcome of their asylum claim (Canadian Immigration and Refugee Protection Regulations 2002), although the coverage offered is significantly less than that available to Canadian citizens. The IFHP covers the cost of treatment for serious medical/dental conditions, including immunizations and other vital preventative medical care, essential prescription medications, contraception, prenatal and obstetrical care (Citizenship and Immigration Canada 2005b). A range of other services requiring prior approval of the IFHP include ambulance/medical transport, other than in an emergency, high cost medications, ongoing psychiatric care, psychotherapy or counselling. The IFHP does not cover routine medical/eye exams, infertility treatment, chiropractic care, alternative/complementary medicine, or over-the-counter medications, even when written on a doctor’s prescription (Citizenship and Immigration Canada 2005b).

**Education** - Asylum seekers who are minors are automatically eligible to attend schools in Canada. Adults have to apply for authorisation to attend classes while awaiting a decision on their claim (Yu 2003).

### 5.5.2 Denmark

Traditionally supportive of refugees, Denmark has recently taken a much tougher stance on asylum seekers and refugees (Osborn 2002), with the introduction of the Aliens (Consolidation) Act 2002 tightening eligibility to claim asylum and restricting asylum seekers’ access to welfare. The legislation caused alarm at the UNHCR and the governments of Sweden, France and Belgium sent a joint letter expressing their profound concern at the legislation (Osborn 2002).

During the period that a claim is being processed, asylum seekers must stay in an accommodation centre, where they receive food, lodging, healthcare, Danish language instruction and pocket money (Royal Danish Ministry of Foreign Affairs 2005).

**Employment** - An asylum seeker may not work in Denmark unless they have a work permit or residence permit (Danish Immigration Service 2005a). Asylum seekers must enter into a contract with the asylum accommodation centre they reside in, which stipulates activities the claimant must carry out to receive pocket money. Cleaning bedrooms, cleaning common areas, preparing food, maintenance or clerical work for the centre are examples of activities asylum seekers are expected to participate in. Non-completion of these tasks will result in pocket money allowances being docked for the period the recipient was not completing the tasks. Asylum claimants whose claim will be processed in Denmark are
also entitled to do unpaid on-the-job training outside the centre, or unpaid humanitarian or voluntary work (Danish Immigration Service 2005b).

Welfare benefits and assistance - As part of the new Aliens legislation, entitlements for people who have not been resident in Denmark for seven of the past eight years were severely reduced. Recipients of the new ‘Introduction benefit’ available to people in this category receive around 35-40% less than Danish welfare recipients (Royal Danish Ministry of Foreign Affairs 2005). The Danish Immigration Service provides asylum seekers an allowance for clothing and pocket money, as well as for food expenses, unless the accommodation centre they reside in provides food in which case food benefit is not available (Danish Immigration Service 2005a).

Available benefits for asylum seekers are split into four: a basic amount covers paid to all adult asylum seekers who do not receive free meals at their accommodation centre; a supplementary benefit for all adult asylum seekers who meet their contract obligations to the accommodation; child dependency daily benefits are paid for the first two children, with a reduced child dependency payment for a third or fourth child. These benefits may vary, depending on whether food is provided at the accommodation centre (Danish Immigration Service 2005b).

Healthcare - Asylum seekers have access to healthcare paid for by the Danish Immigration Service. Funded by the Immigration Service, the Danish Red Cross provides nursing services for all asylum centres. If asylum seekers require treatment beyond the nurse’s capabilities, they may be referred to physicians. Where healthcare will be expensive, for example is hospitalisation or extensive dental work is required, permission must be obtained from the Immigration Service (Separated Children Europe Programme 1999).

Education - Adult asylum seekers are required to undertake education classes at their accommodation centre to maintain and expand their academic and professional skills. If asylum seekers do not attend classes they will not be entitled to receive their full welfare benefits (Danish Immigration Service 2005b). Child asylum seekers (aged 7-16) are offered special instruction at or near the accommodation centre and lessons include Danish and English language instruction, as well as other standard public school subjects (Danish Immigration Service 2005a).

5.5.3 Germany

Germany has traditionally received a very large number of asylum seekers, although in recent years the number of applicants has dropped dramatically, by 30% between 2003 and 2004 alone (Encontre 2004). Claims for asylum are assessed by the Federal Office for Asylum and Refugees under the Asylum Procedure Act. Asylum seekers in Germany are obliged to live first in a reception centre and then subsequently in an accommodation centre while their application is being considered. While in reception centres, asylum seekers receive meals and a federally mandated allowance (Van Gelder 2003:7). Work permits are conditional and welfare benefits are around 80% of those available to other German recipients (European Migration Centre 2005), however, there appears no time limit for making an asylum claim before being able to access them.

Employment - In December 2000, Germany ended the ban preventing asylum seekers from working and legislated for asylum seekers to be able to apply for a work permit when they have been in the country for twelve months (Australian Immigration Visa Services 2004). Section 61(1) of the Asylum Procedure Act (APA 1993) also states that asylum seekers cannot work while in a reception centre, which is usually for the first three months of their stay in Germany. In most cases however, asylum seekers are unable to work due to Germany’s very tough criteria, meaning foreigners are able to receive an employment permit for specific jobs only after the jobs have already been offered to nationals and other foreign nationals (Federal Ministry of the Interior 2005).

Welfare benefits and assistance - A monthly allowance is payable to asylum seekers living in accommodation centres with teenagers and adults receiving EUR 41 (approximately AU$66 per month), while children receive EUR 20.5 (approximately AU$33). This amount is designed as ‘pocket money’ since all items to ensure that personal wellbeing and hygiene is maintained are provided by the accommodation centres (Van Gelder 2003:7). Asylum claimants not living in asylum centres may receive financial assistance in monetary terms or via vouchers redeemable at certain outlets (Danish Refugee Council 2000:116). After three years of asylum seeker status, claimants are entitled to the same social support as German nationals, under the Social Assistance Act (Danish Refugee Council 2000:116).

Free legal aid is available to asylum seekers but only once their claim comes before the administrative courts and is only granted to claimants who are deemed to have a real prospect of success. In effect very few asylum seekers are therefore eligible for free legal aid (Danish Refugee Council 2000:110).
Healthcare - Medical care is only available in emergency situations, and during pregnancy and post-natal care (European Migration Centre 2002). After their first three years of asylum seeker status, claimants are eligible to access full national health services by virtue of the Social Assistance Act (Danish Refugee Council 2000:117). There are no medical services in the “asylum centres” (in which asylum seekers live following an initial three months in a “reception centre”), however, some of these centres have links with doctors and may make referrals (European Council on Refugees and Exiles 2000:116).

Education - Asylum seekers' children have the right to attend school, but not all regions do provide schooling for them (Danish Refugee Council 2000:116). Education opportunities for adult asylum seekers are even more limited. The government does not provide language lessons, although these are sometimes available from NGOs.

5.5.4 New Zealand

Like Australia, New Zealand maintains an offshore refugee program with an annual quota, although as a signatory to the Refugee Convention, it is also required to consider the claims of onshore asylum seekers, which are assessed by the New Zealand Immigration Service’s Refugee Status Branch. There are two classes of community-based asylum seeker in New Zealand: those who have arrived with valid documents and those who have been conditionally released from detention after arriving without sufficient documentation. Asylum seekers must first make their asylum application, be interviewed and have the merits of their case assessed to determine whether they have a case to seek official refugee status. Once this process has occurred they can apply for residence or temporary permits, which are required under the Immigration Act 1987 Section 5(1) to be eligible to apply for work permits or benefits (Immigration Act 1987).

Employment - Asylum seekers who live in the New Zealand community on conditional release are not granted temporary work permits and are therefore unable to work. Other asylum seekers are not automatically entitled to obtain a work permit. According to the New Zealand Immigration Service, all asylum seekers who show a need to work in order to support themselves may be granted a Special Work Permit, although they need to prove that they have sufficient funds to survive (New Zealand Immigration Service 2005a), and must have already been granted a temporary permit. Applicants who belong to families where one member has already been given permission to work are not normally also eligible for a Special Work Permit (New Zealand Immigration Service 2005a).

Welfare benefits and assistance - Asylum seekers in New Zealand have access to some social security benefits, although those on conditional release from detention are granted fewer entitlements to those who enter New Zealand with legal documentation (RMS Refugee Resettlement 2005). Asylum seekers are eligible for Emergency Benefits so long as they have already made their asylum claim and have a valid, current permit to be in New Zealand (Work and Income New Zealand 2005b). The social security entitlements of asylum seekers are less comprehensive than those of citizens and permanent residents, and are often not adequate for meeting needs (Uprety, Basnet et al. 1999).

The government does not directly assist asylum seekers with housing but instead provides some funds to organisations like the Auckland Refugee Council (Amnesty International New Zealand 2005). The Auckland Refugee Council Inc. provides accommodation, social work support (including assistance with accessing New Zealand social agencies, charities, interpreters), and English classes (Auckland Refugee Council Inc 2005).

Asylum seekers are eligible for civil legal aid to assist in pursuing their claim (New Zealand Immigration Service 2005b) as well as translation services (Amnesty International New Zealand 2005).

Healthcare - Asylum seekers are able to access public health doctors but are unable to access specialist services such as dentists, mental health professionals or optometrists (Human Rights Commission 2004). Asylum seekers can apply for the Community Services Card which subsidises visits to General Practitioners and the cost of prescription drugs (Work and Income New Zealand 2005a), however obtaining the Card can take a significant amount of time (Uprety, Basnet et al. 1999), and it excludes the services of specialists, osteopaths, podiatrists and dieticians (Work and Income New Zealand 2005a). A range of health care agencies provide free or reduced cost services for asylum seekers (Uprety, Basnet et al. 1999).

Education - Adult asylum seeker’s access to education is limited by virtue of the Immigration Act 1987, (Section 6(1)) which requires a residence or temporary permit before being eligible to access education (Immigration Act 1987). Asylum seeker's children, however, are entitled to public education (Amnesty International New Zealand 2005).
5.5.5 Sweden

Sweden is a signatory to the Refugee Convention and accepts both a quota of offshore refugees and a substantial onshore asylum process. Upon arrival, onshore applicants contact the Migration Board and lodge an application. If this is rejected, they may appeal to the Alien Appeals Board.

Employment - Community-based asylum seekers in Sweden are granted permission to work if the Migration Board expects the claim process to last for more than four months. Given that the Migration Board aims to make a first decision within six months, and that the average wait for a final result is 15 months, it would seem that most asylum seekers have permission to work (Migration Board 2005). Nonetheless, asylum seekers in Sweden face significant difficulties in the labour market resulting in high levels of unemployment (Loof and Gorlick 2004:14-15).

Welfare benefits and assistance - Asylum seekers in Sweden are expected to support themselves if they have the resources to do so. Alternatively, they are eligible to receive daily payments of between 37 and 71 kroners/day (approximately AU$6.40 - AU$12.20) if they lack the means to survive (Migration Board [a]). In addition, they may be eligible for one-off government grants, for example, to purchase winter clothing or baby items (Migration Board 2005).

Asylum seekers in Sweden have several housing options. They can choose to live in a Reception Centre, although this accommodation is crowded and generally requires that asylum seekers share their room or flat. Accordingly, more than 50% choose to find alternative accommodation, often through friends or family (Migration Board 2005). The Migration Board also leases properties for use by asylum seekers. Finally, if they are employed in an area in which no Migration Board housing is available, they may be eligible for a housing allowance (Migration Board 2005).

The Migration Board makes an initial assessment of asylum claims in Sweden. If it seems likely that the application will be refused, asylum seekers are provided with free legal aid in the form of public counsel representation (Migration Board 2005).

Healthcare - Emergency medical and dental services are available free to community-based asylum seekers. They are charged 40-50 kroners (AU$6.90 - AU$8.60) for other medical appointments, prescription medicines and medical transport, up to a limit of 400 kroner (approximately AU$70) over a six month period (Migration Board 2005). Children have the same access to public health services as Swedish nationals.

Education - Asylum seeker children in Sweden have entitlements to day-care and complete primary and secondary education to the same level as Swedish nationals. The Migration Board aims to have asylum seekers in school within three weeks of arrival in the country (Migration Board [b]). Some education is available to adults, while language and computer classes form part of the compulsory activities which must be undertaken by all asylum seekers between the ages of 16 and 65 (Migration Board 2005).

5.5.6 UK

With a large influx of asylum seekers since the early 1990s (Mitchell 2004b), the British Government has taken a fairly tough stance towards the treatment of asylum seekers. By law asylum seekers in the UK are not entitled to take up employment and their access to social services is more limited than those available to UK citizens.

Employment - Asylum seekers in the UK are ineligible to participate in the workforce by virtue of the Immigration Act 1971 and various amendments outlined in the Immigration Act 1988, the Asylum and Immigration Act 1996, the Immigration and Asylum Act 1999, the Nationality, Immigration and Asylum Act 2002 and the Asylum and Immigration (Treatment of Claimants, etc) Act 2004, irrespective of when they make their asylum claim.

Up until July 2002, an asylum applicant could apply to the Secretary of State for permission to take up employment if their asylum application has not been decided within twelve months (Home Office 2005a). Since this time the Home Office has denied asylum seekers all access to employment or vocational training until they have been granted refugee status (Refugee Council 2005a:1).

Welfare benefits and assistance - The National Asylum Support Service (NASS), which commenced in 2000, provides a basic package of financial and/or housing support to asylum seekers who are found to be destitute or likely to be so within 14 days (Refugee Council 2005b). Establishment of the NASS was a response to the Immigration and Asylum Act 1999 which took away the right of asylum seekers to access mainstream welfare benefits, public housing and local authority assistance that is available to other UK residents (Refugee Council 2005c:1).
Section 55 of the Nationality, Immigration and Asylum Act (NIA) 2002 attempted to restrict access to NASS support to those asylum applicants who could prove they had made their asylum application ‘as soon as reasonably practicable’ after entering the UK. This restriction, which resulted in severe hardship to thousands of asylum applicants, was revised in June 2004 following a test case in the Court of Appeal which found that the UK Government had breached applicants’ human rights by denying support. Now denial of NASS support is solely based on whether applicants have access to alternative sources of support (Refugee Council 2005b:2).

Asylum seekers can apply for NASS support at any time during the process of their asylum application. The NASS reviews all assets the asylum seeker may have, either in the UK or elsewhere, before making their determination. If the asylum seeker is found to have sufficient funds to meet essential living costs for 14 days, their claim for support will be denied (Refugee Council 2005b).

NASS support can be in the form of accommodation and financial support, or financial support only if the applicant has friends or relatives willing to provide accommodation. The financial support provided is around 70% of regular income support payments provided to other UK citizens. For a couple claiming NASS support, the weekly cash entitlement is £61.71 (approximately AU$145) per week while a sole person over the age of 25 is entitled to £39.34 (approximately AU$93) per week (Refugee Council 2005b:4). Where asylum seekers also require accommodation, they are housed in facilities of the NASS’s choice, usually in hard-to-rent areas with already existing social problems, outside of London and the Southeast (Refugee Council 2005b:4). Asylum seekers are expected to stay in this ‘dispersal accommodation’ until their asylum application is decided. Failure to move into this dispersal accommodation may result in asylum seekers being evicted from their emergency accommodation (Refugee Council 2005b:4).

Already destitute asylum seekers who apply for NASS support are placed in a residential centre for 7-10 working days while a determination of their eligibility for NASS support is being made. While in this emergency accommodation, applicants are provided with all meals and hygiene needs and do not receive any cash payments or tokens for redemption at stores (Refugee Council 2005b:3).

Pregnant women already receiving NASS support are eligible for a one-off £300 payment per child in the form of ‘emergency’ vouchers, valid for four weeks after date of issue. They also receive cash payments of between £3- £5 per week depending upon the age of their child, to cover the cost of milk (Refugee Council 2005b:5).

‘Hard case’ support grants are available for asylum seekers who have been denied asylum, have exhausted their appeal options and are unable to leave the UK due to physical impairments, for example late-stage pregnancy or ‘exceptional circumstances’. This ‘hard case’ support is in the form of basic full board accommodation, usually outside London. Recipients must undergo monthly reviews of their circumstances and must illustrate their efforts to comply with removal orders (Refugee Council 2005b:5).

Healthcare - The restrictions to welfare access imposed by the NIA 2002 did not extend to all public assistance. All asylum applicants, irrespective of when they applied for asylum, are entitled to free primary medical care provided by the National Health Service. This includes accident and emergency care, maternity and in-patient/out-patient services, free NHS prescriptions, free NHS dental, travel costs to and from hospital, and vouchers contributing to the cost of glasses or contact lenses (Refugee Council 2005d:3). Since April 2004, those denied asylum are required to pay for non-urgent in-patient hospital services (Refugee Council 2005d:3).

Asylum seekers with disabilities, mental health or other health needs can still access some services provided under the Community Care legislation covering all UK citizens. Access to these services is not automatic and each applicant is assessed to determine what, if any, assistance will be provided (Refugee Council 2005c:1).

Education - Asylum seekers have full access to public education up until the age of 16. They also have unrestricted access to further and higher education but must usually pay overseas student fees, without access to Student Support, or Hardship Loans available to other students (Refugee Council 2005a:1). With no ability to participate in the workforce and the requirement to pay overseas student fees, many asylum seekers are unable to further their education.

5.5.7 USA

Asylum claims must be made within twelve months of arriving in the United States (US) but there are certain circumstances where claims will be accepted after this time (INA Section 208 (a) (2) (D)). Asylum seekers do not have access to employment and very limited access to welfare, irrespective of when they made their asylum claim. The preamble to the Personal Responsibility and Work Opportunity
Reconciliation Act of 1996 (PRWORA) states that ‘self-sufficiency...continues to be the immigration policy of the United States...’. This Act’s preamble further states a desire on the part of the US Congress to deter aliens coming to the US in pursuit of generous welfare benefits (PRWORA 1996)

Employment - Under the Immigration and Nationality Act (INA) section 208 (d) (2), asylum seekers are not entitled to apply for a ‘green card’ to participate in the workforce. They can only apply for employment authorization if given a recommended approval or conditional grant of asylum. If, however, a decision on their asylum claim has not been made within 180 days following filing of the completed application, asylum seekers are entitled to apply for work authorisation (Immigration and Nationality Act 2004).

Welfare benefits and healthcare - Access to welfare and healthcare benefits for asylum seekers was severely restricted with the passing of PRWORA in 1996, which barred ‘non-qualified’ aliens from most federal, state and local public benefits ((US Citizenship and Immigration Services 2005b). A ‘qualified alien’ is defined under the Act as one who has been granted asylum. Section 401 (b) of the Act provides some exceptions to this ban, allowing asylum seekers to access emergency medical treatment, short-term, non-cash, in-kind emergency disaster relief, public immunization, treatment for communicable diseases and various programs, services, and assistance including soup kitchens, crisis counselling and short-term shelter (PRWORA 1996). During the time they are awaiting a decision, asylum seekers are forced to rely on family or friends to bear the cost of providing them with housing and financial support. Asylum seekers are eligible for free legal assistance to assist in making their asylum claim (Immigration and Nationality Act 2004).


Summary

As can be seen a number of approaches have been taken, and a common factor appears to be an increasing shift in recent years towards deterrence of those seeking protection. Generally speaking, it would seem that policies are becoming more restrictive, as the rights and entitlements which asylum seekers receive are increasingly limited. While approaches vary, it would appear that all countries do make some provisions for material support of asylum seekers, even if this is limited. For asylum seekers in financial difficulty, assistance is available in the form of benefits or possibly work permission, which ensures that people are able to meet their most basic needs. Assistance may be provided with housing, either through the provision of shelter through accommodation centres as may be the case in Europe, or through access to housing assistance. Access to medical treatment is also usually available, though again this may be restricted to emergency situations in some countries.

This brief review reveals that Australia would appear to be alone in being the only country to deny a sector of the asylum seeker population, namely those who apply for protection after 45 days of arrival in the country, any means of support. This sector is denied work permission, receives no income support, and has no access to medical, housing or legal assistance. The country with the greatest degree of similarity to Australia’s policy is the USA, which appears to be taking an increasingly repressive stance with regards to asylum seekers. However even in the USA some support is available, particularly for those who experience long determination periods. Those who have not received a decision within approximately six months are entitled to apply for work authorisation, which means they are not reliant on family, friends or community organisations for possibly several years, as often appears to be the case in Australia.

Based on this brief review, Australia appears to have implemented an extremely harsh approach towards the care of people seeking protection from the Australian Government. The following section considers this finding, as it discusses the results of this research project and seeks to highlight ways in which Australia should accept greater responsibility.
6. Discussion and recommendations

This project set out to explore the difficulties experienced by asylum seekers who live in the community while awaiting a final decision on their claims for protection. These difficulties are well understood by those in the community who work with them, but as there has been little documented evidence of this to date, this project set out to:

- Increase understanding about the experiences of Queensland’s community-based asylum seekers;
- Identify services and individuals which offer support to community-based asylum seekers, and determine any difficulties they encounter in providing welfare assistance;
- Analyse how Australia is meeting, or failing to meet, its obligations as a signatory to the UN Refugee Convention;
- Compare the rights and entitlements of community-based asylum seekers in Australia with those provided in a range of other OECD countries.

Broadly speaking, the major findings of this research can be summarized as follows:

- Many community-based asylum seekers, particularly those without work permission and thus Medicare access, are in dire need of support in all aspects of their lives;
- Welfare providers in the community sector are largely unfunded to work with asylum seekers, and as a result are struggling to meet current demand with existing resources;
- Many in the community are unaware that some asylum seekers live under such condition.
- The current system of visa processing is not working efficiently, and lengthy waiting times add to difficulties experienced by both asylum seekers and their supporters;
- Australia is not only failing to meet its obligations as a signatory to the Refugee Convention, but compared with a sample of OECD countries, also appears to be the only country to leave a vulnerable sector of its population without access to either the labour market or some form of welfare benefit;
- Workable alternative solutions exist without compromising the current border protection regime;

These findings are largely reflective of the previous research that has been done into this issue in Victoria, although the smaller population of asylum seekers in Queensland does create some specific challenges.

6.1 Community-based asylum seekers in need of support

Experiences of community-based asylum seekers on BVEs, particularly those without access to work permission and Medicare, reveal that a highly vulnerable section of the population is struggling to survive. A significant proportion of BVE holders are not allowed to work, have no access to benefits of any kind, and are not allowed to undertake voluntary work in return for food or shelter. This has been the situation for many asylum seekers since the introduction of the 45 day rule in 1997, the effects of which have been devastating. The 45 day rule breaches numerous international human rights standards, and while designed to deter false claims for asylum, simply results in the punishment of many genuine asylum seekers who are forced to rely on charity for the duration of the time it takes for their claim to be finalised. Results revealed in this study show that some asylum seekers are living in extreme poverty, at times finding it difficult to secure enough food to eat, even for children. These findings largely echo those of the Hotham Mission, who also found that asylum seekers without work permission were living in abject poverty (Hotham Mission 2003).

Preventing access to work, even on a restricted basis, is the cause of the majority of problems reported here, as it not only denies asylum seekers the opportunity to earn an income but simultaneously removes their independence, freedom and choice from many other areas of their lives. It prevents people using their skills and talents, and from making a meaningful contribution to Australian society. There is also the danger of creating difficulties for the individual when they do eventually return to the labour market, as skills which have been dormant for a long period of time may no longer be of use. It appears to be somewhat shortsighted to ignore the available skills of asylum seekers, particularly in light of the current national skills shortage and the recent announcement of a move to attract more skilled migrants to Australia. Removing the right to work forces people to rely on charity and creates feelings of being a burden, about which they can do nothing, not even offer voluntary work in return for what they are given. As participants noted, employment is not simply a source of income, although this is an important factor; it is central to providing individuals with a sense of self-worth and self-esteem.

An unreliable income source impacts on most areas of an individual’s life, including accommodation, education and health care. Without a secure income stream, securing appropriate accommodation is a major challenge, and asylum seekers often find themselves at risk of becoming homeless. The results
from this study support findings from recent research in Queensland which highlight the impact that the inability to access housing has on the physical and mental health of asylum seekers, resulting in insecurity and severe impoverishment for both individuals and families (Red Hill Paddington Community Centre and Australian Housing and Urban Research Institute 2004). Access to accommodation is hampered not only due to income insecurity, but also due to the lack of access to services and government housing assistance.

Asylum seekers are prevented from undertaking many forms of education, unless they are able to pay as international students; given their financial situation this is highly unlikely for many. Children of asylum seekers have no right to access the education system, and securing access takes time and negotiation. Similarly, lack of access to legal aid means that to find adequate legal assistance is a challenge, which results in excessive demands being made on the single organisation that can offer a pro bono service. The outcome of this is that many asylum seekers are unable to find legal help to assist them with their cases.

All of these difficulties contribute to high levels of stress and anxiety, and participants experience a variety of health problems as a result. Participants live each day with no idea as to when a decision will be made about their case, and whether this decision will be positive. Many have already lived in Australia for a considerable number of years. The uncertainty and pressures they face contribute to the development of health problems, especially mental health issues, which if left untreated, will be harder to treat in the future. Yet asylum seekers without work permission have no access to Medicare, and therefore may have only limited access to health care. While the establishment of the QIRCH clinic in Brisbane has some potential for meeting the health needs of asylum seekers, it is not yet firmly established. Asylum seekers need access to the Medicare system, to ensure that they are able to access appropriate medical treatment and support.

A final issue to emerge as important relates to transport, and the difficulty of covering transport costs without an income. Asylum seekers may have little choice in terms of where they live. Those living long distances from services and organisations may experience great difficulty when attending important appointments. While some support has been available from the community sector, it is not reliable due to lack of funding.

6.2 Welfare providers struggling to cope with demand on current resources

The main impact of having significant numbers of asylum seekers living in the community without income has been felt by the community sector, which has had to take on the responsibility for the welfare of asylum seekers. All organisations involved in this study reported struggling with the pressure that results from this responsibility. For some organisations in this study such pressure is intense due to a lack of resources to work with asylum seekers. Support is currently provided using existing resources, recruiting volunteers, or undertaking fundraising activities. These activities take staff away from the core activities of their organisation. None of these organisations receive federal government funding for their work with asylum seekers, even those organisations who frequently receive referrals from government agencies such as DIMIA. As a result, many organisations find it difficult to cope with the demand that they face, and asylum seekers may not be able to access the assistance they require.

The major impact on organisations in recent years arises from the 45 day rule, and the fact that asylum seekers are no longer seeking general forms of assistance such as information and referral. Instead, assistance is required for the full range of basic needs, including income support and accommodation, which creates a huge financial drain on organisations. Exacerbating this is the length of time that asylum seekers may be living in the community without access to income, meaning that support may be required for several years. It takes significant amounts of money to provide this level of support, several thousand dollars for each asylum seeker, which largely comes from donations made by church organisations and community members, effectively placing responsibility for the welfare of asylum seekers on to these groups and individuals. While some government funding was reported - primarily from state or local government - this is limited and usually for one-off projects, and while this has allowed some good work to commence, it cannot be sustained once the funding had finished.

One way in which organisations have sought to address their lack of resources is through the use of volunteers to undertake work either with or on behalf of asylum seekers. This enables work to be done, but raises the question about appropriate training, support and supervision, to ensure that the best outcomes are achieved for volunteers, staff and asylum seekers. For example, one organisation reported feeling helpless when trying to support an asylum seeker due to be deported, as it lacked the necessary expertise to help the deportee deal with their grief. It is important to understand that many asylum seekers have experienced great trauma in their lives, both before arriving in Australia and afterwards, and it can therefore be dangerous both to them and to volunteers to have inexperienced people trying to deal with complex and potentially damaging situations. This is not to criticize the work undertaken by volunteers; given the available resources their work is invaluable, and it would be
impossible to meet the current demand for assistance without their help. It is simply recognition of the fact that to deal adequately and appropriately with both the needs of the target group and the potential inexperience of volunteers, it is important that adequate training, support and supervision are provided.

Also of concern in this research is the reported waning of interest within the community in relation to asylum seeker and refugee issues. Since 2001 when the Tampa affair was dominating the media reports, organisations reported increased interest from community members wishing to offer friendship and assistance to asylum seekers. In recent months however, some participants expressed concern that it is getting harder to recruit volunteers to participate for example, in fund raising activities. The pressure of raising funds over long periods of time has drained the energy of many existing groups. As much of the financial assistance required to support asylum seekers in Queensland is provided by fund raising and donations from community members, there is concern about how asylum seekers will be supported if community support is diminished.

The Community Networks of Support project, which initiated some of this community support, provided a strong foundation for the support work that has been undertaken by the community. However, since the project finished in 2002 there have been no available resources to maintain a coordination and motivation role, something that will be vital if community support is to continue. It is essential that more information is disseminated in the community about asylum seekers and their experiences under current policy, to ensure that the community sector will be able to continue its financial support in this important area.

6.3 Current visa processing system is inefficient and requires review

Results reveal that the 45 day rule has placed excessively harsh restrictions on many community-based asylum seekers. This is exacerbated by the current visa processing system, which is inefficient and requires urgent review. The primary issue of concern is the length of time that it takes before a final decision is delivered in relation to individual cases. Two participants in this research have been waiting for nearly nine years, while well over half of the sample has been waiting three years or more, and organisations reported the difficulties of maintaining financial support for such long periods of time. The long term impact of such waiting periods was also highlighted by a number of participants in this study, particularly in relation to mental health issues. Without access to proper care and support these issues are likely to remain untreated, and may subsequently require significant treatment within the Australian health system should the individual be granted asylum.

It is important to ensure that realistic time lines are provided for each stage of the appeals process, and that these timelines are adhered to. The length of time processing requires appears to be a result of two factors; insufficient resources and the lack of a system of complementary protection. A large number of asylum claims are reportedly outstanding, which suggests that there has been an insufficient allocation of resources. This is exacerbated at the moment by the large number of claims awaiting consideration under Section 417, Ministerial intervention. The current system lacks a process for assessing those who have strong humanitarian claims, but who fail to meet the Convention definition of a refugee. As a result, all claims must follow the process of a primary application to DIMIA, appeal to the RRT followed by either judicial review or Ministerial intervention. Such cases create unnecessary demand on the current system, are an inefficient use of resources as well as being expensive (Refugee Council of Australia 2004). A mechanism by which this process could be by-passed in certain situations of humanitarian concern would reduce the current caseload and contribute towards a more efficient and cost effective system.

Concerns were also reported in the study about the fairness of the system, and in particular the independence of the RRT. While anecdotal information provided remains unsubstantiated, it is necessary to examine the RRT in its entirety, to ensure that asylum seekers are afforded a process that is independent, fair and equitable.

6.4 Australia is failing to meet its obligations as a Refugee Convention signatory, and places some of the harshest conditions on asylum seekers, compared to other OECD countries

The reality of current policy for community-based asylum seekers on BVEs in Australia is that they are often denied permission to work, and have no access to income support, Medicare, housing assistance, legal assistance and education. However, it has been noted that under general international humanitarian and human rights law, refugees are considered to have the rights enshrined in the UDHR, the International Convention on Civil and Political Rights and the 1966 International Convention on Economic, Social and Cultural Rights.27 Australia, as a signatory to these as well as the UN Refugee Convention, has a responsibility to provide for the basic needs of asylum seekers, yet current policy fails

27 Except where these refer specifically to ‘nationals’.
to address this. While consideration of policy towards asylum seekers reveals a global shift in direction towards greater deterrence, comparison with other OECD countries reveals that Australia appears to have taken this to an extreme.

Based on a brief review, Australia appears to be the only country in the sample to leave a particular sector of its population without any form of support. The approach to asylum seekers adopted by the USA shows a greater resemblance to the Australian system, due to the increasingly harsh steps that have been taken in recent years to deter those who are attracted by ‘generous welfare benefits’. However there are still some provisions made to cover the welfare of asylum seekers in the short term, while those who have been waiting for more than six months for a decision on their case are eligible to apply for work permission. The other countries considered in this review already use policies which grant either work permission or income benefit for asylum seekers who experience severe hardship. A similar system, if implemented in Australia, would alleviate many of the concerns raised in this report by both asylum seekers and welfare providers, and ensure that the basic needs of asylum seekers are met while they await a decision.

6.5 Workable solutions exist - final recommendations

The findings of this report largely support those of recent research into asylum seekers in Melbourne (Hotham Mission 2003; McNevin 2005), and reveal that the basic human rights of asylum seekers are being violated. The introduction of the 45 day rule has unfairly penalized many genuine refugees, leaving them facing extreme poverty and the many problems associated with this. In addition the stress and uncertainty that they face over long periods of time is having a detrimental effect on their health, which if left untreated could become serious on-going health issues.

The Federal Government needs to recognize and accept responsibility for the welfare of asylum seekers that come to Australia to seek protection, and move to ensuring that their human rights are respected. Other countries demonstrate that it is possible to treat asylum seekers in a humane way by providing for their basic needs, and Australia needs to urgently review its current policy to allow for this. Providing the necessary requirements that enable people to survive with dignity while seeking asylum will not compromise its current system of immigration and border protection, and should be achieved by implementation of the following recommendations:

Recommendation 1 - Access to work rights and basic living allowance

1.1 Asylum seekers should be given permission to work in order to support themselves. This will remove much of the financial burden from community sector, and allow people not only to support themselves and their families, but to contribute to Australian society via the payment of taxes. At a time when the country faces a national skills shortage, it makes economic sense to provide asylum seekers with work permission.

1.2 At the same time, a basic living allowance should be available to vulnerable groups who are unable to work. This could be an extension of the existing ASAS, and could use a set of criteria to ensure eligibility for those asylum seekers who lack other forms of support, to avoid placing unrealistic demand on available resources.

1.3 The right to work and/or a basic living allowance should be available to asylum seekers from submitting their DIMIA application until a final decision is received on their case.

Recommendation 2 - Review of visa application process

2.1 The visa application process should be reviewed and specific timelines applied to the consideration of applications at all stages. The system needs to be adjusted to ensure that timely decisions are delivered.

2.2 A model of complementary protection should be implemented to ensure that those with a valid claim for protection, but who fail to meet the narrow UN definition of a refugee, still have access to a protection visa. It is recommended that the system of complementary protection outlined by the Refugee Council of Australia should be adopted (Refugee Council of Australia 2004), which allows for the provision of an additional visa category to be considered at each stage of the application process. This will remove the large number of applications currently seeking Ministerial intervention, and assist with reducing processing times.
2.3 Processes used by the RRT should be reviewed to ensure that asylum seekers have access to an independent and impartial decision making process that is based on the merits of each individual case. This should include a review of the recruitment and retention of RRT members, to ensure that the process is not compromised by any conflict of interest.

**Recommendation 3 - Additional funding for community sector organisations**

3.1 Additional resources need to be made available to community sector organisations who have adopted the responsibility for the welfare of asylum seekers, with priority being given to those agencies which accept referrals from government agencies such as DIMIA.

3.2 Funding should be sufficient to ensure that the responsibility of financial support for asylum seekers is removed from the community sector, ensuring that this sector is able to concentrate on other forms of support to assist asylum seekers living in the community; this may include information provision and referral, employment assistance and friendship and support.

3.3 The contributions made by community sector staff and volunteers should be acknowledged and supported via the provision of funding for appropriate training and supervision.

**Recommendation 4 - Community education**

4.1 Targeted and widespread community education is required to disseminate accurate information to the community. It is essential that any education campaign is broad reaching and seeks to access those with little knowledge or understanding about community-based asylum seekers. This should include the need to address misunderstandings and misconceptions that may exist in the community in relation to asylum seekers.

4.2 An important advocacy role should focus on the inclusion of education about refugees and asylum seekers in the school curriculum.

4.3 Organisations should continue to advocate on behalf of asylum seekers within both the community and political arenas.
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Appendix 1: Organisations providing assistance to community-based asylum seekers

This section provides a detailed overview of a range of organisations that provide various forms of help and assistance to community-based asylum seekers in Queensland.

South Brisbane Immigration and Community Legal Service (SBICLS)

SBICLS is a specialist community legal service dealing with refugee and immigration law, and is the primary agency in Brisbane for offering help and support to community-based asylum seekers on a pro bono basis. Established 25 years ago in West End as a generalist community legal service, most advice that was being given related to immigration and refugee law, and the service has subsequently built up extensive expertise in this area. SBICLS now provides assistance to disadvantaged migrants in broad range of areas, but primarily their work relates to on shore and off shore refugee cases, domestic violence cases, as well as community legal education and law reform in the immigration area.

The service offers two free evening advice sessions per week, which are staffed by volunteer migration agents and lawyers. These sessions tend to act as a gate-keeping exercise, to assess the merits of individual cases, and any advice that is provided is checked by SBICLS staff the following day. The type of legal advice offered can vary; it may be some basic advice in a 30 minute session, with subsequent provision of support documentation, for example country information, although in such circumstances SBICLS will not actually act as the individual's migration agent. Alternatively, SBICLS may take on a case, if it has sufficient merit, and provided the person has no funds to use a private agent:

“So we will take on a whole case, giving assistance through providing submissions and advocacy to the Department of Immigration and the RRT, and if the case doesn’t succeed then we go to the Minister for Immigration.”

Due to the huge demand for SBICLS’s services, the types of cases have to be prioritized, and current priorities include the on-shore refugee cases and those of temporary protection visa (TPV) holders. SBICLS also takes on domestic violence cases, and possibly offshore refugees and complex migration cases. However, many cases are referred on to other services or agents as the demand is too great to meet with existing resources. For example, SBICLS can assist in cases going to the Federal or High Court, although in such circumstances, these cases tend to be referred on to pro bono lawyers, using the Queensland Public Interest Law Clearinghouse (QPILCH) as the link.

SBICLS receives funding through legal aid, both Commonwealth and State, and also receives some funds from DIMIA. In addition, SBICLS also receives some funding for one-off projects. Demand for the service however, is far greater than the available resources allow, and SBICLS is unable to assist in many cases other than to provide a referral. The service assists around 2000 people a year, by providing advice, in person or by phone for regional areas, or by taking on casework, although this figure refers to all clients, not only community-based asylum seekers. In terms of on-going casework, a rough estimate suggests that 70-80% is either related to either refugee or domestic violence cases.

Queensland Program of Assistance to Survivors of Torture and Trauma (QPASTT)

QPASTT is a community-based non-government organisation which provides a torture and trauma counselling service to refugees and humanitarian entrants. The program began in 1995 and its work, based in a number of teams, covers early intervention, counselling, youth and community development.

The primary support that QPASTT provides to asylum seekers is in terms of counselling, although it also undertakes a range of advocacy work. This may include direct advocacy to the Minister or local politicians when necessary, to support asylum seekers’ cases. QPASTT also works closely with SBICLS to support asylum applications, by assessing the impact of prior experience of torture and trauma on current psychological functioning, and thus an individual’s capacity to tell a consistent story. The impacts of current trauma that asylum seekers face while awaiting an outcome on their protection application can also be significant:

“... obviously the stress of living in limbo with no support is incredibly damaging, and we see that mental health deteriorates really dramatically for asylum seekers, especially if they’ve been rejected at the tribunal level.”

QPASTT has recurrent funding from both Federal and State Health departments, and also receives funding from DIMIA. Like SBICLS, QPASTT also attracts small grants for specific projects, primarily from Multicultural Affairs Queensland and Brisbane City Council. It often undertakes work in partnership with other organisations, often relating to health issues. A partnership with the Tzu Chi Foundation provides
asylum seekers with free oral health care (see below), while QPASTT has been a key stakeholder and is
the current auspicing body of the QIRCH clinic.

Queensland Integrated Refugee Community Health (QIRCH) clinic

The QIRCH clinic opened in October 2002 in the Mater Hospital, to improve the provision of appropriate
health care to refugees and asylum seekers. Prior to the establishment of the QIRCH clinic, asylum
seekers were reliant upon a voluntary medical system initiated by a network of volunteers associated
with the RCSC (see Brisbane Refugee and Asylum Seeker Health Network below). As early as 1999, a
gap was identified in the GP community sector, particularly in relation to the health needs of TPV holders
arriving in Brisbane. As a result QPASTT, the Mater Hospital, Brisbane South Community Health,
Brisbane Inner South Division of GPs, and Queensland Health began negotiations to address this.

The aim of the clinic is to provide initial assessment of often complex health issues, together with short
term care, to refugees prior to the referral of their primary health care to community-based GPs. In
addition to free health care, QIRCH can also offer free pharmaceuticals and free diagnostic testing
through the Mater Hospital. QIRCH now has a full time coordinator and administrative support, nursing
support, and 11 volunteer GPs, and has recently moved to offering a service from three to five days a
week. While it will accept referrals from any source, QIRCH works closely with the RCSC to ensure that asylum seekers with the greatest need have access to the service, due to its limited
resources. Once a person has been accepted by the clinic, they undergo a nursing assessment,
followed by an initial one hour appointment with a doctor. While the ultimate aim of QIRCH is to refer
clients back to community-based GPs after initial assessment, this may be more difficult for asylum
seekers without Medicare cards, and such clients are therefore assessed on a case by case basis.
Where possible, asylum seekers will be referred to a community-based GP near to where they live, with
the GP referring back to QIRCH for pharmaceuticals or diagnostic testing. In other circumstances,
QIRCH may act as the primary health care provider. A card system has been developed for asylum
seekers who have registered with the clinic, which says they are a QIRCH patient and allows health care
providers to trace the asylum seeker back to the clinic. While specific numbers aren’t available, it is
estimated that approximately 15 - 20 asylum seekers are being supported by QPASTT and QIRCH at
any one time.

A key aspect of the Clinic’s work is with GPs, to train and support them and build up a pool willing to
assist QIRCH patients on a pro bono basis. Orientation and support are provided to GPs who volunteer
at QIRCH, while a network of community-based GPs who are willing to treat QIRCH clinic patients has
also been established:

"Because one of the biggest challenges is you can find GPs in the community who
are very willing to help, and willing to see maybe the odd refugee claimant without
Medicare, but their problem is they can’t medicate, they can’t investigate because of
the expense. So QIRCH actually became a very important part of their life and their
decision to accept refugee claimants because all of a sudden they had a whole
infrastructure they could refer back to."

At the current time there are 75 community GPs in the QIRCH pool, and while not all are actively
accepting referrals, they are aware of the clinic and what it does. Many of these GPs are only able to see
Medicare patients, while a small percentage does offer a pro bono service for asylum seekers. QIRCH
currently has a small amount of funding for three years from Queensland Health, which has recently
been matched by funding from the Sisters of Charity in the Holy Spirit Hospital. Other important
contributors include the Mater Hospital, through the provision of low cost office accommodation, free
pharmaceuticals and diagnostic services, as well as a contribution to the full time nursing role, and
QPASTT. While the clinic is doing well, it is still in a fragile state, due to uncertainty around continuing
funding.

Australian Red Cross

The Australian Red Cross has been working to assist asylum seekers for more than 10 years, and
achieves this through administration of the Asylum Seekers Assistance Scheme (ASAS) and through the
provision of emergency relief.

The ASAS has been running for more than 10 years, and initially one of the largest groups of
beneficiaries was the East Timorese. The Australian Red Cross administers this fund as it is aimed at
people without Australian residency, and therefore it would not be appropriate for Centrelink to be
involved in its administration. The ASAS is open to asylum seekers who have been waiting for more than
six months for their primary decision on their application to DIMIA, and is paid until that decision is
received. However, while all who fit this criterion can apply for ASAS, not all will receive it. The
guidelines are clear, and detailed questions are asked about an applicant's financial situation, including whether they can access funds from other sources:

“So you are really basically exploring all the financial situation of that person, and their family, friends and community, and the ASAS will be the last thing that you look at. If the person has a thing like, in the guidelines I think its an item worth $3000 or more, it’s expected they will personally dispose of that and use that money to support themselves.”

Those who are granted assistance from the ASAS receive an income payment that is slightly below the Centrelink payment for a family or single person, although they will receive extra if they have to pay rent; the payment is made fortnightly directly to a bank account. Recipients have the same responsibilities as those in receipt of Centrelink payments, and must notify the Australian Red Cross of any change in circumstance. If this is not done, and an overpayment is made, the recipient must repay the money.

An asylum seeker in receipt of assistance from ASAS who receives a negative primary decision from DIMIA is no longer eligible for these payments. If a person decides to appeal to the RRT, there is a small chance that individuals with special needs such as older people, those with families, or those in poor health may continue to receive a payment, but once a negative decision has been received from the RRT, there is little chance of the payments continuing. A key issue is the lack of available funds:

“The reality of this scheme is they have not, like many other things now, they have not put aside sufficient money for the people that are around. And I think too the cost of living now is different to what it was 10 years ago. You really, to support these people you need money, that’s the issue for everybody.”

The ASAS may also be accessed to cover the cost of medicals, which asylum seekers are required to undertake when applying for a protection visa. Again however, applicants must meet the criterion of having no access to funds before this will be granted. While the numbers of people receiving ASAS fluctuates, the average on the scheme in Queensland is around four or five families. At the current time, the future of ASAS is unclear, although a review of the scheme is due in the coming months, which will provide clarification regarding the continuation of ASAS funding.

The Australian Red Cross also administers an emergency relief fund to assist asylum seekers, refugees and migrants. This scheme was established around six years ago, to assist people in financial difficulty in need of more than a single emergency relief payment. The need for this became particularly acute after the introduction of a two year waiting period for income support for newly arrived migrants. An application was submitted to the Federal Department of Family and Community Services to enable the Australian Red Cross to provide emergency relief to address this issue. The decision was made to provide emergency relief in the form of food vouchers, to ensure no restrictions existed in terms of what can be bought. The relief provided is limited, approximately $25 per week for a single person, but demand is such that the funding needs to be carefully managed and distributed, as once the annual allocation of funds has been used, no further money is available until the next financial year. Eligibility criteria for emergency relief are slightly more flexible than for ASAS, however it is important to remember that emergency relief is not an on-going payment, and this can at times be difficult for clients to comprehend. As a result, there needs to be frequent assessment of individual circumstance, and liaison with other organisations which can also provide additional assistance. The Australian Red Cross assists a larger number of people via emergency relief than through the ASAS, with approximately 15 people in receipt of assistance. In the past, the Australian Red Cross also offered emergency accommodation for up to three asylum seekers, if they were in desperate need, in its accommodation centre. However, it is increasingly hard to find available space there now, and so this happens only infrequently.

Immigrant Women's Support Service (IWSS)

IWSS is an organisation that works with women from a non-English speaking background (NESB) who have experienced domestic and/or sexual violence. Although not funded to work state-wide, IWSS is the only organisation of its kind in Queensland, and therefore does extend its service throughout the state. IWSS has two programs, one of which is a domestic violence program that provides crisis intervention for women experiencing, or who have experienced domestic violence. This may include practical support, emotional support, referrals to specialist services such as legal, health or immigration. The other program offered by IWSS is a sexual assault program, which provides counselling to women who have experienced sexual violence in their lives, either recently or in the past. There is a strong advocacy element within each program, at both an individual and systemic level. Both programs also offer a limited amount of emergency relief.

Asylum seekers who have experienced domestic and/or sexual violence can access either of the above programs, both in terms of counselling and support or emergency relief. Provision of emergency relief is
difficult due to the high number of women that IWSS works with who have no income, meaning demand for such assistance is high:

"We don't have sufficient funding to provide on-going support, but we will, like there's an asylum seeker we are working with at the moment, and we provide some limited money once a month. It is very limited, this doesn't by any means acknowledge the needs of the women that access this service, it's basically an acknowledgement of the limitations the service has in providing financial support. But we are aware there are more needs."

IWSS is currently supporting two or three asylum seekers via their programs and with emergency relief. In terms of funding, core funding is provided by Queensland Health and the Supported Accommodation Assistance Program (SAAP). While IWSS does not directly provide accommodation, it works closely with refuges across the state, although this can be problematic when women have no income. Limited federal funding is available for emergency relief, while donations from a range of sources also help to support the work of the organisation.

The above agencies play a key role in the provision of support to community-based asylum seekers, including financial assistance, accommodation, health services and emotional support. In addition to these agencies is a network of other community organisations and community support groups that undertake important work with asylum seekers, to whom they are usually referred to by the RCSC.

**Buddhist Compassion Relief Tzu Chi Foundation**

The Tzu Chi Foundation was started in Taiwan approximately 40 years ago, with a mission based on a Buddhist philosophy to help the poor and educate the rich, to relieve suffering and to give joy to those who need it. Since its establishment, it has expanded to more than one million members world wide, with a Brisbane branch of the Foundation being founded about 12 years ago.

The Tzu Chi Foundation began supporting asylum seekers approximately 18 months, ago, after being approached for assistance by Kyabra Community Centre. The Foundation provides both financial and emotional support to asylum seekers, depending on their individual circumstance and whether they have work permission. Financial support may take the form of grocery expenses, bus tickets and emergency payments such as medical or education related expenses, while emotional support is provided by building up relationships with the clients through fortnightly visits by Tzu Chi members:

"With asylum seekers, they are very fragile, so we always have troubles at the start in building a trusting relationship. But eventually, because we I guess see them so often, like twice a month, and yeah, well it's also like we can feel for each other, and this is how the trusting relationship starts to build up."

Another important initiative of Tzu Chi members, which has been developed in partnership with QPASTT, is the development of a free dental clinic. The clinic, which is held twice a year at a local hospital, offers free dental treatment to asylum seekers and refugees and is staffed voluntarily by members of the Tzu Chi Foundation who are dentists. Given the difficulty that asylum seekers can experience in accessing free dental treatment, the clinic, which has been running for the past 12 months, hopes to continue the service every six months.

Clients are generally referred to the Tzu Chi Foundation by the RCSC, QPASTT or Kyabra Community Association. An initial assessment with the client is followed by an internal assessment to decide what support can be provided, after which there are continuing assessments every three to six months. Support is provided to both single asylum seekers and families, and since beginning this type of work, the Tzu Chi Foundation has supported approximately 10 asylum seekers. At the current time five people are being supported via financial and/or emotional support. The Foundation is primarily funded by donations from members, and decisions are taken by a management committee as to how funds will be spent. Given that the overall mission of the Foundation is to help the poor and relieve suffering, support for asylum seekers forms an understandable part of its work and at this stage, the Foundation plans to continue its work with asylum seekers.

**Refugee Assistance Program (RAP)**

RAP was founded by the Cornerstone Fellowship, an Assembly of God Church, approximately nine years ago, to provide support to on shore and off shore refugees and asylum seekers. However, the RAP is a separate organisation from the Cornerstone Fellowship, and is now situated within an umbrella organisation called Australian Care and Trauma Services (ACTS). The program originally developed as a result of an identified need by a church member, herself a refugee, who wanted to assist in some way.
This was one of the first community groups at the time, which worked with the RCSC to identify the most appropriate ways in which they could assist.

RAP has a paid coordinator who works one day a week, with assistance from a volunteer. The rest of the work undertaken by RAP is done by volunteers in the community. Recently, branches of RAP have been established in other locations around the city, with support from the coordinator:

“Rather than me coordinating all this, I’d rather just support them to start their own group, or if it’s appropriate I just put them into an existing group. ... I’m happy for everyone to work together.”

RAP and its branches provide a range of assistance from social support to financial help.\textsuperscript{28} In terms of social support, RAP has established a buddy system, which matches a client with a volunteer who undertakes a six month commitment to support an individual or family. The volunteer is asked to make contact at least once a fortnight, and is provided with suggestions for supporting asylum seekers and making them feel included. At the same time RAP holds monthly events for all asylum seekers and buddies, to allow people to get together as a group. The establishment of a buddy system ensures that all asylum seekers can be properly supported, which would be beyond the capacity of a coordinator alone. In addition to the social and emotional support, some financial assistance may also be provided for things such as rent and food, if for example asylum seekers lack work permission. RAP also works to ensure their clients, particularly those receiving financial support, are actively included in community life, such as undertaking voluntary work, or getting involved in fundraising events and promotions.

“You try and say ‘it’s just that we want to see you around, we want you to get involved.’ It’s for the client’s own good down the track if the government says ‘Well how are you going to help our community if we let you stay?’, ‘Oh well, we’ve been volunteering here’, the client could say.”

RAP tries to ensure some accountability, and there is a written agreement between RAP and its clients, about what RAP will provide, and what they would like the individual to agree with. Initially asylum seekers are usually put on a three month trial, to ensure all is working out, although this always tends to continue. In terms of the length of time that support is given, it is assessed on a case by case basis, and in some instances, can last for several years.

RAP is currently financially supporting two single asylum seekers and a family of four, as well as having ongoing contact and a loan to another couple, although they are not being financially assisted as they now have their permanent residency. Assistance includes one or more of rent, groceries, emergency relief, and in one case, help in preparing documents for an appeal case. Asylum seekers are generally referred to RAP by the RCSC, although recently some have contacted the program directly. In such a situation, RAP will contact the RCSC, to clarify what other support the individual may be receiving.

Funding for RAP is primarily through donations of food and money, which is helped by having a tax deductible status. The Cornerstone Fellowship is also committed to this work, and provides fairly significant funding. Beyond this RAP can access grants for particular projects, and has so far succeeded in obtaining a bus for outings, as well as a number of sewing machines to enable a weekly sewing group to be held. While the provision of financial assistance can be difficult, RAP has made a commitment to continue providing this support:

“It is our goal to always be providing for asylum seekers, as well [as refugees], to have at least one on the books, preferably more, because you know that is definitely one of our aims and it is easy to slip out of that because we don’t have the money, but we just thought no, we’ll get them [asylum seekers] and just make the money happen.”

\textbf{Buddies Refugee Support Group (Buddies)}

Buddies is an independent community group based on the Sunshine Coast in Queensland, which undertakes work with asylum seekers and refugees living in south east Queensland. Buddies started in early 2002, following community concern about what was happening with regards to asylum seekers in Australia, and is an informal association with only a position in charge of funds and a small group to oversee finances. This informality has encouraged many innovative ideas among group members.

Buddies undertakes work in three areas; hospitality and support, which concentrates on making friends and exchanging visits, community education via talks to schools and community groups, and lobbying

\textsuperscript{28} RAP provides social support to refugees and TPV holders, as well as asylum seekers, though this section focuses on the latter.
and advocacy of politicians and the media, with sub-committees responsible for each area. There is a monthly meeting, as well as an external email network which receives a bulletin at least once a week. A Buddy-Buddy system has been established for those without email access.

The group is different from other RSGs, as there are no asylum seekers living in the area. As a result the support offered by the group is also differs. The main support activities are the Big Day Out, picnics which are held three time a year at the coast, to which asylum seekers or TPV holders will be invited, with transport provided free of charge. There is also a home-stay system in place, which allows asylum seekers or TPV holders to visit the coast for a weekend, or for support families to visit their contacts in Brisbane.

Links between asylum seekers and support families may arise through the events that Buddies hold, or through the coordinator of the home-stay system. Many of these links have become close, and there is much practical help and support that Buddies is unaware of, including financial, that occurs directly between the support family and asylum seekers. Buddies also provides donations to the RCSC, the Romero Centre, pro-bono refugee legal advocates and to others as the need arises. The group runs a number of fundraising events, and in addition to this is the informal support that exists between asylum seekers and support families, which includes financial assistance.

At the current time, Buddies plans to continue its work with asylum seekers.

**Brisbane Refugee and Asylum Seeker Health Network (BRASHN)**

BRASHN is a voluntary and independent advocacy group of doctors, nurses, dentists, pharmacists, allied health workers and community development workers concerned with the health of refugees and asylum seekers in Brisbane. BRASHN operates from within the RCSC, and is run by a core group of health professionals, and was an extension and further development of work undertaken at the RCSC, to obtain medical assistance for asylum seekers without access to Medicare. Prior to the emergence of BRASHN, the RCSC was developing relationships with GPs who were willing to work on a pro bono basis. Towards the end of 2001, a doctor who had already been voluntarily working at the RCSC treating patients, took on the task of developing a medical service which was accessible to asylum seekers without Medicare cards, leading to the formal establishment of BRASHN.

BRASHN consists of a network of volunteers from different sectors of the medical profession. Through BRASHN, nurses were available at the RCSC, originally one day a week but extended to three days to cover the Centre’s opening hours. This enabled asylum seekers to present to the Centre with a health problem, and there would be someone there to assist. At the same time BRASHN volunteers were working to develop a database of doctors who were willing to work with asylum seekers on a pro bono basis.

Primarily the service available at the RCSC has been one of assessment and referral, with volunteer medical staff making decisions about where to refer patients. Initially it was difficult to access pharmaceuticals and diagnostic testing, although networking and advocacy by BRASHN members led to the availability of cost price pharmaceuticals at the Wesley Hospital, and free diagnostic testing with Queensland Medical Laboratories (QML). With the opening of the QIRCH clinic in 2002, the task of finding accessible health care has been simplified to some extent, although BRASHN members are still involved with the Health Team that continues to work out of the RCSC to provide information, referrals and advocacy. Referrals now however, are usually to the QIRCH clinic, where free pharmaceuticals and diagnostic testing are also available.

BRASHN was driven by volunteers, and received no funding for the medical service provided, instead relying solely on the willingness of nurses and doctors to see patients outside of the Medicare system. BRASHN was successful in obtaining a community grant to develop information kits for doctors, which were used in the recruitment of volunteers willing to work with asylum seekers on a pro bono basis.

**Scattered People Choir**

The Scattered People Choir is made up of asylum seekers, refugees, and kindred spirited locals, and operates on a participatory model informed by community development principles. The choir was established in 1997, and provided a means by which people could express their feelings and advocate for themselves. The idea initially emerged during a management committee meeting at what is now known as the RCSC;

"... we heard music coming from one of the other rooms, and all of us went down to investigate, and there were three young Latin American asylum seekers sitting

29 The Romero Centre is based in Brisbane and works with TPV holders.
The Choir initially provided an opportunity for asylum seekers from different backgrounds to find common ground among themselves, and significantly to bring together cultures in conflict elsewhere in the world to stand together and sing. Choir members contributed ideas for the themes of songs, together with their thoughts on a range of issues, and so would collectively develop lyrics, giving Choir members a sense of ownership. It provided a therapeutic process for people to express themselves, while at the same time providing an opportunity for fun and relaxation when singing together and practicing. At the same time, the Choir has been able to undertake a community education role, to raise awareness amongst the general public as to the predicament in their own countries and the obstacles they encounter in this one.

The Choir undertakes regular public performances at a range of multicultural celebrations and functions across Brisbane. The Scattered People CD was funded by the Brisbane City Council and the Sidney Myer Foundation, and won the Sunnie Award for the best Queensland Production of 2000. The CD has subsequently been taken up by Amnesty International and Oxfam Community Aid Abroad, and was used extensively by the United Nations in East Timor to encourage participation in the country’s first democratic elections. Despite this success however, practice and involvement in the choir can be difficult due to the challenges of transporting members with little funds.

While the number of choir members fluctuates, the original choir involved 23 asylum seekers, around 40 people in total, and approximately 60 or so asylum seekers have been involved at some point. At the last major performance, 23 people were involved, suggesting there is still enthusiasm and interest in the Choir. As long as this support continues, it is likely that the Choir will continue, although members are regularly asked whether this is something they wish to continue with. Participation is, however, often subject to more pragmatic concerns:

"We used to notice that once a letter of rejection arrived for one of the families, the shockwaves would go right through the Choir, all of us, and predictably enough the performance that was about to happen, we’d have depleted numbers. So we became more sensitive to the reality that we couldn’t expect people to come along consistently when depression was so much a part of their everyday lives."

The Choir runs largely on the goodwill of those involved, particularly for those involved in the development and production of the music. However, funding has been received from a range of organisations to assist with the funding of a follow up album, which is currently being planned. The Choir itself does raise some funds from its performances, but as asylum seekers on BVEs are not allowed to earn money, a decision has been taken to donate any proceeds from performances to the RCSC, to support their work.

**Good Shepherd Sisters (GSS)**

The GSS has had a long involvement with the RCSC since its establishment in 1995. The GSS are an international congregation of Catholic sisters, who originally worked with women and girls in difficulties, although this has changed over time in reflection of changing community attitudes. In the early 1990s, the GSS took a decision to support asylum seekers, as they had very little or no access to funding from anywhere else.

"... because of increasingly repressive government regulations, we made a decision ... that we would prioritise funding towards [asylum seekers]. Now we probably don’t have enough, we wouldn’t have the number of sisters to actually do that work, but we thought if we start funding it, it will happen, other people can do it."

The GSS currently provide assistance to asylum seekers in the form of direct financial support to established groups. In addition to providing funding to the RCSC, they also support similar centres in Sydney, Melbourne, and Perth. For a number of years, a representative of the GSS also sat on the management board of the RCSC. Funding is provided from the internal funds of the organisation, and at the current time, it is envisaged that this will continue for the next two to three years at least, although this will be reviewed on a regular basis:

"We keep reviewing it, yes, depending on how much money is available. Well you know we would like to be able to continue it for the life of the project, but as in all
Although a change in the leadership team will occur later this year, it is hoped that this priority will continue.

**Community Networks of Support**

It is important to note that the following groups were established via the Community Networks of Support (CNS) project in 2001. An earlier community education project run by the RCSC had found that there were many community members willing to work to assist community-based asylum seekers, but were unsure what they, as individuals, could do to help. A recommendation was made to run the CNS project, with the aim of establishing community networks. This involved the location of individuals and small groups in the community who were willing to work with asylum seekers and support them with their basic needs. Where possible, the aim was to link these support groups to a community centre or similar organisation that was willing to provide guidance in the establishment of the support group, assistance in its work, and to administer any funds. From this approximately eight community support groups (CSG) were established, which worked with the RCSC to find ways of supporting asylum seekers, for example taking on fundraising activities to provide financial support. The groups that were established varied in size and capacity, but difficulties arose once the CNS project had finished, as there was no further funding for a coordinator to motivate and help to sustain the networks. The lack of coordination has become increasingly apparent over time, with some marked decline in the activity levels of some groups, and less networking and information sharing across the network as a whole. It is important to note though, that all support groups have made an important contribution to the support of community-based asylum seekers, and several groups are continuing to do so.

**Benarrawa Community Development Association**

Benarrawa is a community run and managed community development association, started by local residents approximately 20 years ago, which has one paid community development worker and coordinator position.

The Refugee Solidarity Group (RSG) was established around four years ago, in response to the negative media portrayals of asylum seekers. The first activity that Benarrawa was involved in was a Learning Circle, which helps people to learn more about refugees, although due to community interest in the issue it was decided to establish a Community Network of Support through the RCSC project. The focus on asylum seekers fits with the practice principles of Benarrawa, which focus on inclusion, access and justice.

The RSG that exists now undertakes a range of activities, although an early decision was taken against trying to provide a full range of support to asylum seekers, largely due to the limited capacity of the group to raise large sums of money. Instead, the decision was taken to provide practical and emotional support to asylum seekers, and while some fundraising activities are undertaken, any money raised is contributed to other groups who are trying to meet the all the needs of asylum seekers. The focus therefore has been upon developing relationships, and using these to channel any funds that are raised. Another important area of work undertaken by the RSG is around community education and advocacy on behalf of asylum seekers, and a project is currently underway around this issue.

While the RSG is unable to financially support the entire range of needs of an asylum seeker, it links in with other organisations who are offering that support. Any proceeds of fundraising activities thus form a contribution, via another agency, to the cost of supporting a community-based asylum seeker. In this way the RSG has developed ongoing relationships with four or five people, and are currently contributing, via the RCSC, towards the weekly support of a family of four. Additionally, practical and emotional support is provided. While the RCSC acts as a key means by which asylum seekers learn about Benarrawa, the organisation has strong links in its community and relationships also develop in a more ad hoc way:

“The last person that we came into contact with was living just around the corner, and was met at the train station by accident by a couple who were involved with Benarrawa. And they were coming down here for International Women's Day, and so they just brought her with them, they said would you like to come, and she was so grateful to be approached by someone in the community, so she just came along and that's how we met her.”

The work of the RSG is primarily funded through fundraising activities, although Benarrawa also provides support through the role of the community development worker, who helps with the facilitation of the group. Some project funding has also been obtained for community education around asylum
seeker and refugee issues. While capacity is an issue, particularly for fundraising activities, at this stage Benarrawa plans to continue its work with asylum seekers as far as possible.

**Gateway Community Refugee Support Group**

The Gateway Community Refugee Support Group (GCRSG) is an initiative of the Gateway Community Group (GCG), which works with homeless people or people at risk of becoming homeless. The GCG provides accommodation via 11 houses that are managed under the Supported Accommodation Assistance Program (SAAP), and also provides support to former clients who have moved into other types of housing, to prevent a re-occurrence of homelessness.

The GCRSG was established following a public meeting about three years ago, which discussed asylum seekers in the community. The meeting was held by the GCG as a result of community concern about asylum seekers living without accommodation or income. The philosophy of the organisation is to help disadvantaged people, so the work with community-based asylum seekers is aligned with this commitment. The GCRSG is primarily made up of volunteer community members, although the GCG facilitates the group, provides administrative support and manages funds that are raised. While the GCRSG used to be much larger, the current number of members is around five. Since its formation, the GCRSG has been supporting the two families, each with two children, who were referred by the RCSC. The group works to meet the basic needs of the families, which may include rent, food and baby formula, clothes, and assistance in accessing schooling or medical help. Friendship and emotional support is also provided, usually by only one or two community members, to ensure that the privacy of the family is respected.

The GCRSG is funded primarily by fundraising activities of the members, although donations are also received. The GCG also provides support through the provision of a worker, as well as some financial input. Fatigue is noticeable among group members, although it is expected that the support for asylum seekers will continue.

“The rest of the group are all volunteers and they’ve spent the last three years fundraising money to support two families, and that’s a huge undertaking, and they’re all getting extremely tired now; the group, it’s getting very hard.”

**Kyabra Community Association**

Based on the south side of Brisbane, Kyabra is a community based organisation with a vision to work with the most marginalized people in the community. It offers a range of services in the community, including a supported accommodation service and a community development team, which responds to issues arising in the local community.

Work with asylum seekers first began around five years ago, following an invitation by the RCSC to attend a meeting to learn more about community-based asylum seekers and issues they face. Through its SAAP, Kyabra manages 14 properties, and following the meeting with the RCSC, the organisation took the decision to provide one property, free of charge if necessary, to an asylum seeker family. However, there was also recognition that the needs of asylum seekers were broader just than accommodation, and so the Welcome Mat project was also established.

The Welcome Mat project is made up of staff from Kyabra and community members, who undertake fundraising activities to provide material support to asylum seeker families. Community members become involved in the Welcome Mat project through Kyabra’s volunteer program; those who come to volunteer are given a number of opportunities to work within the organisation, one of which is the Welcome Mat project. The project usually involves around two staff members and three community members, at any one time. By combining the Welcome Mat with the SAAP, Kyabra can meet the full range of needs that asylum seekers may have, with no cost housing being provided via the SAAP, and other needs being met through the activities of the Welcome Mat project. Support for asylum seekers is in line with the visions and values of Kyabra, for a safe and fair community, and for building community capacity.

“And I think in terms of asylum seekers, our hope was, and it has happened, our hope was ... that when you locate people in the community, and you give them connections to that community, a lot of it takes on a life of its own.”

Another focus has been on building up connections, and community education and advocacy work, and time has been spent in the past approaching a range of schools and church groups, to raise awareness.

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30 The fact that Kyabra is a larger organisation meant that it was feasible to provide one property without cost, which the other properties could carry.
and identify those willing to assist. Kyabra has supported two families over the five years since the Welcome Mat project was initiated, and again, takes referrals from the RCSC when identifying families to assist.

“We’re only on our second family, because the process takes so long. I think the first family was with us two years, and it’s three years now for the second family.”

Overall, the work that Kyabra undertakes with asylum seekers is funded in a variety of ways. Accommodation is provided via the SAAP program, a federally-funded program, while involvement of Kyabra staff in the Welcome Mat project is a part of ongoing work. Kyabra staff play a key role in the facilitation and coordination of the Welcome Mat project, and are also involved in fundraising activities, although their involvement in the latter tends to be on a voluntary basis. Fundraising is a key activity of the Welcome Mat project, and is the primary source of income for meeting the material needs of the family being supported. At the current time, Kyabra plans to continue its support to asylum seekers via the SAAP and the Welcome Mat project.

Red Hill Paddington Refugee Support Group

The Red Hill Paddington Community Centre has been running for around 25 years as a multi-function centre operating seven services. A strong community development focus ensures that the Centre works on issues important to the local community, and the work is guided by community development principles in terms of the work that is undertaken will be in areas of concern to the local community. Around four years ago, the Centre responded to community concern about asylum seekers by holding a public meeting to discuss the issue, around the same time as the Community Networks of Support Project. Over 150 people attended the meeting, at which it was decided to establish a Red Hill Paddington Refugee Support Group (RHPRSG).

The RHPRSG works in a number of ways to support asylum seekers. Direct support is provided to asylum seekers to cover the costs of rent, food, medical expenses, car registration and other expenses. At the same time, a project over the last two years has been working to secure housing, given that this is the major cost to support groups providing help to asylum seekers. This has involved extensive networking with church groups and government departments to raise awareness about the needs and the vulnerability of asylum seekers. The group has been seeking properties earmarked for future development, for which asylum seekers or RHP could act as a caretaker. To date the group has managed to secure three houses through Qld Rail, another through the Brisbane City Council Community Partnerships Program, and another through the Department of Main Roads.

Based on the past experience of the RCSC, house sharing is not necessarily the most appropriate accommodation option for asylum seekers, and so RHPRSG has attempted to provide asylum seekers with choice about where they live. This has been achieved by using some of the houses they have secured to provide accommodation to people living in Brisbane under DIMIA’s resettlement scheme and who are able to pay rent, then using the rental income to provide accommodation options for asylum seekers. Any complications that may arise by providing both accommodation and financial and emotional support to asylum seekers has been avoided by outsourcing the tenancy management to another agency, while RHP remains the provider of other types of support for asylum seekers. The RHPRSG, where possible, tries to use innovative models of accommodation provision which are sustainable:

“We always try and get innovative models that can sustain themselves because you know, we’ve seen passion before with support groups and people around a cause, and even some of the groups that emerged at the same time as us have already dissipated because the refugee issue has gone off the boil.”

The group also undertakes advocacy work on behalf of those asylum seekers it supports. If a negative decision leaves a person at risk of deportation, and the group has concern for their safety in their home country, they may campaign to secure permanent residency, a strategy which recently achieved a successful outcome for one asylum seeker.

The group is involved in extensive networking, and has managed to secure in-kind support from a wide range of sources. The group has around 30 members, although the core stands at between 10 and 12. Some members elect to support a particular person, although not every member wants this type of relationship, nor every asylum seeker. The group is currently supporting nine asylum seekers, a total of 12 since their work first began, as they have supported most asylum seekers for between two and three years. Those who are being supported are referred by the RCSC.

31 It is through one of these approaches that the Tzu Chi Foundation started its involvement with asylum seekers.
32 Under the terms of the Supported Accommodation Assistance Program, target groups are families or young people aged 16 -25.
Support for asylum seekers comes from fundraising activities, which are varied and innovative. Following the success of a community art show, which made a profit of over $54,000, the plan is to focus on promoting a large single event, although in the past a range of smaller activities has been undertaken. The support group also receives donations from a number of sources, both organisations and individuals, to help with their work. It is estimated that the costs of supporting the current asylum seekers are approximately $40,000 a year. It is not possible to say that the support for asylum seekers will continue indefinitely, as community development principles mean that work has to be supported by the community. However, as long as the RHPRSG is functioning, or a group in the community needs support from the RHP Community Centre to provide support to refugees, then the Community Centre will continue their support to those groups. It is dependent upon the will in the community to continue this work.