**Armidale Sanctuary Humanitarian Settlement Inc Response to the 2009 African Australians Project**

**Introduction**

This response is from a particular perspective, that is:

* It is written on behalf of the above voluntary organisation which proposes and settles people from Africa on Special Humanitarian Visas 202.
* Settlement has been in a rural town (Armidale, northern NSW) with an emphasis on education (university and TAFE) and has limited work opportunities unless job seekers are well educated. The community is very welcoming (is a Refugee Welcome Zone) and now service-providers are well experienced.
* The response is about experiences in Armidale.
* This response is from an organisation which has worked very closely with such African Australian families for the last six years, usually on a daily basis.
* The African Australians have almost entirely come from South Sudan (Dinkas) with just a sprinkling from the Democratic Republic of Congo, Eritrea and Ethiopia.
* Armidale Sanctuary is not responding in relation to those SHV 202 African Australians who have come to Armidale as their secondary settlement to study at the University of New England. These people appear not to need any settlement assistance and are not well known to the organisation.
* The author of the response has also worked in an IDP camp in South Sudan and so has some insights from that perspective.

**1. Employment and Training**

**1.1** Barriers are:

* Limited training opportunities at TAFE in terms of offerings in the full range of career courses available in larger cities e.g. security work.
* Limited face-to-face intensive English programs for a variety of different entry levels. Note: There is English for a few hours (usually 4) per week and this suits some mothers with low employment ambitions and childcare responsibilities but it does not suit young men and women who are eager to study English intensively and then move on quickly to other university or TAFE courses. The limited time for lessons weekly means that the Government allowance of 510 hours is rarely reached and when reached takes several years. The 20 year old allowance, for example, of 910 hours would not be reached in a reasonable time unless face-to-face hours were combined with distance education.

**1.2**

* A wider range of courses and more intensive English at appropriate levels.
* Help, especially for older people who have had no, or little, schooling in their original country, to understand the Australian culture of learning and the most effective ways of learning.

**1.4**

* The University of New England courses students currently favour are teacher training, commerce and business studies, science, nursing and criminology. Students come from both Armidale and elsewhere to study these courses.
* TAFE preparation for university study and for some employment e.g. hospitality, aged care.
* Employment in nearby tomato factory (30 kms north), abattoir (100kms south), collecting supermarket trolleys, cleaning, serving in a coffee shop, aged care, child care. The first three require no training other than Health and Safety whilst the last three require study in relevant, available TAFE courses.

**1.6**

* Be realistic e.g. many would like to be doctors or lawyers without realising the university entry level requirements. Counselling help needed re this.
* Help needed re planning a career and knowing the steps to achieve this.
* Help needed re organising study or work - timetable and keeping appointments, home study area away from TV, appropriate work behaviours and relationships, specifically that aggression is inappropriate, that punctuality is essential.

**1.7** Employment agencies have been of no help at all. African Australians have interviews but nothing eventuates. They find their own work sometimes with our organisation’s help.

**1.10**

* In general, yes, but in specific cases needs are not met e.g. a TAFE course re becoming a security worker (work opportunities exist) is not offered in Armidale;
* Some young, ambitious men experience frustration because they do not have access to a face-to-face intensive TAFE English program as preparation for university study. They wish to do this in a minimum time and then move on.

**1.13**

* Some men, particularly those without prior school learning/literacy, suffer in particular re loss of self-concept, expectations and ambitions.
* Resulting idleness can lead to depression and drinking, sometimes domestic violence.
* South Sudanese men lose face if ‘hanging around’ their home with nothing to do that is culturally appropriate.

**1.17** There appears to be no incidences of such discrimination in the Armidale area. There has been discrimination in Tamworth

**1.18** No evidence of this.

**Education**

**2.1** They MUST be taken and introduced to the appropriate education service people. Refugees and SHV settlers can have no idea of what is available, the range, entry requirements etc. Their expectations can be muddled and unrealistic and very limited. They need to be paired with a person or people who have expert knowledge in the range, type, place etc of services. This is one of the settlement obligations for proposers of Special Humanitarian Visa holders. Armidale Sanctuary takes this obligation very seriously and carries out this introduction and support.

**2.2**

* Lack of adequate prior education and Australian-accepted formal certification.
* Sometimes little or no English – or even literacy in any language.
* Sometimes little understanding of what success in education requires e.g. organization of schoolbooks, punctuality, doing homework, how to write an assignment/take notes/use a dictionary etc, setting up a home space for study. These skills and understandings need specific teaching.

**2.3**

* The most important and most helpful provision for newly-arrived refugee school students would be intensive English, cultural and other preparation e.g. filling gaps re world geography, formal maths, basic science relevant to age and the expected school placement class and, especially, what school education requires and means in Australia, BEFORE being placed in a class with Australian peers. Such intensive learning, possibly at least two terms in a special facility, is provided for new arrivals in several cities and towns e.g. Sydney, Newcastle, Goulburn, but is not provided in Armidale.

This means that a 14 year old refugee who has had no education whatsoever, who speaks not a word of English, who has never been to any school, who has never held a book in her hand, who has never seen 1+1 written, who has no idea of much of the world that is known to most Australian six year olds, is placed in a secondary Year 8 class and expected to learn a variety of subjects of which there is no prior knowledge at any level. Such placement, when combined with the prior and ongoing trauma of war, knowing, even seeing, family members being killed, spending years living in fear, suffering malnutrition and other deprivations, leaving many friends and family behind, the day-to-day adjustments of being now in an completely unfamiliar environment, is nothing but child abuse.

The Australian Federal Government has stated that it encourages settlement in rural areas but does not adequately provide for this in Armidale. Its argument is that there is never a critical mass of new arrivals to justify anything but a few hours of classroom weekly support. Two terms of intensive background education and cultural learning, even if it has to be one-to-one (due to the small number of recent arrivals) would prevent much personal hardship and lack of ongoing satisfactory learning and personal lifelong achievements as well as social and mental ill- health. This is urgent particularly at the secondary and upper primary level.

* A course for parents, who themselves have had limited or no educational opportunities in their original countries, to learn about the realities of schooling here, what it means, what the school expectations are, how to set up homework areas in their houses, how to help their children’s learning, the importance of books in the home etc. Such ‘lessons’ for parents need to be repeated until they fully understand the role of parents re their children’s learning. This is particularly relevant for the education of primary age children.

**2.4 Interpreting**

* Interpreting services are generally available and satisfactory.
* Relatives and friends, even those certificated, should never be used.
* Schools generally do well re use, doctors not so well and pharmacists, particularly, need further education re use.

**2.5 and 2.6** Reference to all of these aspects has already been made. The actual people involved in schools and TAFE are helpful and sensitive to need but are constrained in what they can do because teacher allocation needs improvement.

**2.8** Both parents and children need sensitive and ongoing help with understanding children’s rights, particularly girls’, to education. Armidale Sanctuary supports children re this but changes re cultural beliefs take time. The young people (mostly girls) themselves sometimes need help to understand their rights to education and educational opportunities. This can necessitate a more equal gender distribution of family domestic work.

**2.10**

* Initial intensive education as outlined in 2.3 above for secondary students
* Homework and additional tutoring as individually required including for younger children. Volunteers can be useful but they need educating re what is required.
* Easy access to preschool education for 3 – 5 year olds re learning English and pre-academic skills (motor, literacy, numeracy etc), Australian cultural and social behaviours.
* Parent education as outlined in 2.3 above
* At all levels of education knowing what the individual’s educational and cultural gaps are and responding to them.

**NOTE:** Early intervention, although expensive, is more economic and respectful of human rights in the long-term than patch-up expenses or frustrated, low-achieving individuals later on.

**2.11 and 2.12**

* Essential for teachers to have some depth of understanding of the individual student’s cultural, educational, living experiences and persecution background. This cannot be achieved by listening to a single brief lecture but requires that knowledge, cultural sensitivity and understanding be built up through a variety of input. Without this learning teachers’ content and methodology might have little meaning/relevancy.
* Have the knowledge and ability to taylor, at least initially, teaching to the individual’s needs. This requires skills and mind-set that are akin to those of a special educator (teacher of children with disabilities). It might well require more teaching resources, especially teaching staff, but in most cases this is likely to be short-term only.
* Teachers should be qualified in what they are teaching i.e. ESL teachers should have post-graduate qualifications and be up-to-date with their knowledge re this. This applies to all subjects being taught.
* Training is best provided by people who have first hand knowledge of refugee and asylum seeker situations and culture, i.e. carefully chosen people who themselves were refugee/asylum seekers and have come through that experience with academic and personal success. Additional training might be needed for teachers in ways to adjust methodology, content and resources so that their teaching is more appropriately in tune with students’ needs and situation. Teacher aide support and/or extra tutoring or mentoring might be needed to augment the work of the class teacher/lecturer.

**2.13** They clearly have special needs but these are not being addressed in ways similar to other people with special needs i.e. people with disabilities. See 2.3 above for an example of some of the special needs.

**2.15**

* The most common difference relates to gender and background. Many girls, from both Christian and Muslim backgrounds, in their previous country were denied any school education or received a minimum only. Their role may have been seen as domestic and child-breeder and rearer. Thus, for a number of reasons, many girls arrive in Australia with little education and thus are in a particularly vulnerable situation in terms of successful school learning here. As yet there may be inadequate understanding of this and so in Australia inadequate support.
* Many children with disabilities do not receive any education in their first or second country. This is due to the facts that schools and teachers there may not be equipped to take such children in terms of training, resources, appropriate buildings and actual teaching. There is also in some areas a belief amongst teachers and parents that such children cannot learn and so school attendance is a waste of time. These beliefs and attitudes are then brought to Australia and so parents do not have expectation of education and achievement. Extra attention and advocacy is therefore needed in terms of parents’ understanding and role.
* The responses above are general, not related to the Armidale situation where there has been no evidence of discrimination, including to two secondary students who arrived with severe leg deformities due to rickets.

**2.16**

* The Federal and State Governments are to be applauded for

- number of hours of English for adult learners

- intensive English and cultural classes for a group (minimum of 10 in NSW) of newly arrived secondary students in some towns and cities (not Armidale)

- some provision of preschool sessions and transport to facilities.

* However, in rural areas, where there is a dribble of newly arriving secondary students, provision has not been made for intensive preparatory education before joining a regular class (discussed above in 2.3).
* There needs to be a more thorough preparation of all teachers who have education responsibilities for new arrivals in ESL, cultural awareness and sensitivity and individualising programs to meet student needs (discussed above).
* In some cases there may be the need for short-term teacher aide or mentor support.

**Health**

**3.1.1**

* Little knowledge of nutrition and the foods essential for maximum health coupled with a belief in the value of sugar, coca cola etc. and an abundance of palm oil.
* In some cases little knowledge of basic hygiene e.g. house cleanliness and personal washing.
* Little knowledge of the function of the different body parts, how they relate to health etc. Particularly relevant to pregnancy and birth.
* Over-eating, due to the ready-availability of food, sometimes results in obesity.
* Some adult inactivity, possibly exacerbated by depression, can combine with the above to also relate to obesity.
* Some children have arrived with the effects of rickets, young children and babies may develop it here. This is due to the lack of calcium in the diet (sweet drinks preferred to milk) as well as inadequate exposure to sunlight (babies might be kept covered outside). Some adults, on arrival and later, also show low vitamin D status.

**3.1.2**

* An on-going resistance to change so that the advantage of availability of nutritious food, as well as the advice of supporters, both medical and voluntary, is not taken.
* Some evidence of an ongoing casual attitude to the taking of medication, prescribed or otherwise.
* The practice of politely agreeing or saying they understand to doctors and others when they actually do not, can have harmful repercussions or later confusion.

**3.2** Apart from the limits due to GP and specialist services in rural areas, the health services and care in Armidale for refugees are excellent. Almost all doctors generously spend much time and effort with our refugees and ensure that their needs are met as soon and as well as possible in this town. One doctor has made many home visits to a newly arrived family in his own time (without charging). Other doctors and specialists have shown similar care and thoughtfulness. Our Hunter New England refugee nurse has close and very helpful contact with all refugees. The only concern has been one surgeon who refused to wait for an interpreter concerning a day-surgery procedure, this resulting in patient confusion.

**3.4** The issue of rickets has been referred to above (baby born in Australia severely affected; two girls arrived with severe rickets which needed major surgery, two adults at risk).

**3.6** Whilst all refugees have been told of the telephone service re STARTTS, to Sanctuary’s knowledge it has been little (if any) used. At times there has been some signs of stress and depression (quietness and some withdrawal particularly in teenage girls, excessive drinking, male domestic aggression) and this has been of concern to Sanctuary. As the sufferers have chosen not to seek help (perhaps seeing their apparent sadness or aggression as normal), Sanctuary has only been able to provide support about any worries and ongoing friendship and other care. Two situations of domestic violence have resulted in separation of parents with DOCS intervention.

**3.10** STARTTS should be more easily available face-to-face (only now by telephone) with interpreter as necessary so that an actual presence is known. Currently the service at Coffs Harbour it is too distant and removed to be seen as a service.

**3.12** Do not just explain and talk about services to African Australians but actually take them there and introduce service providers and have them talk about when, why etc they should go to them, provide contact details etc. Talking alone to new arrivals can only just confuse for they are overloaded with talk. They need an actual experience.

**3.13** Ensure that ALL doctors and allied health professionals including pharmacists know how to access the service, actually use it and know the possible legal repercussions if not used. Relatives and friends should never be used as interpreters, whether certificated or not.

**3.14**

* The limited (quantity, quality and range) traditional diet which may not contain all the nutritional needs but which are, at least initially, preferred to the wide range of food available in Australia.
* The preference for some foods e.g. highly sweetened drinks, overuse of oil.
* Limited access to basic vaccinations in Africa e.g. childhood vaccinations.
* Be watchful re rickets, psychological effects of trauma.

**3.15** With SHV holders the groundwork done over time, informally and face-to-face to service providers by proposer organizations or individuals is more effective re advocacy, developing cultural awareness and establishing relations than more formal sessions although these too have a place. The refugee nurse, where this exists, is also vital re informing and raising awareness in health service providers.

**3.16** Ensure all health professionals use where necessary accredited health interpreters and that African Australians understand the systems and know their rights. The latter need, particularly, to understand the importance of keeping appointments and of being punctual. Not turning up for an appointment, especially when an interpreter has been booked, can lead to service provider frustrations and undo much of the advocacy work that organisations and individuals do.

**3.17** Training such as Transcultural Mental Health NSW carries out for medical workers re cultural sensitivity and awareness.

**3.18** Additional care, patience, time are a feature of services in Armidale – so positive discrimination.

**3.19** Almost entirely positive and trusting attitude towards medical staff and intervention.

**3.20** As far as is known no discrimination.

**3.21**

* Ensure that relevant health providers are fully aware of statistically more likely health problems so that they can be alert to these e.g. GPs in this country rarely, perhaps, never see rickets but need to be aware that they should not discount the possibility in African Australians.
* Ensure that relevant health professionals take positive action in ensuring that new arrivals are well-informed, in practical terms, about nutritional needs and actually take them shopping to demonstrate best shopping practices. Then arrange education re how to actually cook foods which may not have been in their African diets. They also need to know what constitutes an unhealthy diet e.g. large quantities of coke and other fizzy high-sugar drinks, filling up on large quantities of white bread. Such practical help is essential to the maintenance of good health especially re young children and would be cost effective in the long run. Consumption re large quantities of alcohol, especially by unemployed men, needs early attention.

**Housing**

**4.1** Armidale Sanctuary arranges accommodation before arrival and then later assists any move to preferred accommodation if this is desired. Furniture not provided by the Federal Government is supplemented to ensure fully and comfortably furnished accommodation. Community services, both government and real estate have been well-briefed by Sanctuary and are very cooperative.

**4.2** Cost in relation to Centrelink income. Of considerable concern (and therefore need for budgeting help) is heating costs during the Armidale winter.

**4.3** As far as is known this has never occurred in Armidale. Sanctuary would immediately assist.

**4.4** Sanctuary helps as necessary and always has positive results. However, it is essential that such help, as all help, not be regarded as endless. African Australians need to be slowly and carefully eased into self-suffiency and independence. It is easy for supporters to develop dependency.

**4.5** Major difficulty is finding houses with low rental but large enough to accommodate large families. We have had 100% success in finding these before such families arrive and also if later they wish to move but it has not always been easy – due to availability, not discrimination.

**4.6** Armidale Sanctuary has always been successful in organising accommodation, on its individual committee members’ words and reputations, before arrival. In a small town like Armidale, organisation members are known and trusted even though the arriving family is not personally known to anyone.

**4.7** Armidale Sanctuary’s face-to-face advocacy has been the most effective method. In addition, committee members have, over the six years of operation, advocated to most service organizations and have published many newspaper articles to inform the public generally about refugees, thereby building up a positive community attitude, which includes real estate workers. One of the benefits of a small town.

**4.8** No problems, therefore no appeals, have ever taken place concerning Armidale SHV residents.

**4.9 to 4.14** Armidale experiences are almost entirely positive, the only difficulties have arisen because some African Australian families have not adequately cared for their homes (food spilt and left on carpets, walls marked etc).

**Justice**

**5.1 and 5.8 and 5.9**

* African Australians (experience to date has been mainly with Dinkas) coming from a country in which there is no clearly established laws (South Sudan) may find difficulty in adjusting to the Australian society which is very different. Adjustment difficulties may be in the areas of domestic violence including physical punishment of children, driving infringements (no licence, unregistered vehicle, speeding, illegal parking), sexual assault (not accurately reading the signs of consent and no consent), recognising the equal rights of girls/women. African Australians need to be told about the relevant laws and retold and retold until they realise they are indeed facts which do not shift, do apply to everyone, have to be obeyed and there are set penalties for not obeying. Stories abound for the above examples!
* This should happen soon after arrival and be ongoing. People have the right to know of the laws of this country before they are in a situation of ignorantly breaking them. The areas listed above are those needing most attention in terms of educating at least the Dinka community.
* The above meetings/discussions should always be in a positive, friendly, informal setting away from the police station. Armidale Sanctuary has found that a few of their members should also be present to stress that Australian laws equally apply to them and perhaps tell stories of where they have broken the law and received penalty/punishment. Equality of application needs to be demonstrated.

**5.3** Sanctuary members have been told by their refugee settlers of their sense of protection and of the peace of this country due to the law. There seems to be a comfort and confidence due to this.

**5.4** Armidale Sanctuary has been proactive in this area by recently inviting the local police (community relations and domestic violence officers) and Dinkas to meet informally and talk about Australian law. This has been a huge success with increased understanding on both sides and the police becoming regarded as friends. The Dinka community has asked for more meetings and the relevant police officers have said they are willing to meet on Saturdays (in their own time). This echoes the type of relationship the Dandenong police have encouraged and seems by far the most effective in establishing a positive trusting relationship and knowledge of the law.

**5.6** Lack of understanding of the fact and the application of Australian law. Perceptions based on ignorance that they are being victimised.

**5.11** Education by a range of people e.g. police (as described in 5.1 and 5.4 above), those responsible for settlement, DOCS if violence occurs, if appropriate possibly by school and other counsellors. It must be repeated, ongoing and very clear from he time of arrival and given to both men and women separately and in each other’s presence. They must know the consequences and women must know where to go and what to do to receive help if violence occurs. It must also be clear that violence can not only be physical and not only between men and women but that children also must not experience violence, physical or emotional or, themselves, be perpetrators of violence. This is contrary to some tribal traditions and so education must be taken very seriously. All must clearly learn theirs and others’ rights to live free of fear and in safety. Strategies should be a combination of formal and informal, group and individually, written and oral to ensure that all learn.

**5.13** No discrimination known. Although some refugees have claimed this, on closer questioning this does not appear to be the case.

**Comments re other issues not listed in the above 5 sections**

**Traditional Dinka family practices can be confronted by:**

* Australian practices and law re people choosing their own (marriage or otherwise) partner can be contrary to parents’ expectations.
* Marriage choices can be intertribal, even interracial, and this can be very confronting to parents.
* Women being able to take legal action against their husbands, separate and divorce, gain custody of their children.
* Young people being given direct Centrelink payments, this being seen as weakening parental authority.
* Women directly receiving parental support money from Centrelink and so be in a position of some independence from husbands.
* Parents not being able to discipline by hitting and having to learn other ways.
* Children and teenagers challenging parents’ authority and ways of doing things.

The above can be very distressing to parents who need sensitive and careful teaching about Australian legal and societal expectations and the knowledge that this is part of living in Australia, which must be accepted. They must also be assured, and shown in fact, that most of their traditional practices and culture are respected and celebrated.

**Housing**

Dinka experience re housing in their original and second country is in a very different type of house or flat with a very different room/furniture/appliance etc set-up to that which they find in Australia. A mud and grass tukul without electricity, water, sewerage and very little furniture and possessions is in sharp contrast to a brick and tile four bedroom house loaded with electrical appliances etc. This can be a major challenge to them and includes Australian expectations about home care and cleanliness. Education is necessary re how to operate and care for an Australian type house as well as cleanliness expectations. There is the understandable risk of putting letting agents offside if care and cleanliness are not observed.

**Budgeting**

Handling money may be a new experience to many refugees who have never known the need to pay bills, bank and save, plan for payment of monthly accounts (especially electricity over winter), school fees etc. This requires budgeting education. They also need to be fully aware of the need to notify Centrelink of any money received through work and of the fact that they may need to pay tax.

**Secondary and upper primary school education**

This topic has been highlighted above (please see section 1 for an explanation of concerns) in relation to the lack of intensive English and cultural education prior to being placed in a mainstream class. Armidale Sanctuary sees it as a major human rights issue. Advocacy is ongoing but support for these critical issues would be appreciated.