



Signs of torture are clearly visible on the body of this asylum seeker from the Congo.



Our refugee quota is one of the highest per capita in the world and since the 1970s some 50,000 refugees and their extended families have made new lives in New Zealand. Internationally, we have a glowing reputation for resettling traumatised people from some of the world's worst humanitarian hot spots. But how well are we really doing?

Amanda Cropp reports.

No Refugee

Last year, three incidents put refugee mental health in the spotlight.

In February, Somali refugee Asha Ali Abdille was charged over the hijacking of a flight from Nelson. Two pilots and a passenger received knife wounds and the 34-year-old, who had a long history of mental difficulties after being raped as a teenager, will face trial in September.

In July, Iraqi refugee Baseem Ridha Kadhim Al Amery brutally murdered two men in Auckland's Alpha apartment building in a frenzied knife attack over access to a room key. He threatened to kill his estranged partner and police talked him out of jumping from an eleventh-floor balcony.

Three months later, 19-year-old Iraqi refugee Boushrah Hashem Rahman was charged with fatally stabbing her older sister, whose badly burnt body was found in the boot of a car outside the family home in Henderson. Rahman was remanded to the Mason psychiatric clinic and in May was judged to be too mentally unwell to plead.

On the face of it they could be isolated cases. But some working with refugees view them as a symptom of wider problems – that refugees are falling through the cracks in our creaky health system and that our resettlement programme needs a tune-up.

Al Amery arrived here as an asylum seeker in 2000. He had been tortured and sentenced to death for supporting one of Saddam Hussein's political opponents and escaped from Baghdad's notorious Abu Ghraib prison after an uncle bribed guards.

Over the years, Al Amery considered seeking psychological help for post-traumatic stress and other problems, but was worried he would be thrown into an institution.

He had no contact with mental health services until nine days before the killings, when he was arrested for assaulting his partner and possession of an offensive weapon.

AMANDA CROPP IS A *NORTH & SOUTH* CONTRIBUTING WRITER. SHE COMPLETED THIS STORY WITH THE ASSISTANCE OF A MEDIA GRANT AWARDED BY THE MENTAL HEALTH FOUNDATION OF NEW ZEALAND.

PHOTOGRAPHY BY PANOS AND GUY FREDERICK.

PANOS/ABBIE TRAYLER-SMITH

At that stage he was assessed as being distressed and depressed, but not suffering from a major mental illness.

Al Amery later revealed he had attempted suicide several years earlier on an overseas business trip, and a forensic psychiatrist who examined him in prison concluded he had a genuine mental impairment.

Al Amery's lawyer Neil Thinn firmly believes his client's previous trauma and struggle to adapt without family support to life in a completely foreign culture – especially alien in its approach to male-female relationships – were significant factors in his offending. "He just exploded, you can tell from the ferocity of the killing, all his frustrations came out. Refugees haven't got the support systems to cope on their own, particularly not when they're damaged individuals."

New Zealand has a long history of taking "damaged" individuals as part of its refugee resettlement programme.

Only about one per cent of the world's 15 million-plus refugees are resettled in recipient countries like New Zealand, which is one of 22 nations that accept an annual quota mandated by the United Nations High Commissioner for Refugees (UNHCR). Under the 1951 Refugee Convention, a refugee is someone living outside their country of nationality and unable or unwilling to return owing to a well-founded fear of persecution on the grounds of race, religion, nationality, membership of a particular social group or political opinion.

Our annual quota of 750 is made up of women at risk, emergency, medical, disabled, and family reunion cases. On top of that we take up to 300 family members under the Refugee Family Support Category, and about 200 asylum seekers like Al Amery who seek refugee status on arrival.

Settling the 2008-2009 quota is estimated to cost \$52 million over the next three years, although a review of resettlement by Price-waterhouseCoopers says we don't have a good system for tracking costs and it could be as high as \$138 million.

Immigration Minister Jonathan Coleman says the size of the quota is unlikely to change in the present economic climate, but we will continue the long-established policy of taking high-needs refugees.

That pleases Richard Towle, the Adelaide-based regional representative for the UNHCR. He says New Zealand's quota might look tiny compared with Australia's

"Most refugees can and do recover from severe trauma and move on to lead very productive new lives as Kiwis."

Refugees as Survivors (RAS) executive director Gary Poole.

13,000 or so, but our willingness to take the "hard cases" is greatly appreciated.

Unlike other countries, we don't try to "cherry pick" refugees who will integrate easily. "One Government was showing a leaning towards taking Christians from a region and ignoring Muslims, and that's something we quite vigorously try to prevent."

Yet there's no denying that some needy cases are extremely demanding. Last year's Asian Health and Well Being Conference in Christchurch was told of a refugee family that had 30 different services working with them for two and a half years before they could cope without support.

Refugee leaders say a needs-based policy requires a properly resourced and well-co-ordinated settlement programme, but ours is not. That puts further stress on refugees already mentally fragile as a result of their exposure to deprivation and violence in war zones and refugee camps.

Adam Awad, who heads ChangeMakers Refugee Forum, a consumer and advocacy group representing 12 Wellington refugee communities, says: "You can't just bring them here and say, 'Goodbye, we've done our job.' Communities are very mentally sick because their needs have been ignored. We've talked about these issues for years and now it is time for the Government to listen."

In May, Awad's organisation vented its frustrations in a submission to a United Nations review of New Zealand's human rights record. It claimed refugees do not enjoy the same human rights as other New Zealanders because of long-standing problems with employment, housing, family reunification, settlement and mental health, all issues which will be on the agenda at a national conference on refugee health and well-being in November.

Not that any of this is new. In 1999, similar concerns were expressed in a 100-page report on refugee resettlement policy prepared for the incoming coalition government by NGOs and refugee groups. Nor is there any doubt that refugees internationally suffer high rates of mental health problems.

Refugees as Survivors (RAS) executive director Gary Poole says overseas rates of depression and post-traumatic stress disorder (PTSD) among refugees range anywhere

from 20 per cent to 60 per cent, and New Zealand rates are probably similar.

RAS operates in Auckland and Wellington. It conducts mental health assessments of quota refugees on arrival, and is one of a small number of agencies internationally funded by the UN to work with torture victims, who make up about 20 per cent of our quota.

Poole says symptoms of trauma include nightmares, insomnia, memory loss, poor concentration, anxiety and dizziness. For PTSD sufferers a car backfiring, an ambulance siren, the sight of someone in uniform or crackers exploding at Guy Fawkes can all trigger flashbacks.

"We had one young man who froze and went into a complete panic whenever he saw a police car. But, having said that, these people are incredibly resilient. They have been through experiences that people in our comfortable Western society just cannot comprehend. Most refugees can and do recover from severe trauma and move on to lead very productive new lives as Kiwis."

However, to do that he says a significant number need specialist, culturally appropriate support.

In response to growing concerns about the number of mentally unwell refugees urgently in need of treatment, RAS established a mobile team in Auckland in late 2007, and by March this year it had seen 185 clients. RAS has also been involved in providing "cultural and linguistic diversity" training for 120 mental health professionals, but specialist refugee services are still almost non-existent outside the three main centres.

Another problem is that mental illness carries an enormous stigma among many refugees, for whom herbal medicines are still accepted methods of treatment.

Former Auckland University lecturer and cross-cultural psychologist Dr Kathy Jackson, now working in the Middle East, is the author of *Faith, Spirits and Curses*, a book about mental health and traditional beliefs in refugee communities. She says refugees come from countries where there may be only one or two psychiatrists serving the entire population. Psychiatric hospitals are more like prisons where people who become too violent for families to care for are locked



PANOS/CHRISTIAN ALS/BERLINGSKE

up, poorly fed and sometimes even chained. “Many languages don’t even have words for anxiety [always referred to as stress] or depression,” she says. “A person who is mentally ill is thought of as someone who is a schizophrenic – and they don’t have a term for that either – walking around naked, living out of rubbish tins, dirty and irrational, talking and shouting to himself.”

As a result, refugees who are quite ill will resist treatment because they think a diagnosis of poor mental health means they are irretrievably insane and they fear they will be ostracised by their community.

Even when refugees do seek help, conventional Western treatments don’t always work. Their mental problems may manifest as pain, or other physical problems, and massage therapy can be very effective.

But as Lynne Briggs, head of Canterbury’s Migrant and Refugee Mental Health Service, has found, the cure may lie outside the health system. She describes a refugee woman who made five visits to A&E and one to the emergency psychiatric service with fainting spells.

The fainting ceased when Briggs finally persuaded Housing New Zealand to move the family across town, closer to the rest of their ethnic community. “It took six months

and only happened because I bullied.”

Briggs says medication normally works for about 70 per cent of patients with clinical depression, but has a significantly lower response rate in refugees. In her study of refugee men, only three per cent reported receiving any benefit from antidepressants, and her other research suggests this may be because refugees are demoralised and feel completely hopeless.

“The euphoria of being in a safe country wears off and the realities of life hit them. They’re unemployed, cold, they can’t talk to anyone. They haven’t got family so they’re socially isolated, they can’t get jobs, and they’re discriminated against. They go from being disheartened, which is the beginning of demoralisation, to dependency, which is giving up. Then they present at services like ours.

“Their depression is contextual, and once their problems have disappeared – they’ve got a job, they have their family here – they start living and their depression goes. With a clinically depressed person, that wouldn’t happen as quickly because of the chemical imbalance in the brain.”

Which leaves Briggs convinced social policy is the key to better refugee mental health. “Until those issues are resolved they won’t get better.”

People crowd around a truck delivering food aid in Kibati refugee camp, in the DR Congo. Since 2006, more than 200 Congolese refugees have been resettled in Auckland and Palmerston North.

Over the 12 years Tim Barnett was Labour’s Christchurch Central MP, refugee family reunification accounted for about a quarter of the workload of his constituency office. Staff regularly dealt with “fairly extreme behaviour” from some very desperate people and Barnett vividly recalls the day a distraught African woman dumped a rubbish sack of antidepressant pills on his desk.

He says separation from relatives is a big deal for refugees because they come from collectivist cultures where the definition of family is more like the Maori concept of whanau. “But it’s even more extended and more deeply felt because of that fear of persecution and danger.”

That’s confirmed by Ali Tausif, an Afghani community health worker at the Piki Te Ora Health Centre, a Christchurch practice with 900 refugees on its books. “Almost every single refugee family that comes here has





Left: Two boys on watch for rebels at the Mungunga refugee camp north of Goma, in Eastern DR Congo. In war zones, it is common for fleeing families to become separated, and after years living apart reunited children need help to re-establish relationships.

one or two members suffering from mental health problems, mostly depression from being away [from family]. They feel so isolated. In some cases there are people who are so desperate they say, 'Just send me back.' It's not possible, but they have that desire."

In Auckland, Refugees as Survivors staff agree many of their patients would disappear overnight if they could bring family members here. "Survivor guilt" is prevalent and sending money home to family is the norm, even if it means going without food.

The quota allows for up to 300 family reunion cases (last year we took 136), and a further 300 can come under the Family Reunification Support Category. The latter is heavily oversubscribed, and by February this year Immigration had received more than 1000 applications representing 4116 people. Most were declined because they didn't meet the criteria for being "alone" (without a spouse, parents or adult children here), and those invited to apply for residence for nominated relatives still face a long and expensive process that takes at least two years.

Acting director of Immigration's Refugee Division Christina Fordyce says incoming refugees are told there's no guarantee relatives will be able to join them, and the current system is an improvement on the old ballot. Under that, sponsors had only six months to get all the necessary paperwork together (now extended to 12) which wasn't long enough. "So we were offering these 300 places, but they weren't getting filled."

Refugee groups have suggested temporarily increasing the quota to 950 for, say, four years, to eliminate the family reunification backlog. However, money is the other big hurdle. The Government pays the travel expenses of quota refugees. Refugees sponsoring family here must meet the costs of airfares, medical examinations and obtaining necessary documentation.

In Wellington, the charitable Family Reunification Trust has given out more than \$500,000 in grants over the past seven years to help cover the cost of bringing refugees' relatives here. Last year alone, it spent \$95,000 on airfares to bring 50 people to join families living in the capital.

PANOSCHRISTIAN ALS/REELINGSKE

Other countries, such as the US, operate interest-free loan schemes to cover refugee travel costs. That idea was mooted here by Patti Grogan, the director of policy and planning for Refugee Services at the Florida Department of Children and Families. In 2008, she spent an Ian Axford Fellowship in Public Policy on placement at the Department of Labour's Settlement Division and wrote *Does a Rising Tide Lift all Boats?*, a report comparing New Zealand and US refugee integration and settlement.

DoL has come under fire for continually bringing in new ethnic groups, sometimes in very small numbers, instead of concentrating on building existing refugee communities to sustainable levels.

Grogan says selection and family reunification both have profound implications for refugee mental health. She suggests, instead of taking about 100 people each from six different populations, we take 200 or 300 from just two or three populations, with the emphasis on family reunification.

Fordyce defends the selection policy by saying it's important to achieve a balance of groups so people integrate, rather than living in their own isolated ethnic communities where there is no motivation to learn English or mix with the wider Kiwi population.

She says they learnt that lesson from Hamilton where the 1000-strong Somali community is concentrated in one suburb, and youth gangs and truancy have become an issue.

Patti Grogan also has some revealing things to say about unemployment, frequently cited as another reason for poor refugee mental health.

Based on refugee labour-force participation in a 2004 DoL report, Grogan found only 29 per cent of New Zealand refugees were working compared with 63 per cent in the US. After five years here, 78 per cent of New Zealand refugees still relied on benefits as their major source of income. In the US, 78 per cent of five-year refugees over the age of 16 were employed, and most of them found jobs within a year of arrival.

Grogan concludes that difference is primarily due to our generous benefit system, the lack of job-search programmes specifically designed for refugees and the fact that self-sufficiency is not a stated goal of our settlement programme.

Government agency Settlement Support New Zealand gets \$3.38 million a year to run 19 offices providing referral information to refugees and migrants.

Torture Survivor Bishnu Pokhrel

Memories of the torture this young Nepalese school principal endured can still flood back at any moment.

Bishnu Pokhrel is a softly spoken man who stands not much higher than my shoulder and it's hard to imagine anyone ramming pins under his fingernails or beating him with a rifle. But that's what happened after the young Nepalese school principal was arrested at assembly one morning and marched away handcuffed and blindfolded.

"They'd pour cold water over me and turn the ceiling fan on. They took people out into the jungle, told them to run away and when they did they were shot for 'escaping'."

Pokhrel was eventually released after vehemently denying accusations he had assisted Maoist rebels and taught students Maoist propaganda. Over the next few years, he fled several times to Kathmandu, and once to the Middle East, when the political situation in Nepal deteriorated.

In 2005, nervous about being rearrested, he bought a fake passport and made the difficult decision to go to Thailand, leaving behind his wife Prativa and baby daughter Biplata.

In Thailand he spent 16 months in a detention centre, sharing a cell with up to 150 inmates and living on rotten, insect-infested rice. Two men in the next cell committed suicide in despair at waiting more than seven years for refugee status, and Pokhrel was enor-

mously relieved when New Zealand accepted him as a quota refugee in 2006.

With a degree in English from Delhi University and having managed 25 teaching staff, it was a shock to end up cleaning toilets and refilling hotel mini-bars. "I used to think, 'What am I doing here?'"

He hit rock bottom two years ago when his mother died of cancer in Nepal. "I was almost crazy at that time. I left my studies at CPIT [Christchurch Polytechnic Institute of Technology], I had no job and I just stayed home and drank."

But with support from visiting Refugee Services volunteers and some counselling, Pokhrel pulled himself together and finished his training as an interpreter and ESOL teacher. He is now a refugee liaison officer at Hagley Community College working with the school's 140 teen and adult refugee students.

Pokhrel struggles to explain how difficult it was living without his family, who eventually joined him here early last year. "It's like you have lost something and you can't find it."

Memories of the torture he endured flood back when he sees uniformed police officers making an arrest on TV. "I turn the TV off, take my daughter for a walk, visit friends or go to the park, but it will always be there."

Pokhrel estimates it takes three to five years for refugees to resettle and says living in refugee camps (up to 17 years is not uncommon) breeds dependence.

"They don't have to pay rent; they get food vouchers so they don't have to go grocery shopping. Managing a budget is very difficult for them; they over-estimate their income and don't put money aside for emergencies."

But missing family is perhaps the greatest challenge and Pokhrel says it's hard to know what to say to comfort five-year-old Biplata, who may never see her grandmother again. "If someone gives her a coin, she says, 'It must go to my grandma to make her a new passport so she can come to New Zealand.'"

Right: Bishnu Pokhrel with wife Prativa and daughter Biplata.

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GUY FREDERICK



Walid Hassani, 17 (front row, right), is a star player for Auckland's Central United Football Club – and he was marked as top talent by a Manchester United scout while playing overseas for a New Zealand youth team. Hassani's family came to New Zealand from Afghanistan under the refugee resettlement programme in 2000.



A Quick History Lesson

Refugee services a “bit of a mish-mash”.

New Zealand accepted its first refugees in 1944 with the arrival of more than 700 Polish children and their guardians.

The Inter-Church Commission on Immigration and Refugee Resettlement was formed to promote and coordinate refugee resettlement undertaken by churches and community groups. Over the years it morphed into what is now Refugee Services Aotearoa.

Aussie Malcolm, National's Minister of Immigration in the 1970s and early 1980s, gleefully recalls how he publicly played the role of a “mean, nasty bastard” when ICCI pushed to bring in more refugees. “I knew if I was seen to be a liberal refugee-lover who was trying to fill New Zealand up with the dispossessed, it would engender a backlash.

“Behind the scenes we were happily meeting over a cup of tea and a cigarette and plotting our next move to use the media – who inevitably took the bait – to write articles that stimulated thousands and thousands of New Zealanders to come forward and say, ‘We’ll help.’ It was sort of cute and folksy and very seventies and eighties, and it worked.”

Malcolm, who is deputy chairman of the Refugees as Survivors trust, says times

changed with the introduction of the quota.

“A feeding chain was set up so refugees were coming whether people wanted them or not. As politicians became less skilled at motivating the public to play their role, government departments stepped in to fill the gaps, so after 30 years we’ve got a bit of a mish-mash. It’s absolutely time we took a deep breath and said, ‘What are we doing here?’”

He would, however, hate to see the bureaucrats take over completely and is keen to retain volunteer input. “We’re a better community for having all these people who want to help.”

And Malcolm is putting his money where his mouth is, sponsoring a Refugees as Survivors sports programme to the tune of \$12,000 through his immigration consultancy Malcolm Pacific.

Refugee youngsters in the Auckland region will get half their sports club membership fees paid, and Malcolm hopes sports equipment companies will come to the party by donating gear. His aim is to foster integration and acceptance of refugees by giving them the chance to shine on the sports field. “You’ll have a refugee dad on the sideline at a soccer game cheering his kid and talking to the Kiwi dad beside him.”

Grogan says only 14 per cent of SSNZ clients speak English, yet most of its employment-related workshops are offered only in English, and few written resources are available in common refugee languages such as Arabic, Somali and Burmese.

She sees little point in teaching a refugee with no English and less than a primary school education how to write a CV, and says employment workshops would do better introducing job seekers to employment placement services or job training opportunities.

Kafebe Mundeke chairs the Auckland Refugee Coalition and a new National Refugee Network. He says in most refugee communities men are still traditionally the breadwinners and unemployment, or under-employment of professionals like doctors and lawyers in menial jobs, causes a lot of depression.

“Men don’t want to talk to anybody because they feel they are not human any more. They have lost their manhood and wasted all those years studying. Instead of contributing to the economy they become permanently dependent because they’re sick and depressed.”

He argues the country would save money in the long term by investing in training schemes to upskill refugees, get them off benefits and into the work force. (According to the Ministry of Social Development, nearly 2100 refugees were on benefits in mid-2007. Of them 313 were unemployed, 540 were sickness beneficiaries, and 1241 were on the DPB or emergency benefits.)

Stories abound of highly educated refugees reduced to driving taxis because they can’t afford the fees to sit exams that would allow them to work here as professionals. In Christchurch years ago, the joke was that if you needed heart surgery you ordered a certain taxi because the refugee cardiac surgeon driver could do the op on the back seat.

But getting medical registration is no joke for the 30 refugee doctors on the Auckland Refugee and Migrant Service database. ARMS director Dr Mary Dawson says the New Zealand Medical Council insists that doctors pass level 7.5 of the International English Language Testing System (IELTS) when other OECD countries like the UK accept doctors who pass level 7. “A lot of Kiwis would never pass level 7.5.” Moreover, the fee to sit IELTS is \$700.

Learning English is even more of a struggle for refugees with little or no schooling and settlement agencies say inability to communicate impacts on mental health, especially for mothers isolated at home caring for large families. Several years ago,

TREVOR GOFFCOCK

research showed that 46 per cent of quota refugees could not speak English well after two years, and women in particular had difficulty accessing language classes.

English Language Partners New Zealand (formerly ESOL Home Tutors) has 23 branches throughout the country with 3000 volunteers teaching English to more than 7000 refugees and migrants. Director Claire Szabo, herself the daughter of a Hungarian refugee, says there are waiting lists in some urban areas and more programmes are urgently needed for pre-literate refugees who cannot read or write in any language.

If all they get is a couple of hours a week with a home tutor, achieving a basic level of literacy will take them 16 years, but nor can they cope with intensive 20 hour-a-week English courses targeted at job seekers.

“For someone who is coming to learning for the first time, can’t hold a pen, can’t read the alphabet and can’t speak English, expecting them to sit in a classroom 20 hours a week is actually damaging.”

Szabo says currently there’s no link between funding of services and refugee selection. In some quota intakes, the number of pre-literate refugees is as high as 40 per cent, which has big implications for service providers, but is not reflected in the money they get from the Government.

“We need to make sure the right targeted services are on offer in the right places for these people when they arrive, and that’s not always the case at the moment.”

Another major criticism of our resettlement programme is that it is too reliant on volunteers, who should not be expected to cope with seriously mentally ill refugees.

Judi Bastin trains Refugee Services volunteers in Christchurch and she wants a cap on the number of high- and complex-needs cases assigned to each area. “In the last two years there have been four or five cases where we have not provided volunteers or we have pulled them out... I dug my toes in and said, ‘The only people who should be working with this family are highly skilled professionals.’

“My fear was one day someone was going to go totally off their tree and the volunteer would be in the wrong place at the wrong time and be killed or seriously injured.”

Kafebe Mundeke says refugee communities greatly appreciate the work done by volunteers, but their effectiveness is limited. “We need someone who knows the language, not someone who communicates by signs. Our

“Our people are very polite, they will never say, ‘Sorry, I don’t understand.’ They’ll smile and say, ‘Yes, yes, yes’ and the volunteer thinks they’ve done their job.”

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people are very polite, they will never say, ‘Sorry, I don’t understand.’ They’ll smile and say, ‘Yes, yes, yes’ and the volunteer thinks they’ve done their job.”

There’s also resentment that Refugee Services receives \$2.4 million a year in Government funding while community leaders do hours of unpaid work. “We get burned out,” Mundeke says. “Most of us have given up chances of employment because we don’t have the time. We get calls [for help] day and night, sometimes at 1am or 2am. We can’t say no to our people; in our culture that would be like a crime.”

Another sore point is that unlike quota refugees, family reunification cases and asylum seekers do not get orientation at Mangere or volunteer help. Sponsoring relatives are expected to provide all the necessary support and find suitable housing, which isn’t easy if they are still struggling themselves.

North & South was told of a young man who earlier this year sponsored seven family members, five of them children. All eight lived in his one-room bedsit for six weeks because Housing New Zealand refused to provide a house until the family’s certificates of identity and residence visas had been endorsed.

In war zones, it is common for fleeing families to become separated, and Gary Poole says after years living apart reunited relatives need help to re-establish relationships, especially if the newcomers are children suddenly parachuted into a family they barely know.

He says the bottom line is that we need to set best practice guidelines and improve accountability. At present, there are at least a dozen government and non-government agencies involved in refugee resettlement and he would like to see one government department in overall charge “with authority to bring the others into line”.

Change may be on the cards – albeit slowly. Concern about the lack of accountability is raised in two Department of Labour reviews of refugee resettlement – one prepared two years ago under contract by PricewaterhouseCoopers, the other a 15-month-old

internal report. Until now, both have remained under wraps and were released to *North & South* under the Official Information Act only after the Ombudsman intervened.

The PWC review highlights the costs of having poorly coordinated and fragmented services provided by different agencies. It says better assessment of refugees’ needs during selection missions, multi-disciplinary case management, and longer-term tracking of refugees after their post-arrival orientation would all improve resettlement outcomes.

The DoL report accepts some of the issues raised by PWC, and concedes that the number of high-needs refugees has sometimes overwhelmed local services.

Kevin Third is DoL’s group manager of Service International, which includes the Refugee Division. He says measures to improve accountability, coordination and case management are under discussion, and a briefing paper on National’s promised evaluation of all migrant settlement services has gone to the Minister of Immigration. Third says they are looking at new settlement locations to relieve the pressure on Auckland, and Dunedin is a definite possibility. But one thing won’t change: “We would never stop taking the hard cases.”

Adam Awad is heartened by talk of evaluating settlement services. He is appalled at the idea of spending \$24 million on a new Mangere Refugee Reception Centre without an independent assessment of its worth. He believes orientation would be better done at a regional level where refugees will actually live, and says we should also look at settling refugees from rural backgrounds in country areas instead of in cities.

Awad says refugees are extremely adaptable, which is why they survive, and given the right support they have a lot to offer New Zealand. “Refugees are an asset, not a burden. In every sector where there is a skill shortage, we have people with those skills.

“Refugees come here to contribute. They’re hard workers; they don’t want to sit on a benefit and become mentally ill.

“We have huge expertise but we need that initial help.”

The Settlement Process

Since 2003, the Mangere centre has hosted refugees from more than 50 countries.

The Mangere Reception Centre is tucked away off Massey Rd in South Auckland, beside towering stacks of rusting shipping containers. Quota refugees spend six weeks here behind high cyclone fences in WWII Army huts that once housed a rehabilitation centre for US Marines.

Small rooms open off narrow dark corridors in shabby un-insulated dormitory blocks. They are freezing in winter and boiling in summer. If a baby cries at night it wakes the whole block and if there's a domestic dispute, everyone gets to hear it.

Meals are in the old mess hall, a cavernous, institutional place with shiny lino, long Formica tables and blue plastic chairs.

There are plans for a new \$24 million centre but no decision has yet been made on whether to proceed with it.

Since 2003-2004, the centre has hosted people from more than 50 different countries, mainly from Afghanistan, Myanmar, Sudan, Iraq and Iran. That's a dramatic change from the days when quota refugees were predominantly Vietnamese and Cambodian.

Once there were only one or two languages per intake, but now there are up to 12, and sometimes classrooms sound like the tower of Babel as four or five interpreters translate simultaneously. During their stay, refugees undergo medical tests, receive English lessons and get an introduction to life in New Zealand – everything from how to dress for a formal occasion to New Zealand law. Some asylum seekers detained on arrival are accommodated here too and a limited number can attend classes if there is room.

Maria Hayward, a senior lecturer in the AUT school of languages, heads the refugee education centre. There is a school for primary to secondary-age children and she says life in refugee camps leaves its mark. "Some have never sat on a chair before. There were some in the last class who didn't know how to open the door, the teacher had to show them how the handle worked.

"If they've had to fight to survive, they'll fight here and that becomes quite apparent in the first week or two. If they've witnessed horrible things that have given them a warped



The Mangere Reception Centre, where quota refugees spend their first six weeks.

“We had a preschooler threatening to rape another preschooler. He knew what the word meant, had probably seen it happen, and knew it was a threat that held a lot of power.” Maria Hayward, senior lecturer at AUT's school of languages.

view of morality, they don't know what to do with that. We had a preschooler threatening to rape another preschooler. He knew what the word meant, had probably seen it happen, and knew it was a threat that held a lot of power. With the children it's easier to address these issues. If you guide them about appropriate behaviour, it changes very quickly.”

Family violence is a big issue and occasionally couples separate while they are still in the camp when women realise they no longer have to put up with being hit.

“Some refugees come from cultures where it's not only tolerated, you're respected if you keep your wife and children in line with physical discipline, and it's not that long ago it was like that in New Zealand.”

Hayward says they also talk about alternatives to smacking. “Some parents have told us they cannot use time out in another room because their children have seen adults taken to another room, and they know they have been raped, killed or tortured.”

With 20 years in refugee education, she

believes more orientation is needed in the community. On leaving Mangere, refugees are settled in Auckland, Hamilton, Wellington, Palmerston North, Christchurch and Nelson with placements decided by DoL and Refugee Services. The latter provides 12 months' social-work support as well as recruiting, training and supervising 600 volunteers who visit quota refugee families for six months (longer if necessary).

Volunteers provide practical assistance – furnishing houses with donated goods, helping with grocery shopping, teaching refugees how to use public transport – and Refugee Services manager of client services Jenni Broom says they fill a special niche.

“Hospitality is very important. A social worker may not have time to sit down and have a cup of tea, but a volunteer can, and they only have one family to look after, rather than a whole case-load, so they often become friends. I know two women who supported a Somali family and they're still surrogate grandmothers for that family 14 years on.”

The Next Generation

Meet Manin Mengistie.

Manin Mengistie's ambition is to become a human rights lawyer, a goal inspired by the bullying she experienced as an Ethiopian refugee growing up in the Sudan.

Two years before her Coptic Christian family moved to New Zealand, the then six-year-old stopped attending school altogether. "When I walked home from school I got picked on for not wearing a scarf and not being Muslim. I got beaten up and they ripped my dress."

The 19-year-old now runs refugee youth groups and talks of taking a group of Muslim girls shopping in a busy mall, encouraging them to relax and ignore the stares directed at their distinctive dress.

Mengistie made a big effort to fit in at her Wellington primary school, but abuse from Maori kids brought back memories of the Sudan. "They'd say, 'Get out of our country. What the hell are you doing here?' I didn't know how to react."

At Avonside Girls High School, she threw herself into drama and singing and was the student representative on the board of trustees. "My whole thing was to get an education, not to be a bum."

That determination helped her pull through the devastating discovery at 16 that she was adopted. Her birth parents left her with close friends while they made a dangerous return trip to Ethiopia to deal with a family crisis and were delayed by the conflict. They returned two months after Mengistie had departed for New Zealand with her caregivers and tracing her took years.

Following the revelation, Mengistie left home, spending her last 18 months at school living with a member of her local church, in a women's refuge and at the YWCA. "I was mentally unstable for a long time, every night I would cry myself to sleep. Christchurch Resettlement Services helped me sort out my life. My social worker was my friend and parent. She signed my parental consent forms for school, took me to my school formal and helped me with my dress."

Mengistie's birth father is dead and she is desperate to bring her birth mother and three siblings here from Ethiopia; she works 20 hours a week at a supermarket to send



them money with the hope that one day they will be admitted as quota refugees.

Meantime, she continues the balancing act of living between two cultures, going out with Kiwi friends but refusing to drink alcohol; having a boyfriend, but choosing to flat alone because living with a partner before marriage is not the Ethiopian way.

Culture clash is a big issue among refugees where parents fear losing control of their children to a more permissive society in which boys and girls mix freely.

Hassan Haji Ibrahim is one of four refugee education coordinators employed by the Ministry of Education to look after the learning needs of about 1600 refugee students in the school system. He says some Somali families are so concerned about the impact of New Zealand's dating and drinking culture, they send their teens back to Africa for several years on "rehabilitation" missions.

"Boys assimilate faster, but there is more concern for girls, based on the fact that mothers are seen as the foundation of the family. [Parents] feel if a young girl doesn't adhere to her culture and values, she will lose face in her community, and that may minimise her changes of marriage."

There's an assumption kids are resilient, but Ibrahim says those who have witnessed horrors like seeing their classmates blown to bits are severely affected, and if parents are depressed there's a greater chance their kids will be too.

Doctor, airline pilot and lawyer often feature as parents' three top career choices for their children, and Ibrahim says that puts a lot of pressure on youngsters, triggering depression if they fail academically.

However, there are success stories too. Of the 250 Somalis in Christchurch, at least 30 are at university. +

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