



*Working with
Refugee Families and Children*



NSW Refugee Health Service

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Introduction

Many refugee families come to Australia each year, from different parts of the world and with a vast range of experiences. They struggle to deal with the consequences of their exposure to traumatic experiences and with the resettlement process, which in most cases lasts a lifetime. Their lack of familiarity with the Australian 'system' and the services available to them impacts on their level of access to those services and ultimately on the health outcomes of refugee families.

However, despite being one of the most vulnerable groups in our society, they are also very resilient. Refugees have much to offer our society including a wealth of experience, knowledge and skills that can benefit Australia as a whole.

The Support for Refugee Families Project (a project of the NSW Refugee Health Service) was funded with the aim of improving the health outcomes of refugee families by working in partnership with health professionals and Families First projects.

This resource provides a summary of issues relevant to refugee families and information that can be used as a referral point to other support services.



Who are refugees?



A refugee is an internationally recognised legal term and refers to people who are

outside their country of nationality, and unable or unwilling to return, owing to fear of persecution, on the basis of race, religion, nationality, political opinion, or membership of a particular social group.

Adapted from the 1951 Convention on the Status of Refugees

In other words, a refugee is a person who has fled their country of origin and who is at risk of being persecuted. Persecution may refer to execution, torture, imprisonment without trial, mistreatment and/or denial of other rights.

Refugees are very different to migrants: migrants choose to leave their countries and have not necessarily experienced torture and refugee trauma. Like all migrants, refugees face many obstacles and challenges in settling in a new country, but the impact of the refugee experience can be profound.

Others arriving in Australia as part of the Humanitarian Program include people who have suffered gross violations of their human rights but who have not been recognised as refugees. There are also people from 'refugee-like' backgrounds who have arrived under other migration categories, such as Family Reunion.

Refugees arrive in Australia as:

Humanitarian Entrants: are people who have been selected by Australia from overseas for resettlement. They are usually granted permanent protection and have full access to Medicare entitlements.

Asylum Seekers: people who are having their application for protection assessed. Some asylum seekers living in the community have access to Medicare services, but others do not. If they are assessed to be refugees they may be granted either a permanent visa or a three year temporary protection visa.

Temporary Protection Visa (TPV) Holders: people who arrived as asylum seekers without a valid visa and were placed in detention, but have since been deemed a refugee and provided with a three year temporary visa. They also have access to Medicare.

For more information please refer to the DIMIA website, fact sheet 64.

Some 10,000 Humanitarian Program Entrants from overseas settle in Australia each year, plus some 2,000 people are granted refugee status in Australia as asylum seekers. In the last 3 years, NSW received 8834 Humanitarian Entrants. Of these, nearly two thirds settled in Western and South-Western Sydney.

HUMANITARIAN ENTRANTS Top 6 Countries of Birth (South Western Sydney) 2003

1.	Iraq
2.	Sudan
3.	Afghanistan
4.	Former Yugoslavia
5.	Iran
6.	Croatia

HUMANITARIAN ENTRANTS Top 6 Languages Spoken (South Western Sydney) 2003

1.	Arabic
2.	Serbian
3.	Assyrian
4.	Bosnian
5.	Kurdish
6.	Persian/Farsi/Dari

The refugee experience

The refugee experience, and the diverse circumstances that refugee families find themselves in when arriving in Australia, have impacts on their health, their families, parenting and other issues related to settlement.

Their experiences may include:

- Psychological trauma due to persecution, imprisonment without trial, exposure to war, civil unrest, loss of family members and friends, loss of home, possessions, job status, not knowing their destiny and being subjected to violence and rape, particularly for women
- Inadequate medical care in their country of origin due to social upheaval and armed conflict (including little or no access to formal perinatal care), and during their flight
- Overcrowding, poor hygiene and under-nutrition, particularly in refugee camps
- Injuries due to war and torture

Despite the resilience of refugee families, having children grow up in a culture different from that of their parents may cause family tensions. Having to cope and learn a new culture and language and adapting to school are major stresses for the family as a whole. Upon settlement refugee families are generally more disadvantaged as they are faced with issues such as:

- Families being split up
- Family breakdown
- Changes in family composition
- Changes in traditional roles - e.g. it is not uncommon for a boy or adolescent male to take on an adult role if their father has died or disappeared

In addition the following factors increase the vulnerability of refugee children:

- Displacement and relocation
- Interruption to family life, rituals, routines and schooling
- Effects of loss or death of parent(s) and/or family members
- Neglect and abandonment
- Direct experience or witnessing of violence
- Physical and sexual abuse
- Poor physical and mental health



For many refugee families 'traditional' parenting practices may be disrupted because their focus is on settlement. Pressures refugee parents may be faced with include:

- Limited financial support
- Unemployment or underemployment
- Uncertainty of status
- Inadequate or appropriate housing
- Lack of emotional and practical support from family and friends
- Isolation
- Language difficulties
- Cultural adjustment
- Physical and psychological health problems from past experiences
- Racism
- Lack of awareness of services and the Australian system, including health, school and child protection issues

Health issues

Refugees and other humanitarian entrants selected to come to Australia are required to undergo the same medical examination and tests as other migrants seeking permanent residence in Australia. Compulsory screening includes HIV and tuberculosis (TB), and hepatitis B for pregnant women (see the RHS website for more information).

While refugees are screened for these conditions, they may face other health problems. Their health status may also be affected by higher than average rates of unemployment, poverty and social disadvantage in Australia.

Health issues may include:

Poor oral health due to poor diet, lack of access to dental care, or damage to the mouth as a result of torture

Nutritional deficiencies such as iron, folate, vitamin A and vitamin D (especially affecting children from Africa)

Undiagnosed and poorly managed **visual and hearing impairment** due to limited access to screening and treatment

Infectious and parasitic diseases such as hepatitis and parasites

Lack of basic **immunisations**. Many refugee children and young people have had their immunisation disrupted due to civil conflict in their country of origin and forced exile. Many women have inadequate immunity to rubella

Injuries from war and/or torture, including bone and joint damage



Poor psychological health. Post traumatic stress disorder (PTSD), depression, anxiety, grief and survivor guilt may be present. In addition, children may

- experience behavioural problems, such as bedwetting and acting out, resulting from trauma
 - suffer from the effects of their parents' physical and psychological ill health
-

Women's health issues such as

- female genital mutilation (FGM)
 - the results of sexual abuse, including unplanned pregnancy and STDs
 - reproductive health care needs
-

Female Genital Mutilation (FGM)

This is a cultural practice performed in parts of Africa, the Middle East and Asia. The incidence of FGM varies from country to country. FGM is a harmful procedure which can result in long term health problems for many women such as urinary tract infections, incontinence, chronic pelvic infection and problems with child-birth.

For more information call the NSW Education Program on FGM on 9840 3768 or Auburn Hospital Maternity Unit on 9563 9500.

Men's health issues such as

- sexual problems, often as a result of torture
 - problems with their sense of identity and self-worth following the loss of traditional roles as head of the house and breadwinner
-

What to be aware of when working with refugee families

A sensitive approach to health care can help to rebuild trust in others. It can also provide reassurance to those who experience fear of the system and authority figures. Issues to be aware of include:

- Geographic isolation, loss of family and social support networks, and difficulty building new social networks. As a result new parents are often not able to get advice and support on childrearing from family, friends and their social networks.
- Issues of communication and language barriers. Many refugees don't have the language skills to communicate effectively in English and struggle to communicate their physical and mental health concerns. They may not be aware that they can ask services to book an interpreter. When booking an interpreter you need to consider the gender, ethnicity and language/dialect of the interpreter. For example, it may be inappropriate to provide a Serbian interpreter for a Bosnian Muslim, or a male interpreter for a female patient or vice versa. SWSAHS staff can contact the Health Care Interpreter Service on 9828 6088.
- Lack of knowledge of how the health system works and lack of confidence in approaching health services. Health systems operate quite differently in other countries. Many refugees are also unfamiliar with the concept of preventative medicine as well as the role of social workers and counsellors. Give information on preventative health and information about the service you are referring them to. A useful resource is the NSW Health Care System Information Booklet produced by the NSW Refugee Health Service.
- Lack of awareness of one's rights and responsibilities, particularly in consultations with a GP or other health care professionals. These should be explained to refugee clients.



- Distrust or fear of doctors and other health care professionals as a result of the involvement of health professionals in torture and repression in their country of origin. Involving your client in decision-making regarding their options may help them to feel included.
- Traumatic experiences can result in post-traumatic stress disorder (PTSD). This may impact on women during pregnancy and postnatally. Specialist counselling services are offered by the Service for the Treatment & Rehabilitation of Torture & Trauma Survivors (STARTTS) - call 9794 1900.
- Experiences of sexual violence in their country of origin, in refugee camps or whilst in transit to another country. Where sexual violence is suspected, extreme sensitivity is required.
- Different cultural practices and beliefs, particularly in relation to childbirth and parenting. Cultural concepts regarding family, breastfeeding and maternity health care can also vary. It is important to ask whether clients have particular cultural practices as they may vary from person to person.

The NSW Refugee Health Service offers specialised training for health care professionals working with refugee families. The training covers the refugee experience; settlement and health issues; the impact of conflict on child and family development; and health management issues. For more information see www.refugeehealth.org.au or phone 8778 0770.

Referral information for refugee families

For general enquires about refugee health matters contact the **NSW Refugee Health Service on 8778 0770**. For issues relating to torture and psychological trauma, contact **STARTTS on 9794 1900**.

Services available to refugees upon arrival

There are a number of different migration programs under which refugees arrive to Australia. Detailed information on the services available for different visa categories is available from the DIMIA website (www.immi.gov.au), Facts Sheets 66 and 67.

The following organisations provide services through DIMIA's Integrated Humanitarian Settlement Strategy:

Settlement Services International Inc.	9799 5455
Anglicare Migrant Services	9726 1500
St Vincent de Paul Migrant, Asylum and Refugee Services	9560 8666
STARTTS	9794 1900

Refugee specific services

Asylum Seekers Centre _____ **9361 5606**

Supports refugees seeking asylum in Australia by providing English classes, job search skills, health care (clinical services), legal referrals and skills for living in Australia.

Asylum Seekers Assistance Scheme (ASAS)

Australian Red Cross NSW _____ **9229 4246**

The scheme assists eligible asylum seekers to meet some of their basic financial and health care needs.

House of Welcome Resource and Referral Centre _____ **9727 9290**

Supports refugees with Temporary Protection Visas and no family or community links in their transition from detention into the community. This includes emergency accommodation, a shopfront resource and referral centre, English classes and an employment program.

NSW Refugee Health Service _____ **8778 0770**

Assists refugees and people of refugee-like backgrounds including recent arrivals and those here for longer periods of time.

Services include: clinical and health assessments and advice, training, resources, research, information sessions for refugees about the NSW health system and information about refugee health.

STARTTS (Service for the Treatment & Rehabilitation of Torture & Trauma Survivors) _____ **9794 1900**

Provides a range of services to facilitate the healing process for refugees who have been exposed to torture and trauma, including counselling, psychiatric assessments, physiotherapy, Early Intervention Program, a youth program, training and support services for families.

Migrant Resource Centres

During the first six months of arrival, humanitarian entrants are ineligible for assistance from Migrant Resource Centres. These services can be accessed after six months, when the agencies listed on page 10 are expected to refer humanitarian entrants to mainstream or settlement services.

Migrant Resource Centres are non-government organisations (NGOs) which provide a variety of services that may assist with the settlement of migrant and refugee families. Services include settlement support, information on accommodation, employment, social security and education, and referrals to other organisations. Bilingual workers with relevant community languages are often based in MRCs.

South Western Sydney

Canterbury Bankstown Migrant Resource Centre	9789 3744
Fairfield Migrant Resource Centre	9727 0477
Liverpool Migrant Resource Centre	9601 3788
Macarthur Migrant Resource Centre	4627 1188

Other Areas

Auburn Migrant Resource Centre	9649 6955
Baulkham Hills, Holroyd, Parramatta Migrant Resource Centre	9687 9901
Blacktown Migrant Resource Centre	9621 6633
Migrant Network Services - Northern Sydney	9987 2333
St George Migrant Resource Centre	9597 5455

Women's health

Female Genital Mutilation (FGM) Program	9840 3768
Auburn Hospital Maternity Services	9563 9500
FPA Health Multicultural Services	9754 1322

Women's Health Centres provide information, advice and support to women to improve their health and well-being, and to build self-esteem and self-confidence. Many Centres also offer counselling, cultural programs, relaxation, stress management and English classes, massage or naturopathy.

Bankstown Women's Health Centre Inc.	9790 1378
Immigrant Women's Health Service Fairfield	9726 4044
Immigrant Women's Health Service, Cabramatta	9726 1016
Liverpool Women's Health Centre	9601 3555
W.I.L.M.A Women's Health Centre (Women In The Local Macarthur Area)	4627 2955

Ethno-specific organisations

These organisations work with their particular communities offering culturally specific services relating to settlement assistance, support groups, recreation and leisure, religious activities, welfare etc. Services vary depending on the organisation and the level of funding it receives.

Afghan Communities Association	9831 2436
African Communities Council	9558 0999
Australian Arabic Communities Council Inc	9709 4333
Australian Kurdish Association	9627 4825
Assyrian Australia Association	9728 2594
Bosnian Resource & Advisory Centre	9821 1207
Croatian Welfare Association of Australia	9610 1146
Iranian Community Organisation	9635 6755
Khmer Community of Australia	9823 3479
Muslim Women's Association	9750 6916
Serbian Orthodox Welfare Association of NSW	9727 9817
Spanish & Latin American Association for Social Assistance (SLASA)	9724 2220
Vietnamese Women's Association in NSW	9723 2022

Family support services

Family Support Services are local community organisations that employ trained staff to work with families and strengthen their links with the community. They provide a number of services including counselling, support groups, playgroups and other activities.

Anglicare Family Services - Liverpool	9821 1014
Anglicare Refugee and Migrant Services - Cabramatta	9755 0233
Australian Arabic Communities Council - Bankstown	9709 4333
Bankstown Family Support Service	9709 5622
Burnside Multicultural Family Support Service - Cabramatta	9728 4411
Campbelltown Family Support Service	4628 7233
South West Child, Adolescent and Family Services Association (CAFS)	9826 8077
Fairfield Parent Support Service	9756 1384

Multicultural/supported playgroups

Multicultural playgroups are informal sessions where families (parents, grandparents, carers and children) come together in a relaxed environment. Children have opportunities to interact with other children and adults, practice their home language, have fun, make new friends and develop new skills through informal play. They also allow parents to meet other people, make friends and share ideas and experiences. Supported playgroups specifically target vulnerable families and support the provision of meaningful learning opportunities for young children.

Fairfield City Council - Supported Playgroup Program	9724 7948
Karitane	9794 1852
Liverpool Migrant Resource Centre - Multicultural Family Project	9601 3788
Playgroup Association of NSW	9604 5513
Koorana	9750 4100

Other relevant services

Child Protection

DoCS (Department of Community Services) 24 hour Helpline 133 627

State-wide Health Services

DAMEC (Drug & Alcohol Multicultural Education Centre) 9699 3552

Multicultural Health Communication Service 9382 7516

Multicultural HIV / AIDS Service 9515 3098

Multicultural Problem Gambling Service 9840 3330 / 1800 856 800

Interpreters

SWSAHS Health Care Interpreter Service 9828 6088

TIS (Telephone Interpreter Service) 131 450

Doctors Priority Line *(for doctors and specialists in private practice)* 1300 131 450

Legal

Immigration Advice Rights Centre 9281 8355

RACS (Refugee Advisory Casework Service) 9211 4001

South West Sydney Legal Centre 9601 7777

Women's Legal Resource Centre 9749 7700

Mental Health

Transcultural Mental Health Service 9840 3800 / 1800 648 911

Violence

Domestic Violence Line 1800 656 463

Fairfield/Liverpool Women's Court Assistance Scheme 9601 6988

Immigrant Women's Speakout Association 9635 8022

Rape Crisis Line 9819 6565 / 1800 424 017

Housing

Homeless Persons Information Service 9265 9081 / 1800 234 566

Non English Speaking Housing (NESH) Women's Scheme 9726 7969

Disabilities

Multicultural Disabilities Advocacy Association 9891 6400

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or visit our website at www.refugeehealth.org.au

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