

# Report of exchange programme in Norway



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## HUB INTERVIEW GUIDE

### on STATISTICAL DATA AND GENERAL RECEPTION CONDITIONS

Please provide data on the following, if available

1. Number and countries of origin of asylum seekers in a) the whole country, b) the reception facility

**In Norway, in 2006 5.300 persons applied for asylum in Norway.**

**The applicants came from nationals of 104 countries.**

**Iraqi and Somalis were the largest group, followed by the Russians and Serbia.**

2. Number and countries of origin asylum seekers in a) the whole country, b) the reception facility, who are

-	- Jarlen Mottak, - Kyrkskaetore - Middle Norway	- Grong Mottak, - Grong, - Middle Norway
- Women	- 34 over 18 years	- 26 over 18 years
- Pregnant women	- 3	- 3
- Single mothers with minor children	- 5	- 1
- Families	- 19	- 15
- Minors	- 39	- 27
- Unaccompanied children	- 3	- 0
- Older people	- 4 over 60 years	- 1 over 60 years
- Disabled people	- 1	- 4
- Victims of trauma	- 2	- 2

**In both locations we talk about a reception location, both decentralized.**

**In Jarlen Mottak are 125 inhabitants, in Grong 110 inhabitants.**

**Jarlen is a commune with 4500 and Grong 3000 inhabitants.**

**The biggest group in both locations is from Iraq, Afghanistan and Somalia.**

**In Grong there is a big group of Korean people.**

- .

Please note down the ways in which information was/ could be accessed. If information was not available, please note down the reasons for this.

### GENERAL RECEPTION CONDITIONS

#### Initial reception

Where are asylum seekers placed when they first enter the country?

**In Norway asylum seekers are transferred to a transit centre. For max 48 hours, after this they go to a transfer centre where they can stay from 2 up till 6 months. From here they will go to a reception centre.**

### **Medical screening**

What are the minimum practices on medical screening (health and mental health)?

**In the transit centre the applicants get a medical check-up, this is mainly a tuberculosis test.**

**If there is a doubt about age (at the under aged minor group) they can start an age investigation, teeth.**

### **Information**

Do asylum seekers receive information on the asylum process?

Do they receive adequate information on their rights?

What is the quality and accessibility of this information?

**They get global information about the possible procedure.**

### **Legal services**

What type of legal services are offered?

How are asylum seekers supported in making their application?

**The applicants get juridical assistance from the moment they receive their first negative decision. The UDI gives them an approved (by them) lawyer. He will make an appeal, automatically, without having seen the client; they will meet maybe, but will have minimum a conversation on the phone.**

**There are organisations like NOAS and Norway Refugee help, but as well in Grong as in Jarlen we did not see these organisations represented, nor in the centre as in the villages. We saw only paper information.**

### **Interpreters**

Are professional, culturally sensitive and gender-matched interpreters available for asylum seekers when required?

**Mostly used are the translators by phone, distances in Norway are that big, that they will use live translators only in the big cities. Hero and UDI provide these translators.**

### **Waiting times**

How long do asylum seekers have to wait for a decision in their case? Please provide examples.

**The staff members are not informed when a decision has been made by the UDI.**

**They get a signal in their registration system ( SESAM) that a conversation regarding “return” has to be done.**

**Inhabitants are informed by a letter from the lawyer, which is pointed out by the UDI, about the negative decision, the lawyer automatically made an appeal.**

**The guess of the staff is that after approximately 2 months a first negative can be made.**

**This can also be much longer, for example 1 year.**

### **Detention**

Are any asylum seekers held in detention/ detention-like facilities? Please provide statistical data if available.

What are the conditions and practices around detention (e.g. lengths of time spent in detention, material conditions, services available for detainees)?

**In 2006 700 persons were deported from the reception centres after a final rejection of the asylum application.**

**2700 persons were escorted out of Norway by the authorities after receiving a final rejection. 400 of this group have left voluntarily through the IOM.**

**20% of the deported persons were pursuant to the Dublin Convention.**

## **Dispersal**

Is there a dispersal policy for asylum seekers?

What are the effects of the dispersal policy on asylum seekers?

**In Norway there is no special police department who is responsible for the dispersal of persons. This is acted out in communication with the manager and staff members.**

## **Staff**

How are staff at the reception centre trained?

What is the level of involvement by staff members in their clients' experiences at the reception facility?

What is the turnover rate of members of staff?

**The staff is hard to get in an area where not so much people live.**

**As the Jarlen manager said;**

**“When they can read and write I will hire them” ( way of speaking)**

**In our opinion the staff is well informed and motivated to follow the lines that UDI sets out for them ( info program, conversation cycle)**

**At this moment the staff contents 7 persons, in both centres, with a vacancy in Jarlen of 0,6.**

**The staff members each have a different task, administrative, financial, informative, entertaining, women and children.**

**Sometimes they even have double or triple functions.( for example: the financial secretary is also the driver of the kindergarten)**

**In Jarlen; The manager does all the conversations regarding return and leave.**

**An important difference between the communes. In Jarlen the medical assistant is a member of the local doctors practice, in Grong she is a Hero staff member.**

## **Client information**

How much information do staff have about their clients?

How is this information obtained?

How is client information recorded, and how are the records maintained and accessed?

**The UDI sends no information regards to the procedure to the staff.**

**So the staff has NO information what so ever about the legal position.**

**Client information as bank account number, financial information, education back ground, working experience, languages, family connections etc. is in the electronic file in SESAM. This file can be used, read and filled by all the staff members. ( with use of personal safety access)**

**Also in this file is a picture of the client, which is also available in his paper file.**

**We found this very practical, so you directly can se about who you are talking.**

## **Schooling and education**

What kind of educational opportunities are available to asylum seekers?

Do they receive language training?

**Children from 6 years until 16 years will go to the Norwegian school.**

**In Jarla they have created an optional school, so children get there extra lessons in words, grammar and behaviour, during the regular school times. ( 3 hours a day)**

**For the small children (0 – 6 years) there is a kinder garden, they stay there, minimum 3 days a week. Asylum children pay 150 kronor par month (20 euros) for food, if they stay there to eat the warm lunch also.**

**If the day care is only with breakfast, then it is for free.**

**The kinder garden in Jarlen is combined with the Norwegian children. That has aspects on both sides, cultures get to know each other (fears are being taking away) and there is a educational benefit.( words, behaviour and basic knowledge is stimulated daily)**

**In Grong amount of the children is not so big, so there is no need to bring them to the Mottaks/ Centres kinder garden. To stimulate the education of words ,basic knowledge and behaviour, the kinder garden visits the commune kinder garden in the city of Grong.**

### **Health care**

What kind of health services are available?

To what extent do asylum seekers have access to medical aid and treatment?

**In Norway healthcare is free accessible for asylum seekers.**

**They have tot pay a small amount for there visits', they are free to choose a doctor.**

**When this amount reaches 1600 crones ( 200 euros) they don't have to pay anything for the rest of the year.(jan-dec)**

**Everything which is related to psychiatry is for free.**

### **Mental health care**

What are the provisions for mental health care?

**Asylum seekers can get a consult at the psychiatry, they can arrange this through the nurse or house doctor.**

### **Food**

What are the arrangements around food provision?

**As well in Jarlen as in Grong the people are responsible for their own food and preparation. They have to buy and cook it by themselves.**

### **Accommodation**

Where are asylum seekers housed at various stages of the asylum process?

Are they able to choose their own accommodation?

What is the quality of accommodation arrangements for asylum seekers?

**They first live in a transit and transfer centre.**

**The UDI decides in which reception centre they will live, this depends on the available places.**

**Reception centres have to give their " vacant" places every Monday.**

**The asylum seekers have hardly influence on this system. They are moved to a region, within that region they can, maybe later, switched. The criteria are hard (first degree family, medical treatment)**

**In both centres the inhabitants lived de-centralized, is apartment houses, or house for 1 family. For singles they used bigger locations, for example till 8 persons.**

### **Financial support**

What kind of financial support do asylum seekers receive?

Are they expected to refund expenses?

**They receive imminently for an adult 2890 NOK (361 EUR) for couple 2380 NOK (595 EUR). For the children they receive 770 NOK (96 EUR). From That amount they have to bay food and clothes.... In some centres they pay a deposit for the key and for the cleaning of the accommodation.**

### **Clothing**

What kind of arrangements exist for clothing, including shoes, winter garments, etc.?

**If the inhabitants of the city brings clothing's, the staff divides that to the inhabitants of the mottak. But there are no rules for that. Usually these are baby and children clothes. Newborn's get a start packet ( read further on).**

### **Freedom of movement**

Do asylum seekers have freedom of movement in the country?

**They have to ask permission if they leave the mottak for more than three days. ( max. two weeks). When they don't come back at the centre, the staff removes there personal belongings. If the asylum seeker report themselves back at the centre, UDI have to decide if and where they have to go to.**

### **Recreation**

Are there opportunities for recreation and leisure activities, in areas such as arts, sports, reading, games, music, and being outdoors?

**Yes, the asylum seekers are free to enter any club or organisation. In both centres they have their own recreation room. ( Pool, internet, books, coffee facilities).**

### **Religious practice**

Are there facilities for religious practice?

**In Grong there is a small Mosque in the activity centre and a church in the city. In Jarlen there was only a church and a visiting Imam**

### **Host community**

To what extent can asylum seekers engage with members of the host community?

**On every level.**

### **Communication and media**

Do asylum seekers have access to phonecards, telephones and/ or mobiles?

Do asylum seekers have access to the Internet, TV and radio?

**Phone card they bay in bigger city's . many of the inhabitants have there own mobiles. They have free access to internet. There is in the accommodations the possibilities for radio and TV bud the centres do not provide them.**

### **Withdrawal of benefits**

Are there any circumstances in which benefits or services may be withdrawn from asylum seekers?

**There is the possibility to withdraw 100 NOK (12,50 EUR) If they don't come to a obligated meeting.**

### **Complaints and participation**

Do asylum seekers have the opportunity to make official and/ or informal complaints against practices in the residence facilities?

How are complaints processed?

Are asylum seekers involved in any aspect of the ways in which the facility operates?

**They have the possibility to make an official complaint at Hero, UDI and local police. It is a paper procedure with is not often used. Inhabitants are aware of this procedure because it is a part of the information module.**

**Good practice**

Are there specific examples of good practice relating to any of the above aspects?

- **The counselling system in the centre**
- **The paid working experience**
- **The kinder garden**
- **The responsibility of organising activities**

## HUB INTERVIEW GUIDE

### on CHILDREN, INCLUDING UNACCOMPANIED MINORS (UAMs)

*The definition of 'child' in this questionnaire applies to anyone under 18 years of age. However, different reception practices may exist for children of different age groups, including adolescents, and these should be accounted for in the reporting.*

#### **Reception of clandestine entrants/ port of entry claimants**

How are clandestine entrants/ port of entry claimants received?

Are suitable facilities offered to children?

Do children receive information on their rights?

**In 2006 350 underage minors entered to Norway.**

**Most of them came out of Iraq.**

**The follow the route of transit, transfer and reception centre. In every centre there is a separate unit for them.**

**These are staffed around the clock.**

**There are 2 centres special for UMAs. They can also be placed in a regular reception centre.**

#### **Age determination**

What are the procedures for age determination?

Are they compulsory?

How are children prepared for and supported throughout the procedures?

**The UDI can carry out an age determination. The UMA can agree to undergo this examination. If they refuse it could weaken their case.**

#### **Age definitions**

What is the age definition of a 'child' in the asylum process and what are the implications of this?

What happens when an asylum-seeking child reaches the legal age for adulthood?

**The age limit is 18 or older. If the examination proves them over 18, they are treated like an adult.**

#### **Interview arrangements**

Are the interviewers trained in interviewing children?

Is the purpose of the interview explained to the child in a way that he/ she can make sense of it?

**We have no information about this.**

**We know that UMAs have a lawyer from the beginning of the procedure.**

#### **Initial Accommodation**

Where are children placed for accommodation, and how are the accommodation facilities like?

Are children accommodated separately, or with adults?

What are the accommodation arrangements for UAMs?

### **Guardians**

Are UAMs assigned a guardian?

How are the guardians selected?

**There is an appointed guardian for every UMA. He/she makes sure that the UMA gets all the benefits. He/ she will look at the legal and financial interests.**

### **Language support**

Are interpreters available for children?

Are they trained in communicating with children?

How is trust built between the interpreter and the child?

Do all children receive training in the host language?

**We have no information about this.**

### **Information**

Do children receive adequate information at all stages of the asylum process, and are children explained their rights, in a language they can understand?

Do children in families and UAMs differ in the extent of information they receive?

### **Legal support**

What kind of legal services are on offer for children?

**They have a legal guide, lawyer, from the beginning of the procedure.**

### **Family tracing**

Do children receive services for tracing their families?

Can children and UAMs in particular keep in touch with their families or friends abroad, if they wish to do so?

**If there is alive family help is provided to trace them.**

### **Waiting times**

How long do children have to wait for decisions in their case, and how are they prepared for and supported throughout the waiting?

**UDI processes applications from UMAS faster than regular asylum seekers.**

**A permit should be given no later than 3 months, after the UDI has granted the decision to stay.**

### **Access to education**

What kind of education do children receive?

Is the schooling mainstream or separate?

**In Norway children from 6 till 16 years must go to school, then centre will enrol you to an appropriate school.**

**Between 16 -18 years you are entitled to attend a course of Norwegian language.**

### **Health and mental health screening**

At what stage are children screened for health/ mental health?

Are there any specific health services for children?

Are adolescents (in families/ UAMs) offered information on sexual health?

What kind of mental health services are offered to children?  
Are children aware of the health/ mental health services on offer?  
**We have no specific information, we guess it is the same as the regular asylum seekers ( see previous information)**

### **Psycho-social support**

How is trust built between children and professionals?  
Are members of staff trained in communicating with children?  
Are members of staff familiar with cultural and religious differences in the experience of childhood?  
What information does the centre collect about a child's past, and how does staff treat this information?  
Do children have the opportunity to engage with children from the host community?  
Do UAMs receive support/ coaching in every-day life-skills?  
Are there activities that bring together children at the centre as a group?  
Are there any special programs available for enhancing children's well-being?  
**We have no information.**

### **Children's voice**

Are children being heard as individuals at the reception centre?  
Do they take part in decision-making processes?  
Are children in families treated differently compared to UAMs?

### **Freedom of movement**

Are there any restrictions on children's freedom of movement?

### **Dispersal practices**

Is there a dispersal policy for children?  
How long can children normally stay in one place?  
How are children prepared for and supported during dispersal?

### **Transportation**

If dispersed, what are the practical arrangements for travelling to a new location?  
How are children prepared for the journey?

### **Financial support**

What kind of financial support do children receive?  
Are there any conditions attached?

### **Recreational activities**

What kinds of play facilities exist for children of different ages?  
Do children have the opportunity to engage in sports or games?  
Do children have the opportunity to engage in arts, music, reading and other recreational activities?

### **Good practice**

Are there specific examples of good practice relating to minors?

We have no specific information, we did not visit a UMA location.

# HUB INTERVIEW GUIDE

## on OLDER PEOPLE AND DISABLED PEOPLE

### OLDER PEOPLE

#### **Interpreting**

Are professional, culturally sensitive and gender-matched interpreters available for older people?

**Same as previous information.**

#### **Information**

Do older people receive sufficient information on the asylum process in their own language?  
How are they supported throughout the process?

#### **Accommodation**

How are older people accommodated?  
Do they have access to privacy if required?

**In both locations they searched for the best accommodation for the older people.  
Everything on 1 level, and down hill.**

#### **Social support**

What kind of social support do older people receive in the reception centre?  
How does staff take into account the cultural backgrounds of older people?  
Are there activities that bring together older people as a group?

#### **Health services**

What kind of health services do older people receive?  
Do older people receive appropriate medication and other medical treatment?  
How are they supported in looking after their health?

#### **Mental health services**

What kind of mental health services are offered to older people?

#### **Food**

Do older people have access to the kind of food they require and are accustomed to?  
Are the dietary needs and intake of older people monitored regularly?

#### **Language**

Do older people receive language tuition appropriate for their needs and style of learning?  
**In Norway someone is regarded older, when he/ she is over 55. Until that age they will have to follow language and integration courses. Over 55 only language.**

#### **Religious practice**

Are there facilities for religious practice if needed?

#### **Recreational activities**

Are there recreational activities suitable for older people?

#### **Dispersal**

What are the effects of dispersal practices on older people?  
How are older people transported during dispersal?

### **Training and education**

What kind of training/ educational opportunities exist for older people?

### **Host community**

Are there opportunities for older people to interact with people in the host community?

### **Good practice**

Are there specific examples of good practice relating to older people?

**We have no specific information, the elderly are a part of the commune and participate in the activities. They are not seen as a special group..**

## **DISABLED PEOPLE**

### **Types of disability**

What kind of disabilities do the asylum-seekers have?

**We have seen a man with children's polio, a man who stepped on a mine, a child with internal ( stomach and urine ) problems, a man with a malformed foot , and a man in a wheel chair.**

### **Accommodation**

How are disabled people accommodated?

Do they have access to privacy if required?

**The staff looks for a appropriate accommodation, sometimes they live together. Usually they live near the city centre to be close to different services.**

### **Disabled facilities and services**

Are there special facilities/ services for disabled people?

**We have no information.**

### **Counselling**

What kind of counselling services are available for disabled people?

### **Social support**

How are disabled people supported socially?

### **Health screening and support**

Do disabled people receive appropriate health screening and treatment/ support?

Do they have access to professional support for their disability?

In the case of a disabled child, do parents receive appropriate information and support?

### **Recreational activities**

Are there recreational activities for disabled people to take part in?

### **Dispersal**

How are disabled people transported if dispersed?

### **Detention**

What is the impact of potential detention policies on people with disabilities?

How is this dealt with?

### **Training and education**

What kind of training/ educational opportunities exist for disabled people?

**Host community**

Are there opportunities for disabled people to interact with people in the host community?

**Good practice**

Are there specific examples of good practice relating to disabled people?

**We have the idea that older and disabled people are treated as regular asylum seekers, the staff looks good at their chances, instead of disabilities.**

**They have a good communication with the medical care, and what they need is provided for.**

**We see this as a good practice.**

**on VICTIMS OF TORTURE, RAPE AND PHYSICAL OR PSYCHOLOGICAL VIOLENCE, VICTIMS OF TRAUMA AND OTHER PEOPLE WITH MENTAL HEALTH PROBLEMS**

**about this subject we have no specific information. the staff members could not clearly say who would fit under this group.**

**Health and mental health screening**

At what stage is health and mental health screening arranged?  
What is the quality of the screening?

**Interpreters**

Are professionally trained, culturally sensitive and gender-matched interpreters available?

**Information on processes**

Do people with mental health problems receive adequate information on the asylum process, their rights, and the services available to them?  
How are they prepared for and supported throughout the various stages of the asylum process?

**Interview arrangements**

Are there appropriate interview arrangements for women, minors and elderly people with mental health problems?

**Waiting times**

For how long do victims of trauma normally have to wait for their case to be decided?

**Psychological and psychiatric support**

What forms of support or rehabilitation are on offer, and to whom?  
Is specialist support available for minors, women, older people and/ or disabled people with mental health problems?  
Are services available to asylum seekers with mental health problems, who have not been diagnosed as victims of trauma?

**Medical support**

To what extent do asylum seekers have access to medical aid and treatment?

**Psycho-social support**

Are the personal backgrounds of victims of trauma known to members of staff?  
What types of community support are available?  
Do people with mental health problems have the opportunity to participate in community activities?  
Can they receive support with daily tasks, if required?  
Can family members of people with mental health problems receive counselling and social support, if required?

**Accommodation**

Is the physical environment suitable for people with mental health problems?

Is there adequate privacy?

Is the accommodation environment both safe and unthreatening?

**Dispersal**

What is the impact of potential dispersal policies on people with mental health problems?

How is this dealt with?

**Detention**

What is the impact of potential detention policies on people with mental health problems?

How is this dealt with?

**Age determination**

For victims of trauma, how is the potentially traumatic effect of age determination procedures dealt with?

**Recreation**

Do people with mental health problems have opportunities for recreation and leisure activities, in areas such as arts, sports, reading, games, music, and being outdoors?

**Host community**

Are there opportunities for people with mental health problems to interact with people in the host community?

**Good practice**

Are there specific examples of good practice relating to people with mental health problems?

## HUB INTERVIEW GUIDE

### on PREGNANT WOMEN, SINGLE PARENTS WITH MINOR CHILDREN, WOMEN AND FAMILIES

#### PREGNANT WOMEN

##### Health screening

Do pregnant women receive adequate and ongoing health screening?

Do they have access to medication and gynaecological treatment if necessary?

**The pregnant woman in Norway goes to the controls of the midwife.**

**If medical treatment is necessary it is given.**

##### Information

Do pregnant women receive sufficient information on practices around giving birth in the host country?

**We are not sure, maybe the midwife does give that information.**

##### Interpreters

Are professional, culturally sensitive, female interpreters available for pregnant women?

**Same as in regular cases.**

##### Counselling

What kind of counselling is available for pregnant women?

What kind of guidance/ counselling services are on offer for women after giving birth?

**In both centres the nurse gives information about having a child and bringing them up.**

**Practical and emotion.**

##### Material environment

Is the material environment adequate for pregnant women's needs?

Do they have required privacy?

Are pregnant women in families accommodated with their families or with other women, and do they have a choice in the matter?

**In Norway woman deliver the children in the hospital, after that they come home , to their former apartment.**

**The Hero provides them with bed and supplies.**

**Which is not every where the same.**

**In Grong they gave the mother a winter or summer packet, suitable for that time of year.**

##### Food

Do pregnant women have access to the food they require?

**Women are self responsible for the food they want to eat.**

##### Clothing

Is maternity and baby clothing available?

**See previous information.**

##### Financial support

Is the financial allocation sufficient to cover for pregnancy-related needs?

**A woman gets only child money when a child is delivered.**

**In Norway you can get a financial bonus when a child is born, but this is only given when a permit to stay has been decided.**

#### **Social support**

Are there opportunities for women to interact with pregnant women in the host community?  
Do pregnant women have the opportunity to keep in touch with friends or family members abroad, if required?

### **SINGLE PARENTS WITH MINOR CHILDREN, WOMEN AND FAMILIES**

**We have no information about this subject.**

#### **Interviews**

Are all family members interviewed separately?

#### **Interpreters**

Are professional, culturally sensitive, female interpreters available for women?

#### **Family friendly accommodation**

Is accommodation family-friendly?

**Both centres try to find suitable apartments' for single mothers and fathers with their children.**

#### **Play facilities**

Are there play facilities available for children?

**In every Hero centre there is a kinder garden available. Not every reception centre is a Hero location.**

#### **Child care**

Is child care available if required?

**See previous information**

#### **Educational opportunities**

Are educational opportunities available for single mothers and other women?

**Because there is child care parents are entitled to go to school.**

**They don't have to pay for this facilities.**

#### **Children's schooling**

Are parents consulted with around matters regarding their children's schooling?

#### **Safety**

How is the safety and security of women taken into account?

#### **Privacy**

Is there sufficient privacy for single women and families?

What are the arrangements for toilets and washing areas?

**The privacy is guaranteed because of the individual apartments.**

#### **Freedom of movement**

Do single women have the same freedom of movement as single men and families?

**See previous info.**

### **Dispersal**

What is the impact of potential dispersal policies on pregnant women?  
How are pregnant women transported if dispersed?

**We have no information about this.**

### **Detention**

What is the impact of potential detention policies on pregnant women?  
How is this dealt with?

### **Sexual health counselling**

Do women/ men receive information/ counselling about sexual health and family planning options?

Do women/ men have access to their preferred forms of contraception?

**The nurse in both locations can talk about these subjects with the clients, they do that individually. Condoms are free available.**

### **Children's clothing**

Are children provided required clothing?

### **Financial support**

Is the financial allocation sufficient to cover for family-related needs?

How are financial allocations distributed to families?

Do mothers receive a personal share of the financial allocations?

### **Information and psycho-social support**

Do single mothers and families have access to services by professionals such as nurses, counsellors, social workers, etc.?

Do women receive information on their rights in the host country?

Do they have access to women's support services?

What kinds of opportunities exist for women to interact with women in the host community?

Are there activities at the reception facility that bring together women as a group?

### **Recreational activities**

What kinds of recreational activities are available for women?

### **Good practice**

Are there specific examples of good practice relating to pregnant women, families, single mothers or women in general?

- **The single mothers live together, in separate apartments, so they can support each other.**
- **The staff handles the singles mothers/ fathers individually with a lot of attention.**
- **In both centres suitable apartments has been found**
- **In both centres baby caddy has been provided.**