
Report of exchange programme in Ireland



October 2007

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Itinerary

Wednesday 10th October

- Welcome meeting and introduction presentation on the work of the Reception and Integration Agency (RIA).
- Visit to Baleskin Reception Centre in Dublin

Thursday 11th October

- Visit to the Operations section of RIA to explain the work of the unit
- Visit to the Office of the Refugee Applications Commissioner (ORAC)

Friday 12th October

- Meeting with two staff of the Health Coordination Unit of RIA
- Meeting with one of the social workers of the Health Services Executive who care for unaccompanied minors

Monday 15th October

- Visit to the repatriation unit within INIS
- Visit to Spirasi – the NGO providing support for victims of trauma and health information services

Tuesday 16th October

- Visit to Athlone Accommodation centre

Wednesday 17th October

- Time in the office to complete the report

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1. Introduction

Our study exchange was held in Dublin, Ireland from the 10th October until the 17th October. We were hosted by the Reception and Integration Agency (RIA) which is part of the Department of Justice, Equality and Law Reform. They arranged for our meetings in order to provide us a general overview of the asylum process in Ireland.

The main characteristic of the Irish asylum system is that they opted out of the EU Directive 2003/9/EC pertaining to the minimum standards of reception for asylum seekers. RIA immediately highlighted that one of the reasons for not adopting the directive was that certain elements of the directive (for instance, leave to work) may have encouraged more migration to Ireland at a time where they were trying to cope with the burden they already had.

In this report we will be giving an overview of the Irish asylum system. It could be highlighted that the Irish system does not allow the asylum seekers to work. They are considered asylum seekers during the entire process up until they have exhausted the last appeal option. This may take a number of years, an average of approximately four years. Therefore, due to the fact that they cannot work and they are still considered asylum seekers, they are beneficiaries of the state system during this entire time. Asylum seekers all benefit from direct provision in the reception and accommodation centres which means that all of their daily requirements are paid for by the state.

In accordance with this, we will describe the two kinds of centres; the Reception Centre and the Accommodation Centre since we had the opportunity to visit both.

While noting that the focus of this exchange was on vulnerable persons and people with special needs, the Irish system does not focus especially on vulnerability rather the specific needs of certain cases are addressed through mainstream services, for example children with special educational needs are allocated to mainstream schools which address these needs. The idea is to try not to create special statutory services specifically for asylum seekers, rather to integrate them into regular services which in turn links them to their local community, such as GP's, schools and mental health services. As outlined in this report, the only vulnerable group singled out are the unaccompanied minors which have specific services for them.

Support groups and NGO's play a large role in addressing and supporting the needs of vulnerable asylum seekers.

We would like to thank all of the staff of RIA for their kind support and hard work to organise this exchange and to provide us with a holistic overview of the Irish Asylum system. Thank you to all of the people of different organisations that took time out of their busy schedules to meet with us.

1. COUNTRY PROFILE / STATISTICAL DATA

Please provide data on the following for the whole of the country, if available, unless otherwise specified. This information will be used to compile a basic country profile database which can be updated yearly.

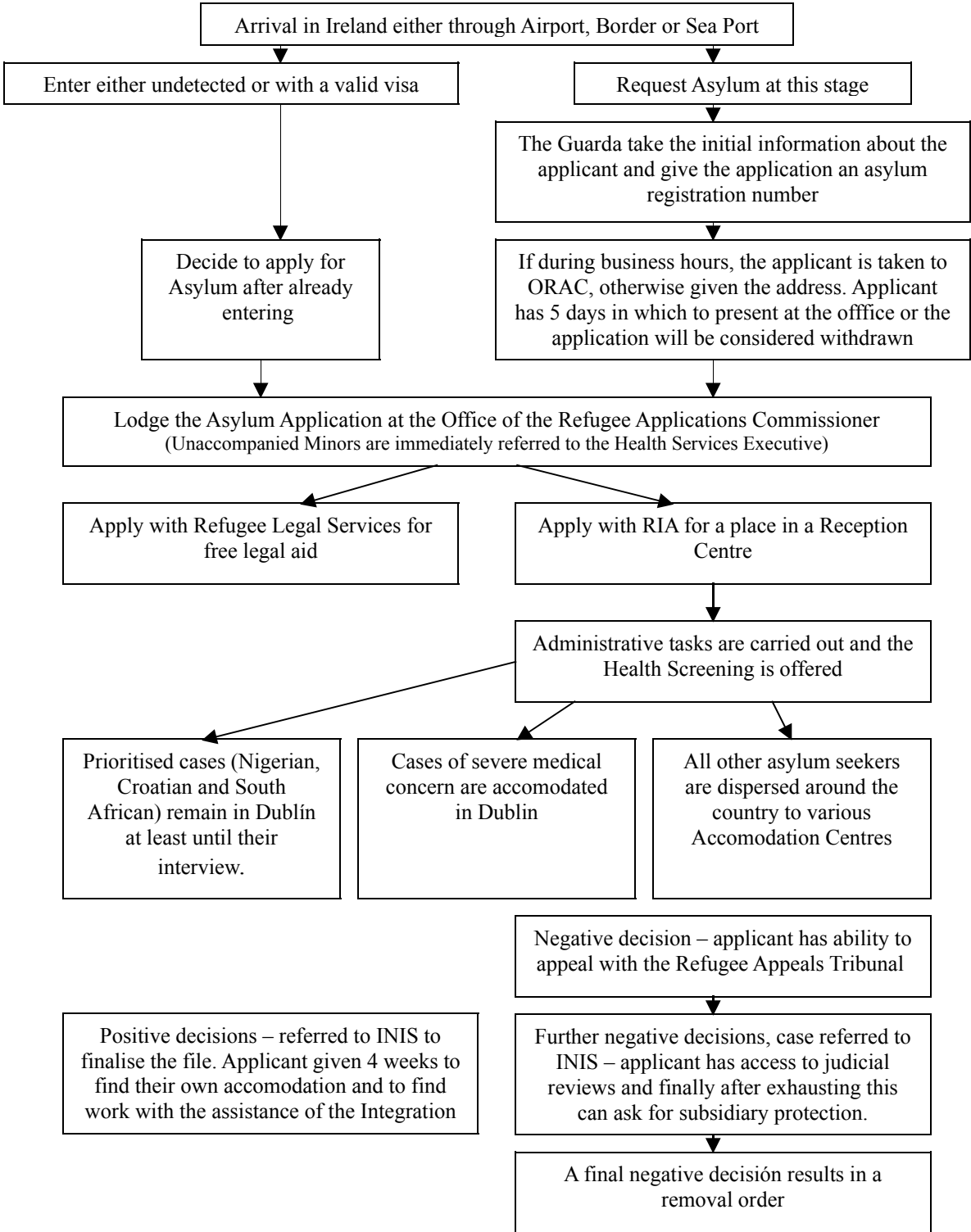
General Information:	
Country:	Ireland
Organisation, address, website:	RIA. Reception and Integration Agency. Block C. Ardileun Center, 112-114 St Steephens Green. Dublin 2. www.ria.gov.ie
Governing institution:	Department of Justice, Equality and Law Reform
Total number of employees:	600
Annual budget (EUR):	71.000 euros
Daily accommodation costs per one asylum seeker (EUR):	Between 11.86 Euros to 39.42 Euros per person per day depending on the type and size of accommodation.
Asylum grant proceedings:	
Legal duration of asylum grant proceedings:	Indfinetely
Organisation liable for asylum grant proceedings (if other than above)	ORAC: Office of the Refugee Application Commisioner
Legal regulations governing asylum grant proceedings, their last amendment	The Refugee Act 1996
Total number of asylum applications during: (indicate numbers and year)	1-01-07/31-09-07: 2946
Total number of granted asylum in accordance with the Geneva Convention during: (indicate numbers and year)	1-01-07/31-09-07: 280
Total number of provided subsidiary forms of protection: (indicate numbers and year)	N/A
5 top countries of origin of asylum seekers: (1-01-07/031-09-07))	1.Nigeria (727) 2.Iraq (204) 3.China (181) 4.Pakistan (142) 5.Georgia (136)
Accommodation of asylum seekers	
Total of accommodation capacity (number of beds):	31-08-07: 6338. Flexible according with need
Types of accommodation: (more then one answer possible)	<input type="checkbox"/> houses <input checked="" type="checkbox"/> hotels <input type="checkbox"/> bungalows <input type="checkbox"/> boats <input checked="" type="checkbox"/> caravans <input type="checkbox"/> tents <input type="checkbox"/> military barracks <input type="checkbox"/> (shared) rooms <input checked="" type="checkbox"/> other (specify): guests houses, hostels, system builds, holidays center and former colleges/nursing home, self-catering apartments
Number of facilities:	60
Average length of stay of asylum seeker in asylum reception facility:	At the moment most people have been in accommodation centres for 2 years.
Asylum seekers has possibility to live in private housing:	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no
Asylum seeker's freedom of movement:	<input type="checkbox"/> without restriction <input checked="" type="checkbox"/> restricted: daily registration <input type="checkbox"/> obligatory permanent presence in asylum facility <input type="checkbox"/> detention

Services provided:	
Types of catering:	<input type="checkbox"/> individual cooking <input type="checkbox"/> catering provided <input checked="" type="checkbox"/> combined
System of provision of financial and material aid:	<input type="checkbox"/> cash <input type="checkbox"/> payment in kind <input checked="" type="checkbox"/> combined
Asylum seeker's access to the labour market:	<input checked="" type="checkbox"/> no <input type="checkbox"/> yes, specify conditions:
Lessons of local language available:	<input type="checkbox"/> compulsory <input checked="" type="checkbox"/> voluntary <input type="checkbox"/> none
Vocational training available:	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
Extent of health care provided:	<input checked="" type="checkbox"/> standard – same as health care provided for citizens <input type="checkbox"/> different, specify: some mental health provisions by ngos
Obligatory initial medical examinations:	<input checked="" type="checkbox"/> none <input type="checkbox"/> lung X-ray (TB) <input type="checkbox"/> venereal diseases <input type="checkbox"/> taking of biological material samples <input type="checkbox"/> other, specify:
Vulnerable groups:	
Definition of vulnerable groups – please indicate the categories which are considered vulnerable in the reception system:	<input checked="" type="checkbox"/> Unaccompanied minors <input type="checkbox"/> Single women <input type="checkbox"/> Pregnant women <input type="checkbox"/> Families with children <input type="checkbox"/> Elderly <input type="checkbox"/> Incomplete families (single women with minor children) <input type="checkbox"/> Mentally handicapped <input type="checkbox"/> Physically handicapped/disabled <input type="checkbox"/> Victims of trauma and other people with mental health problems <input type="checkbox"/> Others, specify: extreme medical conditions: cancer, end of HIV
Please indicate number of asylum seekers for each category a) the whole country b) the reception facility – when available	
Unaccompanied minors	
Single women	822
Families with children	31-08-07 3370 (total number of people that are in families)
Elderly	25
Incomplete families (single women with minor children)	748
Mentally handicapped	N/A
Physically handicapped/disabled	N/A
Victims of trauma and other people with mental health problems	N/A from RIA. 377 people accepted as victims of torture during 2006 by Spirasi (total number is unknown).
Others, specify: severe medical conditions	N/A

2. DESCRIPTIVE REPORT

3.1 Overview of the Asylum Procedure in Ireland

The Irish asylum procedure is common for most asylum seekers. Some exceptions with regards to accommodation are made for people that have prioritised cases or that may be experiencing an extreme level of medical vulnerability. Unaccompanied minors follow the same legal procedure however are cared for and accomodated by the Health Services Executive rather than the RIA.



3.2 Arrival in Ireland

3.2.1 Arrival in Airport – Application made at entry point

Some asylum seekers apply for asylum at their point of entry. The applicant lodge their request with the immigration section of the Irish Gardai that are always posted at the points of entry. The Gardai take the initial information about the applicant such as their name, date of birth, country of origin and other basic details. The Gardai then issue the asylum seeker with the asylum application number which all asylum seekers are given. This number will refer to their file for the extent of their asylum process.

If the asylum seeker arrives during business hours (which are Mon-Fri, 09h00 until 17h00), the asylum seeker is taken to the Office of the Refugee Applications Commissioner (ORAC) by the Gardai. If the asylum seeker arrives after business hours, then the address of ORAC is given to the asylum seeker and they have five days in which to present themselves at ORAC in order to finalise their application. If the asylum seeker does not appear within this time, their application is considered withdrawn and therefore the applicant does not have a regular status in Ireland and if found by the Gardai, will be considered illegally residing in the country.

For those arriving after business hours, the Gardai phone RIA in order to arrange for some temporary emergency accommodation so that the asylum seeker has somewhere to sleep until they go to ORAC. RIA have a mobile phone especially for this purpose which the staff of the operations section of RIA take turns to rotate during the evenings and weekends.

3.2.2 Enter the country regularly or undetected – and apply for asylum from within

Most asylum seekers in Ireland enter on regular visa's for work or holiday. They then decide to apply for asylum from within Ireland. Some others enter the country undetected by the Gardai and also apply for asylum while in the country.

Both of these groups follow the same procedure as above. In order to make their application, they must go to ORAC. Their initial information is therefore taken at the office instead of at the border.

3.3 Lodge Application with the Office of the Refugee Applications Commissioner

The Office of the Refugee Applications Commissioner is a large old Victorian Building. In order for asylum seekers to lodge their application, they are required to come through to a large white tiled room with wooden chairs lined up side by side facing the front of the room, where there is a long desk with a huge glass pane reaching to the ceiling. Beyond this glass sit the ORAC staff waiting to process the initial paperwork for the asylum application. This desk is separated into about 8 'pods' by large pieces of wood. These pods separate each applicant from the other while speaking to a member of ORAC staff. The staff smile from beyond the glass and are quite welcoming.

There are a couple of childrens toys in the corner. People of several nationalities are sitting on the waiting seats, staring at the backs of the applicants that are sitting in the pods. There is a security guard calmly wandering around.

All applications for asylum must be processed from this office, therefore even if the Gardai have taken the initial information, applicants must come through this office.

As mentioned above the initial interview is either conducted at the point of entry or when the applicant arrives at the office. During the same visit, the asylum seekers fingerprint is taken if they are over 14 years old then both; saved on a chip on the ID card and sent to the EURODAC . Their photo is taken which is then both printed onto the ID card and saved on the database. They are given a Temporary Residence Certificate which has a validity for approximately a year. However this is renewable until the end of their asylum process. At this point a date is set for their substantial interview. Currently, prioritised cases have interviews set within 9-12 days of their application date. Non-prioritised cases are set for approximately 8-10 weeks from the date of application. Previously, the dates would be determined at a later stage and would be sent to the applicant via post, however to avoid the problem of people alleging they were not aware of their interview, the date is now set at the very beginning.

The applicant is also given a questionnaire which they are required to return to the office before their substantial interview.

After this process has been finalised, the asylum seeker is directed through wooden swinging double doors into a small wide corridor that leads to the offices of the Refugee Legal Service and the Reception and Integration Agency.

3.3.1 Refugee Legal Service (RLS)

The Refugee Legal Service is a free legal aid service available to all asylum seekers. Established by the Legal Aid Board, they provide confidential and independent legal services to persons applying for asylum in Ireland. They have an office in ORAC which all asylum seekers are encouraged by ORAC to utilise.

RIA informed us that not all asylum seekers wish to utilise this service. The Legal Aid Board is an independent statutory body, however some asylum seekers still choose to utilise external legal services at their own expense.

3.3.2. Reception and Integration Agency (RIA)

The Operations section of The Reception and Integration Agency (RIA) arrange all accomodation related matters. Therefore they have an office in ORAC for applicants to access reception centres as soon as their application is made. Initial reception is usually at one of two reception centres in Dublin. For regular cases this could be for a couple of weeks.

- Dispersal policy: case by case basis

After the time at the reception centre comes to a close, asylum seekers are dispersed around the country in accordance with the government's dispersal policy. This policy was created after a 2000 crisis due to the huge influx of foreign nationals residing in Dublin which created a housing problem which consequentially resulted in homelessness. Before an asylum seeker is dispersed the individual case is assessed by the operations section of RIA and also the medical screening team at the reception centre. Suggestions are made regarding their accommodation requirements in relation to their language skills, family make-up and the services provided in various counties. Therefore as much as possible, individual needs are met by the dispersal. However, dispersal is not carried out for severe medical or psychological cases which have become settled in Dublin and linked to services. For instance, currently there are asylum seekers with severe cancer that remain in Dublin as well as women experiencing problematic pregnancies.

They try as much as possible to have an even amount of accommodation centres in each county. RIA targets for 0.01% of the native population to be represented by asylum seekers as this amount is able to be absorbed by the local community. However in some areas the total greatly exceeds this percentage.

Whereas a large amount of asylum seekers granted leave to remain or refugee status remain in the local community, this policy does not prevent people from eventually moving back to Dublin after they receive leave to remain or refugee status.

After someone is dispersed, community welfare provides transport and RIA provide overnight accommodation whenever someone has an official appointment in Dublin.

RIA's other role is to manage the contracts of the accommodation and reception centres. Some centres are state owned buildings and the management is tendered by a private company while others are commercial centres, prior hotels and holiday centres which are hired by the state for the accommodation of asylum seekers. Therefore these contracts need to be managed and close supervision of the centres is followed. RIA enforce rigorous unannounced checks twice yearly by their inspectors and also hire an independent company which check for HACCP. Centres have commented that they are checked more rigorously than the commercial hotel industry.

3.4 Placement at a Reception Centre – Dispersal to an Accommodation Centre

3.4.1 Description of the Reception Centre

The *Balseskin Reception Centre* is located within 5 km of the airport and is a purpose built state-owned facility. It is positioned on a 7acre site surrounded by greenery, with tall trees protecting the centre from the country road. It comprises 4 accommodation blocks, medical centre, cafeteria/administration building, 2 playgrounds and various playing fields. There are 140 bedrooms, with various configurations of 2, 3, 4 and 5 beds. Some have ensembles, while others have to share bathrooms. They have accommodated over 80 different nationalities.

Winding around the buildings are sealed pathways which have been painted by staff with bright colours and games for kids to play. While we were visiting, the atmosphere was very quiet, with only two children running around, hiding from us. Several men of different nationalities were playing basketball on the court. The two women we saw had children with them. When in the administration block, we walked into an English class taught by a staff member of the centre.

The facilities were extremely clean. The manager explained that their contract stated that if the residents did not clean up after themselves, the staff were to clean for them. All of the furniture was in very good condition. We had the chance to see the food being prepared for dinner. It looked very delicious and was prepared by a man in full chef outfit.

In the reception area of the administration building, there are 3 computers connected to the internet which were all being used. There were several wooden chairs around the walls of the room with a plasma television mounted to the wall. All of the walls of this building were full of notice boards with activities and volunteer opportunities available. There were also many notices regarding health, with special notice of the child feeding guide.

3.4.2 Description of the Accommodation Centre

We visited the *Athlone Accommodation Centre* which is located in the middle of the country, 2 hours drive from Dublin. It consists of 100 mobile homes positioned 10 homes wide by 10 homes deep. The mobile homes are either 4 or 6 berth therefore accommodate individual family units. It is a state-owned centre with the management contracted by a private company.

The condition of the houses were good for a family. They have a full kitchen inside which the family has the ability to utilise. There is a bathroom in each home and a living room area. They have heating, hot water and all commodities. RIA have recently renovated the centre in order to fulfil health and safety specifications. We visited three homes and in these homes each child was given their own bedroom which they decorated themselves. A few of the homes were decorated by the family, some had pot plants on the stairs and others had stuck things in the windows. Between the homes there is a large amount of space which is tarmacked and is very plain.

The administration building houses the kitchen, canteen, common areas, health centre, small gym, and two multi-purpose rooms. It also has a room specially made to hold the cooking classes run by a local nun. There were a few notice boards with reminders and notifications on them. In the canteen there were several posters with photos of activities held at the centre.

Out the front of the administration building there is a large carpark filled with staff and resident cars.

In a separate building there is a creche for small children and the office of the community development worker.

The *creche* is attended by three care workers and one of the residents also helps out. There were fourteen children when we visited and due to the large number of children at the centre, they rotate the

days the children attend. The young kids attend in the mornings while in the afternoon, the older children (primary school) attend.

The *community development worker* is funded by the European Refugee Fund (ERF) and is a project with a three year cycle which is ending in November. Her role is mainly to link the residents with the community through information, advocacy and building up self confidence. She also works with around 14 families of refugees that have settled in the community. This project was developed and is run by the local support group; Harmony. She also helps to coordinate vocational training and recreational activities. She mentioned that this is difficult as funding for asylum seeker projects is very difficult to obtain and are capped at 4,000 Euros per project. In the past there have been courses such as hairdressing, handcrafts, child care and English language. They have plans for 2008 for a course in massage and complimentary therapies. They find it very challenging to find activities that attract men as typically they desire vocational courses which require certain criteria to be met which they do not fulfill. To try to facilitate access to the community, she works hard to involve different statutory and non-statutory organisations in the responsibility to cater for asylum seekers.

Transport is provided by RIA four times a day during business hours to the town centre. There seems to be an agreement with the public transport service in the area whereby the ticket used to travel to the town centre may be used for the return on any of the other buses.

3.4.3 Medical screening

- Non-compulsory but all asylum seekers are informed of their ability to avail immediately upon arrival while in the reception centre. Also, during their time at the reception centre, Spirasi carry out a weekly health information program which also informs the new comers of the medical facilities and their availability.
- Offered to all people in reception.
- Approximately 72% of asylum seekers avail of this.
- Screening is conducted by the health nurse.
- For those that do not avail of medical screening in Dublin reception centres, it is available in all Health Board areas therefore asylum seekers may avail at a later stage while in the accommodation centres.
- Screening covers;
 - Hepatitis
 - TB – active and latent
 - HIV
 - Immunisation status (vacillera and rubella)
 - Other ailments and conditions
 - Psychological and psychiatric problems.

Asylum seekers may select the screening they wish to undergo.

- Appropriate referrals are made to health services such as psychological, psychiatric, ante-natal and severe medical conditions such as cancer.

3.4.4 Health in the centres

- General Health

All asylum seekers are entitled and have full access to the regular health care system available to all Irish citizens. A district nurse is assigned to the area and visits the centre regularly. He/she can make referrals to other services. They are all assigned a GP whom they can access independently.

- Children

Parents are provided with feeding guides prepared by the Health Promotion Unit. They outline the standards that are applicable to all children, not only asylum seeker children.

In the reception and accommodation centres, powdered milk is not distributed for children over the age of 12 months. However some parents will still buy the milk themselves, so the public health nurse monitors them and try's to explain to the parents the suggested way of feeding.

The public health nurse visits the centres on a regular basis.

- Special Dietary requirements

Special needs are met in the centres by the kitchen staff. It is suggested that the asylum seeker obtains a dietary form from their doctor so that the appropriate needs can be met.

- Ongoing medical needs

The operations unit of RIA facilitate the arrangement of overnight accommodation for people that need to come to Dublin for appointments and can also arrange to keep someone in Dublin longer term for ongoing treatment.

The Social Welfare office facilitate the vouchers for transport into Dublin.

- Pregnant women

They are entitled and have full access to the regular services for Irish pregnant women. Some women experiencing problematic pregnancies are kept in Dublin until they give birth before they are dispersed.

In the case of a chickenpox outbreak in centres, the centre becomes quarantine and this especially applies to non-immune pregnant women. These women are informed of the risks of chickenpox, and if they wish are then transferred to other centres. If they refuse to move, they are asked to sign a disclaimer.

As much as possible, they avoid the dispersal of all women to quarantine accommodation centres as it may be possible that a woman is in her early stages of pregnancy without knowing.

- Severe medical conditions.

This is really the only category of persons that are considered in need of special accommodation. Upon a doctors recommendation, self catering accommodation is available. Sometimes this recommendation is cross checked by an independent doctor. Each case is treated individually so no standard exists.

- Mental health and victims of torture

There are two institutions accountable for these problems.

St. Brendan's hospital in Dublin is the only Health Board psychological and psychiatric service dedicated to asylum seekers and refugees. It usually deals with more acute cases. Asylum seekers require a referral from a doctor in order to utilise this service. The staff of this unit have been specifically trained in cross cultural mental health and communication.

For dispersed persons to utilise this service, the asylum seekers speaks to social services who arrange the travel voucher and request RIA to arrange for overnight accommodation.

Asylum seekers that have been linked to this service and are undergoing ongoing treatment are not dispersed, but remain in Dublin.

Spirasi (Spiritan Asylum Services Initiative) is an NGO founded by the Holy Ghost Fathers and they specialise in counselling victims of torture. For more information, see below.

3.4.5 Education

In Ireland, all children under the age of 17 years old are entitled to free primary and post-primary education. All children from the ages of 6 years to 15 years are required by law to attend school.

- Primary

Asylum seeker children attend regular schools. All primary schools are based on a particular religious ethos for example; Roman Catholic, Church of Ireland, Muslim and in the 'Educate Together' schools, a multi religious ethos is found. Over 90% of schools are Roman Catholic. Non-catholic students may have the ability to not attend the religion classes.

Learning problems are addressed by the school. If available, the school will provide a support teacher to work with the child. If further help is required, a psychologist from the Department of Education and Science will be asked to assist. Athlone Accomodation Centre has two students that are attending special education schools in the area.

For school books and uniform, the Department of Education and Science provides an annual grant to assist with some of the costs of text books if parents can not afford to pay. This service is available to Irish parents as well.

Children from Athlone Accomodation Centre were dispersed to the different schools in the area rather than all asylum seeker children attending only one school. Schools are encouraged to enrol non-national children because they are awarded with more funding for English teachers and other support for the more students they have. Athlone Accomodation Centre arranges for the enrolment of the children so that this dispersal can happen. They are also able to enrol children during the scholastic year.

Children use the above mentioned transport to travel to school.

With regards to language problems, the Department of Education and Science provides a language support program to enable the school to provide extra language classes. Most schools syllabus are taught in English.

- Post Primary Education

All young people til the age of 15 years are required by law to attend a school.

The same considerations are provided as for primary school with regards to language problems, school books and uniforms.

Children of all ages can access homework assistance in Athlone Accommodation Centre through the Homework Club which meets in the canteen every day after school. It is run by volunteers. Children also seek help from the staff of the centre to finish their homework.

- Tertiary education

Asylum seekers are not entitled to free education at this level. If they wish to study at this level they must find a sponsor to pay the fees as they must pay the non EU national fees and satisfy the education requirements.

Irish citizens pay a registration fee every year, but the education is free.

Ireland has two main vocational training providers; Foras Aiseanna Saothair (FAS, Training and Employment Authority) and Vocational Education Committee (VEC). FAS offer vocational education and English language classes for adults but only refugees and those granted leave to remain are entitled to utilise this service. VEC may offer places to asylum seekers depending on the area and if they have available places in the course. Community groups offer some classes to asylum seekers and these groups can apply for funds.

3.4.6 Social Welfare

The social welfare section are accountable for allowances and for any other costs incurred by asylum seekers. This is also the case for Irish Nationals that receive welfare cheques. They are available at the reception centre three times a week to help asylum seekers access this welfare. If the accommodation centres are not located near a district office, then staff of the department will visit the centre on specific days.

Asylum seekers receive 19.10 Euros per adult and 9.60 Euros per child, per week.

If people are in self catering apartments, they are also assisted with a regular pension so that they may purchase food and their daily requirements. It is noted that only a nominal amount is subtracted from this cheque and that in effect, this group of asylum seekers receive more money than Irish people in the same situation as they are not paying for rent or utilities.

3.4.7 Recreation

In both of the centres we visited, children were catered for through the day care centres with trained professionals. In Athlone, in July they ran a summer camp for children. Harmony organise a sports tournament. Another support group, New Horizons, also try to get a ticket price reduction for the local swimming pool.

There is currently no playground in Athlone, however they have procured the funds and are now planning the development.

Adults recreation consists of support groups coming into the centre and creating courses and activities such as cooking and gardening. There is a small gym in Athlone with two machines and a table-tennis table. Adults are encouraged to volunteer in both of the centres. In Athlone, once a year, they run an Open Day which allows the local community to visit the centre and try different food and meet the residents.

3.4.8 Domestic Facilities

In Baleskin, residents were not permitted to take food from the canteen out. Therefore all food had to be consumed inside. They explained that this was due to food hygiene standards which requires the chef to be responsible for the food until its consumption. Also because the residents do not have kitchen facilities to be able to cook the food properly. However, they have a communal kitchenette which contains a microwave and fridge where they still can keep food.

In Athlone, residents were able to take prepared food from the canteen back to their homes. The chef prepares food that can be recooked and adapted into other dishes so that the residents can add their own spices and ingredients according to their tastes. We witnessed a lunch time whereby every resident came with a shopping bag and plastic containers to be filled with the food. No resident sat to eat in the canteen. Their weekly menus are displayed on the wall of the canteen and includes some national dishes of different countries. There is a staff member that checks off each persons name as they come for food. This is so the residents can all be accounted for and to monitor them.

Washing machines in both centres were accessible to all at all times. In Athlone, the washing machines were allocated according to a roster whereby each family were given a day in which to use them. All soaps and detergents are provided by the centres.

3.4.9 Time to stay

- Regular cases

Usually spend a few weeks in the reception centre while the administration of their claim is carried out. They are then moved to accommodation centres where they stay indefinitely until they either receive a positive decision or have reached the end of their appeal process with a negative decision.

Those who receive a positive decision are given four weeks notice to prepare themselves with accommodation and employment. The integration unit of RIA carry out a transition program to make sure that the refugee or person granted leave to remain, leaves the centre in a good condition.

A warning letter is issued 15 days prior to being called for repatriation. Those at the end of the process appealing their negative decision are given a return order if they agree to voluntary return. They are issued a deportation order if they do not agree and therefore must leave the centre. In reality they do not leave the country and remain irregularly. If they are caught by the Gardai, they will be put in prison.

- Prioritised cases

The Refugee Act makes provisions for the Minister of Justice, Equality and Law Reform to prioritise certain countries if the country is deemed a safe country or if there are a large amount of applications that result in negative decisions.

These countries currently are;

- Nigeria
- Croatia
- South Africa

Their applications are to be processed through ORAC and RAT within 16 weeks. Therefore the applicants remain in Dublin reception centres. They are required a weekly sign-on procedure in the centre where they are living. Someone from operations will go to the centre to take the signature.

If they elongate their case with judicial reviews and appeals, then they will eventually be moved to the accommodation centres.

3.5 UNACCOMPANIED MINORS

All unaccompanied minors are looked after by the Health Services Executive (HSE). They are referred to this service by Garda or by ORAC. ORAC will terminate any initial interview as soon as the asylum seeker reports to be a minor and will only resume the interview once HSE is present. HSE do not require any age assessments or proof in order to verify the age of the children. However HSE do send some referrals back to ORAC if they are not satisfied that the person is a minor.

HSE is made up of 1 psychologist, 3 Team Leaders and 12 Social Workers. Their offices are in the former Baggot St. Hospital. They have two service streams. Firstly, Family reunification for the unaccompanied minors and secondly, separated child seeking asylum.

3.5.1 Family Reunification

This service consists of linking the minor with his/her family. Referrals come in a number of ways;

- The separated child reports that his/her parent is somewhere in Ireland
- The parent of a separated child reports that their child has arrived, this includes some cases whereby the parent presents to the office with the child

If there are suspicions that the child could be a victim of trafficking for prostitution or for domestic servitude, DNA testing is available. This is not done for all cases due to the cost, as the test is sent to the UK. Some reasons for suspicion could be; the fact that the parents have never reported a child and suddenly they have one in their care. Trafficking is an issue which the social workers are aware of as there seem to be a noticeable number of cases. We were informed that one woman is going to be deported this week as a result of trafficking charges.

Once a family is reunited there is no follow up and no monitoring.

3.5.2 Separated child seeking asylum

Once the child has come to the service, HSE make an initial intake assessment where they look to address any immediate needs such as medical care.

There are four ways to accommodate these children;

- *Hostels*; can accommodate up to 60 children. They do not have qualified staff and are supervised by a manager.
- *Foster Families* some unaccompanied minors are placed in foster care the same way that Irish children are.
- *Supported Lodgings* is for children 16 years and older until the age of 18 and relies on the child's independence. They only provide food and a bed for the minor.
- *Residential units* are small residents for no more than 6 minors assigned a careworker. They are usually for the younger separated children, and have separate units for boys and girls. They are planning to open three more of these units in the near future.

All accommodation is direct provision and the children receive a regular adolescent allowance from social welfare.

When the separated children reach 18 years old, they are transferred to RIA whereby they may be dispersed. HSE advocate to keep the time-out minors in Dublin so that the social workers can

continue followup and also because they worked hard to establish a social network and it is problematic to uproot them. As much as possible RIA try to keep the timed-out minor in Dublin.

3.5.3 Mental Health

For this group of asylum seekers, mental health is a very big problem. There is a constant instability and uncertainty that affects them. Inpatient psychiatric care for all adolescents in Ireland is lacking. Some adolescents are having to be placed in adult wards while others are unattended.

Alcohol abuse is becoming an important issue.

Psychological services are available at St. Brendan's hospital accessible through a social worker's referral. She is a specialist in child asylum seeker psychology.

3.5.4 Information

Social workers accompany the child through every stage of their application so therefore are able to advocate on their behalf and to provide all of the information regarding their rights.

3.5.5 Interpretation Services

HSE staff and managers of the accomodation facilities have access to the phone-in translation service.

3.5.6 Children's voice

During ORAC interviews, the child is interviewed in a HSE approved child-friendly room. During the interview they are able to request a break at any stage of the interview.

This information is provided by one HSE social worker and we met in the Baggot St. Hospital. We therefore did not see any accommodation facilities which may have been able to furnish this section with more information.

3.6 OTHER INSTITUTIONS INVOLVED

3.6.1 Irish Naturalisation and Immigration Service (INIS)

INIS come into contact with all asylum application files.

Following a positive recommendation from ORAC, INIS receive the file in order to provide the refugee with information on their rights.

If ORAC give a negative recommendation, the file goes firstly to RAT for the appeal. Following this appeal, the file moves to INIS who will then act upon the result of the appeal.

Once an applicant exhausts the appeal system, there are four options;

- Subsidiary Protection
- Humanitarian leave to remain
- Voluntary Return
- Deportation Order

Before a person is deported, they receive a '15 day letter' which notifies them that they have reached the end of their asylum process and are consequentially going to be deported. Even after the applicant receives a deportation order, they have the ability to seek a judge to apply for subsidiary protection or humanitarian leave to remain. The judge grants an injunction order. This has happened at the very last minute, with only an hour remaining until flight.

Deportations are arranged with a privately contracted charter flight company. This company was contracted through an EU wide tender competition. The flights are state funded.

The main deportations are to Nigeria, Brazil and China. Of the three, Nigeria is the only country returning people that have applied for asylum.

The planes are accompanied by a doctor, nurse and members of the Irish Garda.

Returns are made possible to Nigeria through a diplomatic arrangement between Ireland and Nigeria. Irish delegate visited Nigeria several years ago where they agreed to provide immigration related training and support in exchange for cooperation with issuing travel documents for their repatriation. Therefore when a deportation list is created, the list is sent to Nigeria in order for the travel documents to be arranged.

3.6.2 Spiritan Asylum Seeker Services (SPIRASI)

Established in 1999 as a result of the increasing number of asylum seekers. They started out with the provision of education to asylum seekers, especially English language classes (Centre for Education and Integration of Migrants - CEIM). During these classes it became evident that there were mental health issues prevalent among the students. Consequentially, in 2001 they established the Centre for the Care of Survivors of Torture program (CCST). In 2002 they started the health information program which takes them to all of the accomodation and reception centres to inform the residents of their ability to access health care and their rights in relation to this (Centre for Health Information and Promotion - CHIP). Asylum seekers also become more aware of the voluntary medical screening which some then decide to avail of once Spirasi inform them.

Spirasi also work for public awareness on the topic of torture and they carry out training on this specific topic for professionals (GP's, Solicitors, teachers, etc), students and ORAC staff. They also work with ORAC to offer debriefing sessions to minimise the secondary trauma.

As a result of these three service areas, they provide service to 4,000 people per annum. Spirasi meets 50% of all asylum seekers through their health information program. Each client receives an average of 15 hours of service per year and Spirasi have an average of 300 cases open at any one time.

Spirasi funding is made up 40% of HSE funds, 40% of the EU Refugee Integration Fund and 20% from donations and fundraisers.

The Survivors of Torture service is based only in Dublin, however 40% of their clients come from Cork or Limerick. Therefore Spirasi try to ensure there are local links with the mainstream services for the client too.

Asylum seekers are referred to the survivors of torture service either by their GP or by their Solicitor using a referral form. If asylum seekers self refer, they are sent back to their GP or solicitor because this ensures this link exists.

After the referral, the Remit Panel which meets every week, take a decision whether to take on the case. This panel consists of a head physician, head counsellor and the manager. They assess the referral according to the United Nations Convention Against Torture (1984) and to whether they can fulfil the needs of the client. Last year out of 507 referrals, 377 were accepted. If the Remit Panel do not accept a referral, they write back to the GP or Solicitor suggesting other providers that may be more appropriate.

Once a case is accepted the client attends a medical assessment conducted by one of Spirasi's physician's. They have 8 session physicians and 1 part time physician which are gender balanced to provide choice for the client. This is usually booked for the next day. In this assessment they assess for the testimonies, the needs of the client and the internal referrals. With all this information they decide on how to manage the case. They also report back to the GP regarding medical needs that were identified during the assessment.

This case then moves to the Case Management section that meets the client to introduce them to the services and then coordinates the Psycho-social assistance and the Therapeutic Services. The psycho-social assistance involves advocating and accompanying the client to fulfil their basic primary needs for instance; accommodation, social benefits etc. This staff consist of; 1 psychosocial coordinator and 12 outreach volunteers. Once a client has their basic needs addressed, therapeutic services become more effective. These services could be; Individual Counselling, Art Therapy, Support Group to cope with stress, Group Therapy separated for males and females, Complimentary Therapies such as Reflexology, Reiki and Massage.

Medical Legal Assessments are also available to asylum seekers. The GP or the Solicitor have to request this assessment and the Remit Panel must consent to it. The client is evaluated in accordance with the Istanbul Protocol (1990) and the report is then provided as evidence to RAT after a first instance negative decision from ORAC. Spirasi are trying to work with ORAC in order for this report to be accepted as evidence in the first instance. Of 377 cases last year, only 113 Medical Legl Assessments took place.

The services Spirasi provide are accessible to their clients. RIA cooperate by providing overnight accommodation and social welfare cooperates by providing transport for the client.

60% of clients require an interpreter. Spirasi have a group of 5-6 interpreters who have been trained by Spirasi and form part of the staff. Spirasi provide supervision for these interpreters. The interpreters sign confidentiality forms. If other languages are required Spirasi use the telephone translation service.

Criteria to work with Spirasi is to have experience working abroad with other cultures, preferably with international humanitarian aid. Therefore all staff are experienced with working with different cultures and with survivors of torture. The Spirasi staff have consisted of up of 23 different nationalities.

Centre for Education and Integration of Migrants - CEIM focuses mainly on Refugees and those granted leave to remain. They assist with vocational training and then finding people jobs. For Spirasi, true integration means working in the community. They ran a pilot project called Business in the Community where they encourage corporate responsibility. They linked this project with EPIC (Employment for Parents of Irish Born Children) which provided vocational education and then a placement with one of the Business in the Community work places.

They also provide life-skill training and English language classes for asylum seekers, refugees and others.

3.6.3 Refugee Appeals Tribunal (RAT)

This is a statutory appeals board which was established in accordance with the Refugee Act, 1996. It deals with appeals for Refugee Status. Clients can have either an oral appeal or an appeal on the papers, in written form. Any negative decision from ORAC automatically is referred to RAT. After RAT give their decision, the case is automatically transferred to INIS.

3. CONCLUSIONS

As part of the conclusion to this report and to our study exchange, we can conclude that the Irish system is coherent according to the legal framework which supports it. By not allowing asylum seekers to work, they assume full responsibility to provide for all the accommodation requirements until they exhaust the asylum process.

The Irish system makes it clear to the asylum seeker that their time in accommodation is not focused on integration until they are granted a refugee status or leave to remain. However, due to the very long length of time of their legal process, the reality means that people are living in the local communities for several years in which time it is inevitable that they will settle and become integrated. This then means that once an application has been turned-down by the asylum process they can still apply for humanitarian leave to remain on the basis of how integrated they have become.

They do not create specific services for asylum seekers and they try to link all asylum seekers with mainstream services. Therefore, even though this is not their objective, they result in facilitating the asylum seekers integration into mainstream society. Therefore as a model for other countries, mainstreaming asylum seekers into regular services is a good integration tool and a good use of public resources.

Accommodation and reception centres are managed and run by private companies. This is a good practice with regards to human resources management because the government is able to cancel a contract whenever they do not need the beds and then resume the contract when they do. Therefore it is cost effective and prevents crisis situations where there are no beds available. The flipside of this is that these companies are profit orientated ventures, many having experience in the hotel industry and not in the welfare field. None of the centres employ social workers so there is no staff with background information about the client which can serve also for prevention of conflict and for a more appropriate handling of the residents needs. Therefore this gap in social service trained staff is filled by some local support groups and community development workers. This may be seen as good practice due to the fact that asylum seekers are encouraged to be independent and to find the help themselves if they need it. However we see this as applying for people that are already on the same playing field as mainstream society and that marginalised groups would need support by trained professionals to be able to participate on this level.

Regarding vulnerability which was supposed to be the key theme of this report, the Irish system adopts the idea that treating vulnerability as a 'special case' promotes a continuous cycle of seeing oneself as vulnerable therefore it is better to encourage everyone to participate in mainstream services. Special needs, when they become verbalised or obvious, are addressed by the management and RIA on a case by case basis. However underlying needs and issues, for example; isolation, lack of personal abilities to deal with daily tasks, mental health issues are not dealt with in any coherent manner by the management of the centre unless there is a voluntary support group who work directly in the centre.

As far as we have seen, there is not a standard procedure to detect and deal with vulnerability. There are many variables in play, which include factors like; if the vulnerability has been detected or not, if there are local support groups to deal with this vulnerability or not, if there is place to transfer the client to another centre or not, etc.

A good practice is the detection and response to survivors of torture. Spirasi is an example of how an NGO and the government can collaborate to provide a coherent service to address this asylum seeker-specific need.

Another example of good practice is the cooperation between the HSE, ORAC and RIA to provide appropriate services to unaccompanied minors. In this way the legal and accommodation services may continue but with special consideration for the specific needs of unaccompanied minors.

From what we observed, asylum seekers are provided with a large amount of information both from statutory and non-statutory bodies regarding their rights, entitlements and the asylum procedure. This information is both verbal and written and is available in many languages. This facilitates asylum seekers capacity to cope with future stages of their application and their time in Ireland.

Future Directions for Ireland

In the pipeline, Ireland is developing a new Immigration, Protection and Residency Bill which will see ORAC being dissolved and the functions moved to the Applications and Protection Office of INIS. RAT would then become the Protection Review Tribunal. Therefore all the entry options are presented to the entrant to see if any of them are applicable (ie; work visa, leave to remain, asylum, subsidiary protection etc). According to our information, all options of entry into Ireland are considered equally at the initial stage of entry. If the application is turned down, the applicant must leave Ireland so is not able to claim another reason to stay. This Bill is still to be approved so the final result is yet unknown.