

State-wide Meeting

victorian refugee health network March 2024



Agenda

Order of Agenda

- National Policy Update: Refugee
 Council Of Australia
- Settlement Service Update: AMES & Life Without Barriers
- Victoria Settlement Data: VRHN Sector Development and Policy Advisor
- Australian Institute of Health and Welfare (AIHW): Nikki Harvey (Data Analyst)
- Rural/Regional Consultation Group: Lachlan Rigg
- Refugee Women's Health Community Consultation Report Samina Hassan (VRHN)





National Policy Update

14 March 2024

Rebecca Eckard Refugee Council of Australia

Key issues and updates

1. Resolution of Status visas

2. Offshore Processing

3. Protection visas and SRSS

4. Immigration detention

5. Humanitarian crises arrivals

6. Humanitarian Program & Complementary Pathways

Resolution of Status (RoS) visa



- Department still working through RoS applications: 12-month timeframe is now. As at Dec 2023: 14,229 converted to RoS; 5,705 TPV/SHEVs awaiting RoS
- No systemic process of review for the 8,000 people denied protection
 1,327 people awaiting primary decision via "fast track"
- Funded free legal advice available to people applying for RoS through refugee community legal centres. No application charge.
- Updates: New regulations in effect: one to enable more people to smoothly transition to a RoS; another in relation to new identity criteria for RoS visas
- Family reunion options unchanged, so streamlined process being pursued

Solutions for refugees in offshore processing

- 3,127 people sent to Nauru and PNG from July 2013 to early 2014. 1,300 refugees resettled. More than 750 returned to country of origin, 15 have died and over 250 children born since 2013
- Just 1,120 people remain ~55 in Nauru (arrivals in 2023/2024), 52 in PNG (plus 55 partners & children), 1,010 people transferred to Australia for medical reasons
- Insufficient resettlement options currently available
- Update: Situation in PNG deteriorated further, so Australian-based volunteers fundraising. Intensive advocacy to Government. Lack of transparency and clarity on what will happen to people transferred to Nauru.

Protection Visa and SRSS reform



- Most of the people seeking asylum have **no access to a financial safety net**, with at least 2,500 people who have no visa and cannot work
- People are waiting an average of 2.4 years for an initial onshore protection decision,
 3.6 years for an administrative appeal and 5.1 years for review by courts
- Direct financial assistance through Federal Government's Status Resolution Support Services (SRSS) has been cut by 95%, from \$300mil in 2015-16 to \$15mil in 2022-23
 Budget for 2022-23 (\$36.9mil) underspent by \$22mil
- Responsibility for assistance shifted to unfunded charities and state-funded services
- **Sharp increase in presentations** of homelessness (including rough sleeping), food insecurity, inability to fill lifesaving prescriptions, and spiralling mental health (including increased suicidality)
- Updates: Minor improvements to SRSS application process after consultative workshops but no significant extension of eligibility and still no published information
- > Administrative Review Tribunal legislation still in Parliament

Reform of immigration detention



- As at 31 December 2023, 872 people in locked detention (184 fewer than August 2023)
- Average time in detention **625 days** (was 708 days in August). Canada average now 21.9 days; USA average now 45 days
- The average was around 90 days in mid-2013. No independent body able to prevent detention or compel release.
- Updates: High Court case NZYQ challenge to *AI-Kateb* in November 2023 resulted in 149 people being released from immigration detention because there was no real prospect of their removal from Australia
- People have been released on to Bridging Visa R with access to Centrelink, Medicare, and work rights. Additional visa conditions and monitoring applies to all unless granted exemptions from the Minister (~40 exemptions granted)
- Further High Court challenges underway

Arrivals from humanitarian crises



- Some changes to how the Australian Government addresses situations where people flee humanitarian crises and how they respond to people already in Australia on temporary visas: e.g. Afghanistan, Myanmar, Ukraine, Sudan, Gaza/Israel
- Changed approaches happened under both Coalition and ALP Governments
- People fleeing Gaza and Israel: use of Visitor Visas
 - > Limitations associated with work and study rights and Medicare access
 - > Bridging Visa E option and Permanent Protection Visa application option
 - > Ongoing issues related to access to healthcare
- Work underway developing principles and a policy framework for Australia's response to humanitarian crises: driven by Australian civil society and diaspora communities

Expanding Australia's refugee program

- Increased Humanitarian Visa intake from 17,875 to 20,000 places per year
- Better use of non-discrimination criteria in Humanitarian Program planning
- Agreement to resettle Rohingya refugees
- Additional Complementary Pathway places via the Skilled Refugee Labour Agreement Pilot (SRLAP)
- Ministerial and Departmental go ahead for **additional Complementary Pathways Pilot** (education)
- Australia is chairing the Consultations on Resettlement and Complementary Pathways (CRCP) and the Working Group on Resettlement (WGR), held in Sydney last month

Update: Continued advocacy to progressively increase Refugee Program and further work with Government on Complementary Pathways (CP: family, skilled, education). Australian Government GRF Pledge of 10,000 places via CP. Still need to delink onshore Protection Visas from the overseas visa grants.



Questions?

Humanitarian Settlement Program (HSP)



Estimated Planning Levels (EPLs) 2023/2024

2023-24 Estimated Planning Levels (EPLs)				
HSP Service Provider	Settlement Location	2023-24 EPLs		
	Geelong	130		
AMES Australia	Melbourne	4,500		
	Mildura	60		
	Shepparton	200		
	Wodonga	70		



Caveats

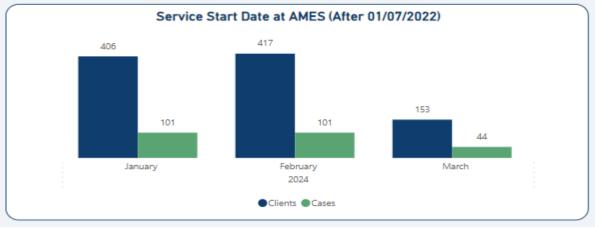
1. 2023-24 Estimated Planning Levels (EPLs) are an estimated number of referrals, Humanitarian Settlement Program (HSP) service providers may receive for each settlement location in the 2023-24 program year.

2. A referral will not necessarily equate to an arrival i.e. there will always be a delay between a referral and arrival and referrals received late in a program year will likely arrive in the next program year.

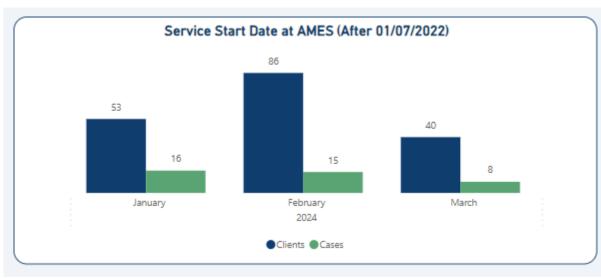


HSP Arrivals 2024

Melbourne:



Regional Victoria:





HSP Updates

- Toll Transport Pty Ltd (Toll) to deliver Assisted Passage, Medical and Related Services to Support the Offshore Humanitarian Program (Assisted Passage)
- All new health referrals for Immigration Medical Exams to go to Toll from 18th of March, date will be different depending on the country of departure
- HSP clients impacted by the Government of Pakistan's (GOP) 'illegal foreigner's repatriation plan'
- Clients in On Arrival Accommodation
- Increase in clients arriving with either a Potential/Critical Medical issue (PMI/CMI)





Status Resolution Support Services (SRSS)

Settlement Services International (SSI)



Update from SSI

- LWB has around 101 of the 149 releases and approx. 35 in VIC.
- The Department is working with us on establishing a clinical assessment team in house who can mak e clinical assessments and provide a greater level of support to the caseworkers supporting those with mental health needs.
- The Department has also been very open to funding rehabilitation programs and we have made links with VACRO who are able to assist with family therapy and their second chance employment programme.

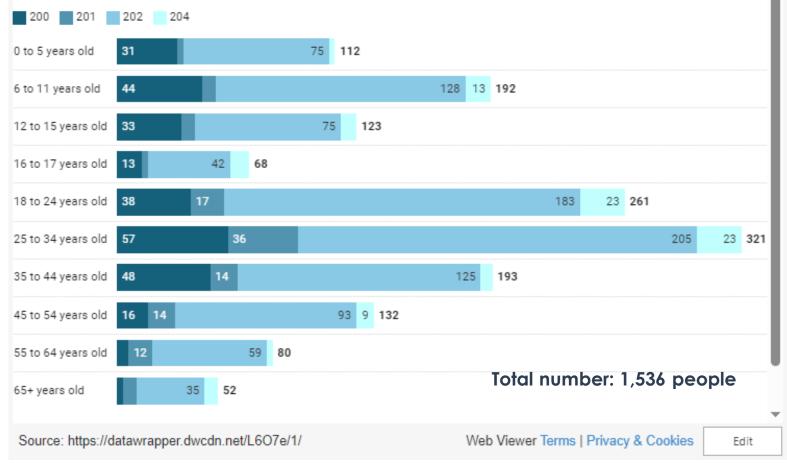
Victorian Settlement Data

Victorian Refugee Health Network



Number of people who arrived in Australia in the fourth quarter of 2023 and currently reside in Victoria according to age group.

Visa subclasses (200 series) with a Date of Arrival between 01/10/2023 and 31/12/2023 and are currently recorded as residing in Victoria as at 04/01/2024



	Visa Subclass		Details:
• • • • •	Refugee Visa (200) In Country Special Humanitarian (201) Emergency Rescue (203) Women at Risk (204)	 ✓ ✓ 	Permanent Stay With these visas you can move to Australia if you are subject to persecution in your home county. These visas allow you and your family to live, work and study indefinitely in
•	Global Special Humanitarian visa (202)	✓ ✓	Australia Permanent Stay With this visa you can move to Australia if you face substantial discrimination or human rights abuses and have a proposer and stay in Australia with your immediate family.
•	Protection Visa (866)	✓ ✓	Permanent Stay This visa is for people who arrived in Australia on a valid visa and want to seek asylum. It lets you stay in Australia permanently, if you engage Australia's protection obligations and meet all other requirements for the grant of the visa.

* This data does not include those on Bridging visas or temporary protection visas (TPV, SHEV, 449, 786)

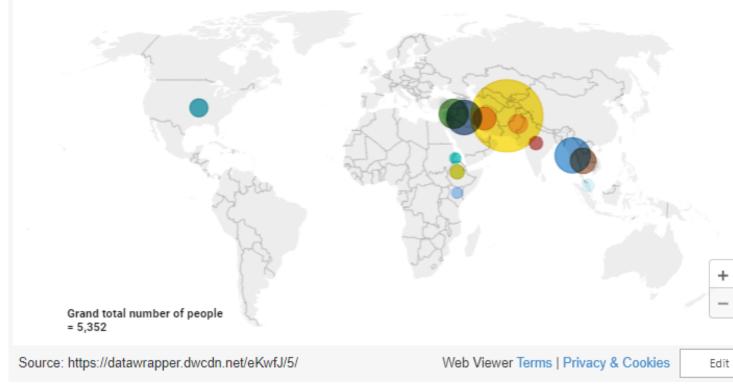
Link to interactive map: https://datawrapper.dwcdn.net/L607e/1/

Country of Birth (Top 15) Humanitarian Settlers who reside in Victoria and arrived in 2023

People on Refugee Category Visas (200 series & 866) with a date of arrival between 01/01/2023 and 31/12/2023 and are currently recorded as residing in Victoria as at 04/01/2024

Country of birth:





Top 15 Country of Birth & Ethnicity

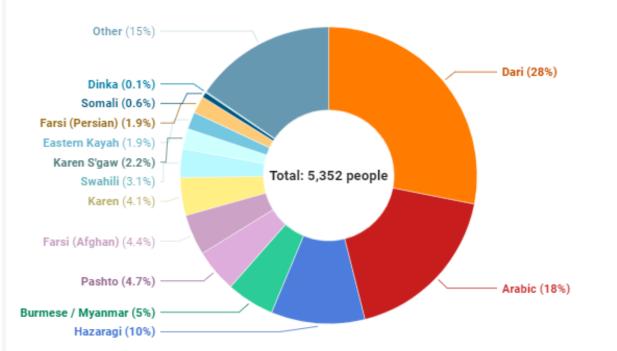
	Country of Birth	Number of people	Ethnicity	Number of people
	Afghanistan	2527	Hazara (Afghan)	1,495
	Myanmar	570	Tajik	434
	Iraq	548	Iraqi	416
	Syrian Arab Republic	383	Afghan	412
	Thailand	287	Karen (Burma)	385
	Iran	225	Syrian	362
	Pakistan	146	Pashtun (Afghan)	306
	Congo, Dem	422	Chin	302
	Republic Of The	133	Unknown	183
	Ethiopia	/6	Congo	166
Н.	India Malaysia	50	Karenni	109
11	Malaysia Eritrea		Chaldean (Iraq)	97
L	Kenya	• •	Burmese	84
	Lebanon	· ·	Oromo	
	Lebanon	51	(Ethopian)	64
	Turkey	29	Arab (NFD)	48
	Grand Total	5,352 people	Grand Total	5,352 people

* This data does not include those on Bridging visas or temporary protection visas (TPV, SHEV, 449, 786).

Link to interactive map: https://www.datawrapper.de/ /eKwfJ/?v=3

Main Language Spoken for those who arrived in the past year

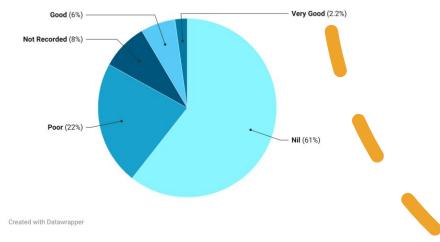
People on Visa subclass (200 series) who arrived in Australia between 01/01/2023 and 31/12/2023 and are currently recorded as residing in Victoria as at 04/01/2024



* These figures are approximations as any cells that have been suppressed (<5) were changed to a numerical value (3) to present data in this map.

Chart: Victorian Refugee Health Network • Source: Settlement Data Request- Department of Home Affairs • Get the data • Created with Datawrapper

English Proficiency



Interpreter Feedback

How helpful is it to receive a brief before you start your interpreting session?

Responses from participants in training session via Poll Question.

Extremely helpfu	l 🔤 Very Helpful 🧧 Somewhat helpful 🔛 Not helpful
Extremely helpful	61%
Very Helpful	30%
Somewhat helpful	9%
Not helpful	0%

There were 122 interpreters who answered this question in the training session. Source: Victorian Refugee Health Network • Created with Datawrapper

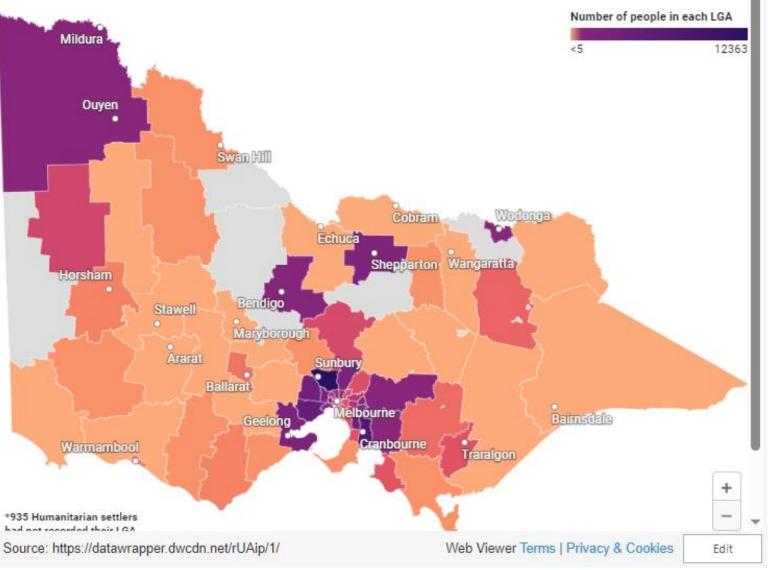
Edit

Top 10 Settlement Areas who arrived in the past 10 years

Local Government Area (LGA)	Number of arrivals (Visa Subclass 200s series & 866)	Number of people on the Resolution of Status Visa (851)
Hume	13,315	247
Casey	6,560	464
Wyndham	5,088	191
Greater Dandenong	3,796	506
Melton	3,269	105
Whittlesea	2,476	505
Brimbank	2,400	197
Greater Geelong	1,620	231
Maroondah	1,561	37
Greater Bendigo	1,173	11

Humanitarian settlers in Victorian Local Government Areas over the last 10 years.

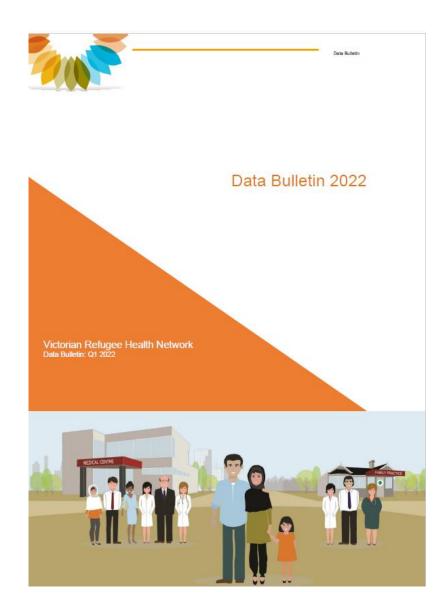
Humanitarian settlers with a Date of Arrival between 01/01/2013 and 31/12/2023 and are currently recorded as residing in Victoria as at 04/01/2024



* This data does not include those on Bridging visas or temporary protection visas (TPV, SHEV, 449, 786).

Link to interactive map: https://datawrapper.dwcdn.net/Eel8v/2/

VRHN Data Bulletin



Every quarter, the Victorian Refugee Health Network publishes a Data Bulletin that outlines Settlement data for Victoria and is available on our website here:

https://refugeehealthnetwork.org.au/resourcesreferrals-2/?_sft_tool_for_clinician=settlementdata



Health of refugees and humanitarian entrants in Australia web report

Presenter: Nikki Harvey

Project team: Vanessa D'Souza, Nikki Harvey, Sarah Perry and Cathy Etherington



Stronger evidence, better decisions, improved health and wellbeing for all Australians

The Australian Institute of Health and Welfare (AIHW) is an independent statutory agency.

We produce authoritative and accessible information and statistics to inform and support better policy and service delivery decisions, leading to better health and wellbeing for all Australians.

We are focused on turning data into useful information and telling the broader story.



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200+ publicly available reports and data releases annually covering over 75 health and welfare topics



Full range of data services from requests and access, through to analysis and linkage



Web report overview

Purpose:

- Limited data available on the health of refugees and humanitarian entrants in Australia
- New insights into the health of refugees and humanitarian entrants
- Inform policy, research and health service provision

Contents:

- Analysis of de-identified linked data in the ABS' Person Level Integrated Data Asset (PLIDA)
- Data are presented for humanitarian entrants who arrived in Australia from 2000 to 2020 on:
 - health service use (does not include hospital data)
 - medication dispensing
 - self-reported long-term health conditions
 - causes of death
- Case study Humanitarian entrants born in Afghanistan

Context:

- First stage of the AIHW's refugee and humanitarian entrant health project
 - Data from second stage will be released in mid-2024







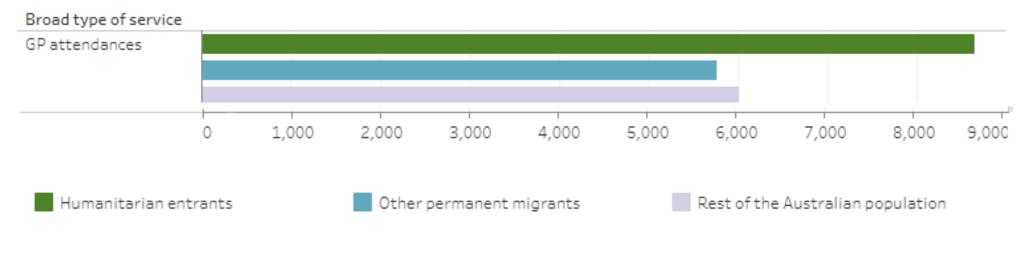


Humanitarian entrants had high rates of GP attendances

Almost 9 in 10 humanitarian entrants attended a GP at least once in 2021.

Humanitarian entrants had, on average, **8.4 GP attendances per person in 2021**.

After standardising for age, humanitarians had 40% higher rates of GP attendances than the rest of the Australian population in 2021.



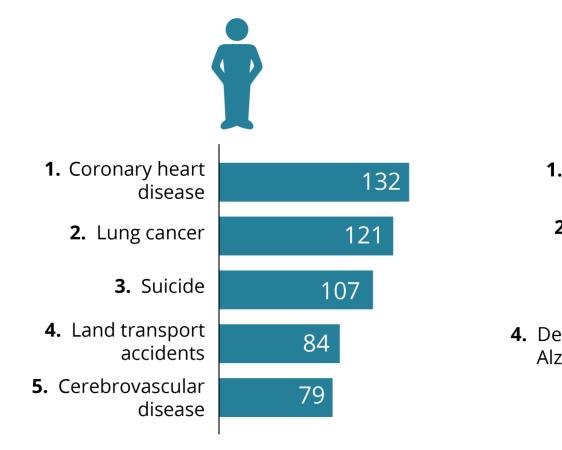
Source: AIHW analysis of PLIDA, 2021.



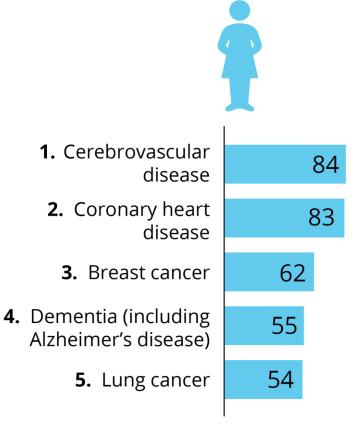


Humanitarian entrants had different leading causes of death for males and females

Leading causes of death for humanitarian entrants, by sex, 2007–2020 (number of deaths)



Source: AIHW analysis of PLIDA, 2007–2020.



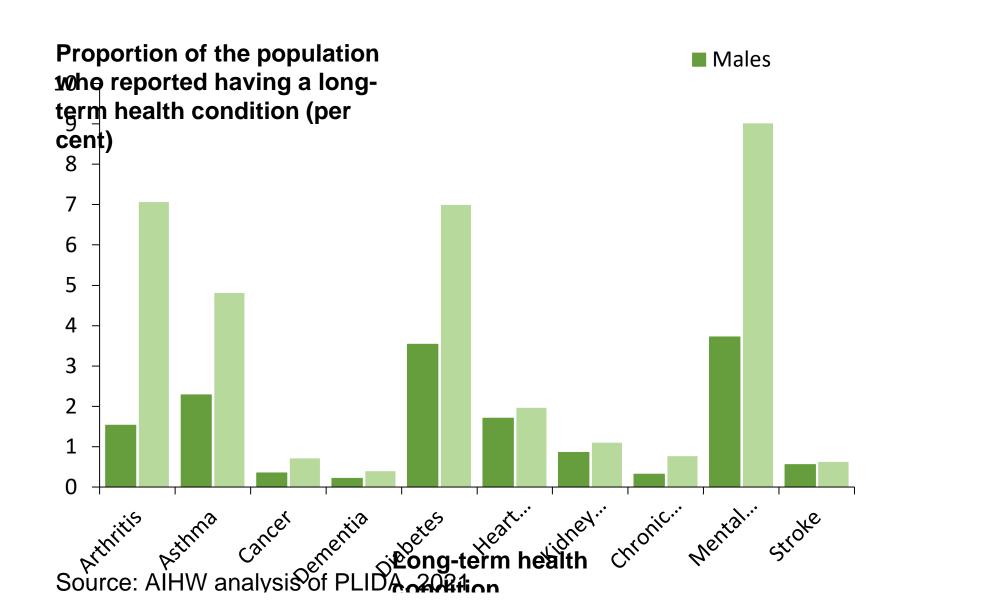
AIHW

- Around 21,000 humanitarian entrants born in Afghanistan who arrived in Australia in 2000–2020.
- Data on health service use and outcomes
 - Broad types of health service use
 - Medication dispensing
 - Self-reported long-term health conditions
 - Causes of death
- Inform policy, research and health service provision for Afghan humanitarian entrants

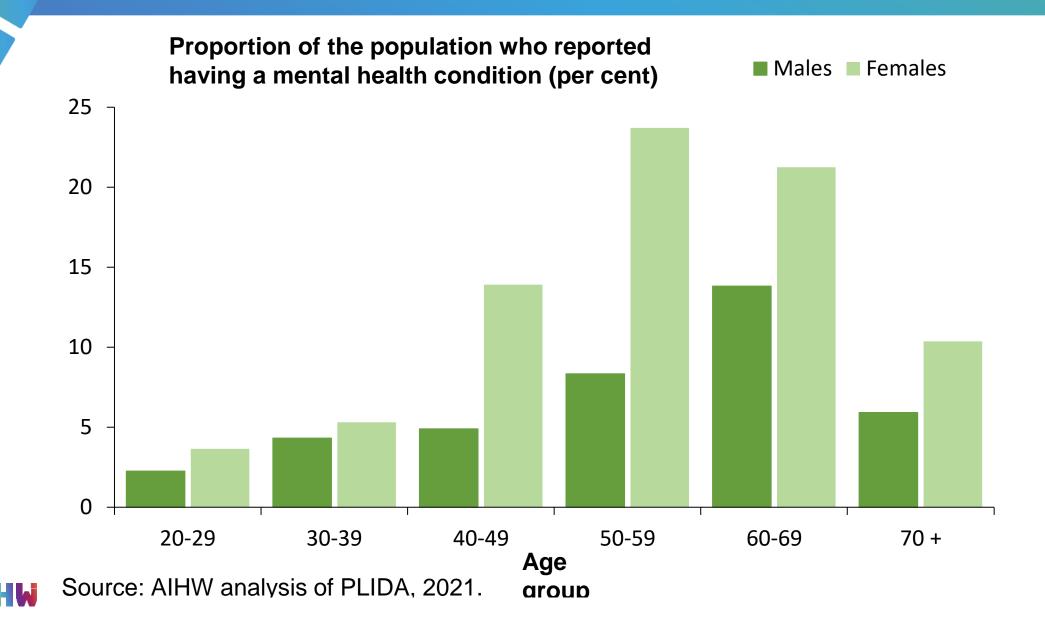




AIHW

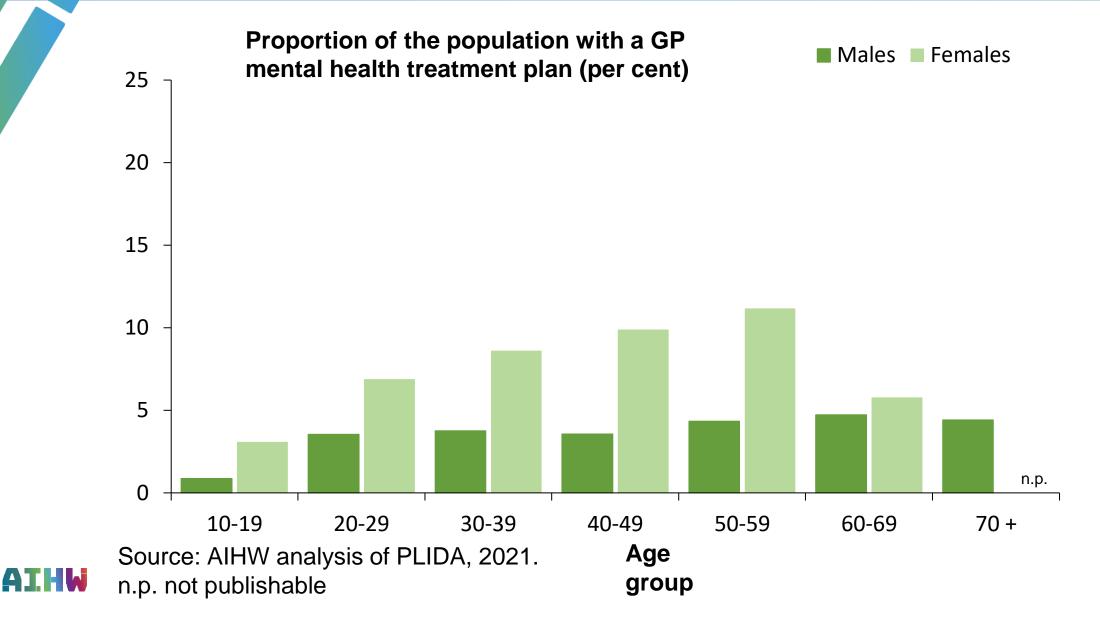


Case study: Humanitarian entrants born in Afghanistan





Case study: Humanitarian entrants born in Afghanistan



- This report shows that refugees and humanitarian entrants' experiences of long-term health conditions and health service use differ to other permanent migrants and the rest of the Australian population
- Helps build the evidence base to inform policy, research and health service provision
- Stage 2 of this project will explore data on hospitalisations and the use of homelessness services





Web report contents

- Commentary on findings and important contextual information
- Interactive visualisations to explore the data
- Data tables that include data beyond what is presented in text and visualisations including:
 - Age and sex breakdowns of health service use and medication dispensing
 - Outputs by countries of birth for some measures
 - Causes of death by time since arrival







Population monitoring & COVID-19 Data Unit

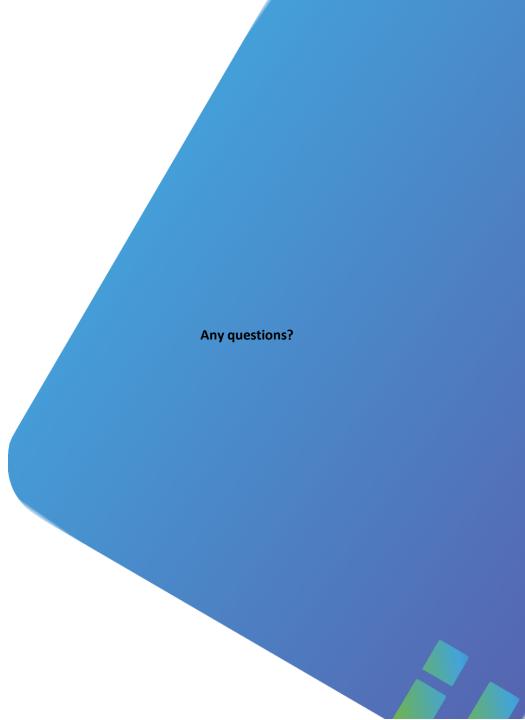
PMCDU@aihw.gov.au

Web report

Health of refugees and humanitarian entrants in Australia, About - Australian Institute of Health and Welfare (aihw.gov.au)

Website about project

<u>Culturally and linguistically diverse Australians</u> <u>Refugee and humanitarian entrant health -</u> <u>Australian Institute of Health and Welfare</u> (aihw.gov.au)





Rural/Regional Working Group March 2024

victorian refugee health network

Victorian Refugee Health Network

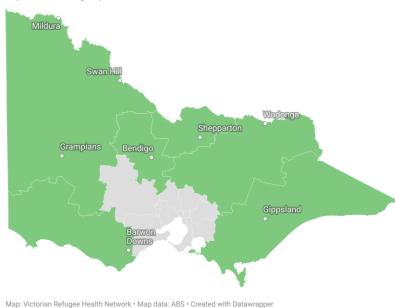
Rural/Regional Working Group

Overview:

With a high number of people settling in rural/regional areas, it is important to monitor, capture and have regular updates on health access issues for areas outside metropolitan areas. This year, the Network has established a Rural and Regional working group to ensure there is adequate representation in these Statewide Meetings on matters from across the State. **Top 3 areas of concern**

Rural/Regional Working Group

Representation of group members.



- Waitlist in Bendigo is currently around 10-11 months
- No dentist at the public dental clinic in Mildura, closest is 100kms away.
- Cost and travel time for interpreter is a barrier and creates delays to dental treatment.

2. Transport to Melbourne for Medical Appointments

- Medical transport: people with chronic and serious health conditions require transport to Melbourne for health appointments. This support is not funded through HSP or RHP, this requires additional resources to assist with transport and support for the client.
- <u>Mini case study-</u> A gentleman who has suffered an injury requires epidural steroidal injection in his neck on a semi-regular basis. There are no CT scan services in Mildura that will inject in that part of the neck (c6 vertebrae). He must go to Melbourne to access this service. He is in SIS, with no services to discharge him to keep up that engagement with health appointments. There are concerns of him being exited from the program and requiring ongoing support.

3. Connection with CRISP families

 With families arriving who have been sponsored by CRISP volunteer groups, the rural/regional working group want to help ensure they are connected with local specialised services. How can we receive more communication on who is coming into rural/regional areas? How do we offer support to CRISP support groups?

^{1.} Limited or no public dental services available in the regions

Refugee Women's Health Community Consultation Project

Samina Hassan

Refugee Women's Health Community Consultation Project



Refugee Women's Health Community Consultation

Women from refugee and asylum seeker backgrounds share their experiences of accessing and navigating the Victorian healthcare system

FINAL REPORT - JANUARY 2024

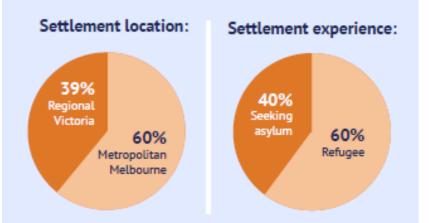
"We wanted to take part and to raise our voices. We shared our lived experiences, our stories and circumstances we have lived through. **We gave a first hand narrative about what things are like, with our health and our experience of healthcare in Victoria.** So many realities gathered to give us a clear picture. We are hopeful this project that we have all been working on together will be successful in providing the government an insight into our lives."

Natalie and Fauzia, Community Advisory Group Members



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34 women who attended Community Consultations





Theme 2: Rights & Information

What we heard:

If she had a female interpreter, she would feel more comfortable to share, to tell the truth.

A woman I know was at risk of having a premature baby. She couldn't get a female interpreter. The doctor was asking "how do you feel in the stomach, in the pelvic areas?". She didn't feel comfortable in front of a male interpreter, her husband doesn't speak English, they are newly married and he doesn't know anything about pregnancies or babies. She was scared, shy and not sharing some information would be a risk for her.



A.K. - on the importance of having access to female interpreters

Community Advisory Group Member, Rohingya woman who arrived in Australia in 2009, mother of four, has worked as an interpreter in medical settings and passionate about helping women in the community





Refugee Women's Health Community Consultation Project

by blick | Jun 29, 2023

The Refugee Women's Health Community Consultation Project was funded to inform implementation of the Victorian Government's reform initiatives in Women's Health. The project, coordinated by the Victorian Refugee Health Network, centres the lived experiences of women from refugee and asylum seeker backgrounds in accessing and navigating Victoria's health system.





Community Consultation

to help inform the Victorian Government on their Women's Health Reform initiatives. This project, coordinated by the Victorian Refugee Health Network, centred the lived and living experiences of women from refugee and asylum seeker backgrounds accessing and navigating the Victorian health system.

The Refugee Women's Health Community Consultation Report has been released, sharing key findings and recommendations

"We wanted to take part and to raise our voices. We shared our lived experiences, our stories and circumstances we have lived through. We gave a first hand narrative about what things are like, with our health and our experience of healthcare in Victoria. So many realities gathered to give us a clear picture. We are hopeful this project that we have all been working on together will be successful in providing the government an insight into our lives." Natalie and Fauzia, Community Advisory Group Members

https://refugeehealthnetwork.org.au/project/refugeewomens-health-community-consultation-project/

Evaluation survey

https://www.surveymonkey.com/r/LD9JFL3

Next Meeting will be held in July.

Subscribe to become a Network member to receive notifications of upcoming meetings <u>here</u>.

Join the Networks Executive Group!

Submit an Expression of Interest to join the Network's Executive Group, providing strategic oversight and key policy advice related to health services and systems for people from refugee and asylum seeker backgrounds in Victoria.

Latest News Post here:

https://refugeehealthnetwork.org.au/join-the-networksexecutive-group/





victorian refugee health network

Thank you for attending the VRHN State-wide Meeting! March 2024