

Understanding Social Work Provision to Former Refugee and Marginalised Migrant Communities in Auckland

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*An analysis of need, effective models of provision
and opportunities for increased impact*

January 2020

*This research was led by a collaborative group of NGOs:
Belong Aotearoa, UMMA Trust, RASNZ, NZ Red Cross,
Asylum Seekers Support Trust, Aotearoa Resettled
Community Coalition, Family Action*

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Foreword.

The research presented in this report was commissioned by a group of NGOs working collaboratively to strengthen the collective impact of our work serving former refugee and marginalised migrant communities. We commissioned this research in response to our shared experiences and anecdotal evidence about:

- the significant challenges that former refugee and migrant communities experience in accessing resources and supports that are culturally and linguistically appropriate;
- the value of social work in meeting the needs and aspirations of these communities; and,
- the challenges experienced by our respective organisations in sustainably resourcing models of tailored social work and other complimentary community programmes/services.

Through this research, we hoped to explore and understand the experiences of other NGOs across the sector. In doing so, we have created a valuable evidence base that we believe can support learning, enable cross-sector conversations and encourage ongoing collaborative efforts to support the positive resettlement and wellbeing of former refugee and marginalised migrants communities in New Zealand.

We are excited to share the findings of this research, which draws on the wealth of knowledge and experience held by staff and volunteers working within highly respected NGOs and community groups, as well as some of the funders that are investing in these organisations and who have a helicopter view of the sector.

The research shows the importance of providing bespoke social work services to former refugees and migrants in order to effectively meet their cultural and language needs and their resettlement goals. It highlights the importance of having social workers with appropriately matched cultural world views and lived experience of resettlement in building trusting relationships with former refugee and migrant clients. It also shows the value-add of providing adjacent wrap-around support in a community setting, which some NGOs are able to provide through their relationships with community leaders and ability to design community-led programmes and services.

The research also highlights significant challenges that are widely experienced by NGOs delivering social work services and are systemic within our sector. These include issues with sustainable funding, a lack of social worker pay-parity and a lack of resourcing to meet the levels of demand in former refugee and marginalised migrant communities. Other wider systems issues were also raised in this research – including institutional racism, a mainstream that is often ill-equipped to meet the unique needs of former refugees and migrants, and Government policy gaps that leave some members of our resettled communities chronically under-resourced.

These challenges are confronting; but also represent opportunity for conversation between our sector, mainstream services and policymakers as to how we can work together in meeting the needs and aspirations of our resettled and migrant communities. As the commissioners of this research, we are committed to leading this conversation and sparking further collective action in pursuit of improved and more equitable resettlement and wellbeing outcomes.

I take this opportunity to thank the NGOs involved in this collaborative piece of research for their time, vision and passion for their communities – UMMA Trust, RASNZ, NZ Red Cross, Asylum Seekers Support Trust, Aotearoa Resettled Community Coalition and Family Action. I also thank all those that participated in this research – you have helped to grow our pool of knowledge and our collective energy for positive change.

Rochana Sheward – Chief Executive Officer, Belong Aotearoa

Executive Summary.

Purpose.

This research was commissioned by a collaborative group of NGOs (Belong Aotearoa, UMMA Trust, RASNZ, NZ Red Cross, Asylum Seekers Support Trust, Aotearoa Resettled Community Coalition and Family Action) as part of their collective mission/roles supporting New Zealand's former refugee and migrant background communities.

The research scope was developed to support the wider sector's understanding of the role that social work plays in supporting the wellbeing and positive resettlement/settlement of people and families from refugee backgrounds; as well as people and families from migrant backgrounds who have experienced significant exclusion and marginalisation before or after their arrival in New Zealand.

The research is focused on the Auckland region and looks at community sector social work provision that is designed and delivered in ways that are 'bespoke' or tailored to meet the needs of refugee-background and marginalised migrant communities.

The purpose of this research is to understand priority issues experienced by these population groups that require social work support; the need for, and characteristics of, culturally bespoke service provision; the challenges that bespoke providers experience; and opportunities to address potential gaps in order to increase impact at a systems level.

Findings.

A series of key information interviews were carried out with stakeholders from organisations that are positioned to provide strategic advice and/or share their on-the-ground experience of the social work landscape in Auckland for refugee-background and marginalised migrant communities. The section below includes a summary of key findings that are described fully within this report.

Highest need communities.

Insights shared by participants suggests that former refugees are a priority population group that have high and complex needs in relation to social work. In particular, asylum seekers, convention refugees and family reunification refugees (see appendix one for definitions) were identified as being most under-served and of highest need, because of their limited access to arrival orientation, entitlements and funded government support in comparison with quota refugees. Quota refugees are also identified as having more complex needs, in general, compared with people from migrant backgrounds.

Key social work needs.

To support positive resettlement/settlement and wellbeing outcomes, former refugees and marginalised migrants typically require support in relation to:

- **Advocacy** – i.e. ensuring that clients have with experiences with other mainstream services that are culturally and linguistically appropriate.

- **Entitlements** – i.e. ensuring that clients have full access to benefits, housing and other services in line with their refugee/legal/immigration status and family circumstances.
- **Navigation support** – i.e. brokering clients’ access to other complimentary support and services that meet their needs and help to achieve the specific resettlement/settlement and wellbeing goals, as identified by client and social worker.
- **Connecting to communities** – i.e. ensuring that families can access social and cultural support, within appropriate communities, to enable long-term, sustainable resettlement/settlement and positive social inclusion.

These social work needs may apply across a range of specific issues, with common priorities identified as being mental health, social isolation, housing, immigration and legal status, and family violence.

Bespoke social work support.

Social workers act as a facilitator between clients in need and community services including health, welfare and housing. They work with clients in structured ways to determine goals and empower clients to develop skills and work towards those goals with increased self-determination.

This research identified that many organisations employ registered and qualified social workers; whilst other typically smaller, grassroots organisations offer ‘social work-like’ support in lieu of social work funding or qualified in-house expertise. Much of this informal community support aims to deliver the same kind of outcomes that might be expected from qualified social work; and, in some cases, is delivered by staff or volunteers with some form of social work training. Interviewees raised both challenges and opportunities with this approach – most notably:

- The critical importance of having professional social work support to manage risk for complex cases.
- The tendency for the community support to occur as a response to filling gaps i.e. meeting the level of demand from the community – particularly after the first year of arrival where there is more funded support for quota refugees.
- The opportunity for impact where qualified social workers and community-based support providers work side-by-side.

“Social work is different to general community support roles. With my experience and training [as a registered social worker], you know how to deal with certain issues, how to navigate the system a little bit easier [especially] where there are more complex clients and needs to follow up on... But, the cross-cultural community workers can also do things that we cannot do [as social workers] because they have influence in their communities. They are very embedded in the communities. And [they] know what is going on with the client’s lives and can follow up on things.”

Through this research, it is possible to clearly describe the characteristics of ‘bespoke’ social work provision – i.e. approaches and practices that are more tailored to better meet the specific needs of people from refugee and/or marginalised migrant backgrounds. These include:

1. **Mission-focus** – i.e. social work services delivered by organisations with a mission-focus on serving former refugee and/or migrant communities, and which therefore develop expertise on the needs and aspirations of these communities; as well as being more likely to offer other complimentary bespoke services e.g., counselling.

2. **Linguistically appropriate support** – i.e. in-house capability for client language-matching; or else, more systematic use of appropriate interpreters.
3. **Culturally appropriate support** – i.e. providers with a depth of expertise in relation to cultural and religious considerations; supporting cultural safety and more effectively empowering clients through a deeper understanding of their cultural world view and how this might interface with New Zealand’s culture and systems.
4. **Staff with lived experience** – i.e. the use of social workers and other support staff that have lived experience of the refugee resettlement or migrant settlement journey; as well as the ability to culturally match clients and staff appropriately.
5. **Holistic and wrap-around approaches** – i.e. social work services that understand the client’s full context and history, and can provide a range of other complimentary support to help empower the client towards their goals.
6. **Social work that is community-integrated** – i.e. service providers that are connected to wider communities, which can help connect client families to long-term, in-community social and cultural support systems, for more sustainable resettlement/settlement outcomes.

“Our focus is bespoke [because] we look at the cultural needs of support as a key focus... [We have] cultural competency and an understanding of different cultural values. We see the social work framework as an ecological model – how a person and family interface with the community, with systems they come across, and the political environment in their home country and how that impacts them here.”

In contrast to these characteristics, mainstream providers – including mainstream-employed social workers as well as other mainstream agencies/services – were criticised by interview participants for their general lack of cultural and linguistic competency. This lack of appropriate capacity to meet the language and cultural needs of former refugees and marginalised migrants was seen as compromising potential wellbeing and resettlement/settlement outcomes. This was identified as a systemic issue that requires somewhat urgent change; particularly as resettled communities – as well as ethnic communities in general – grow in Auckland over time.

Key challenges experienced by bespoke providers.

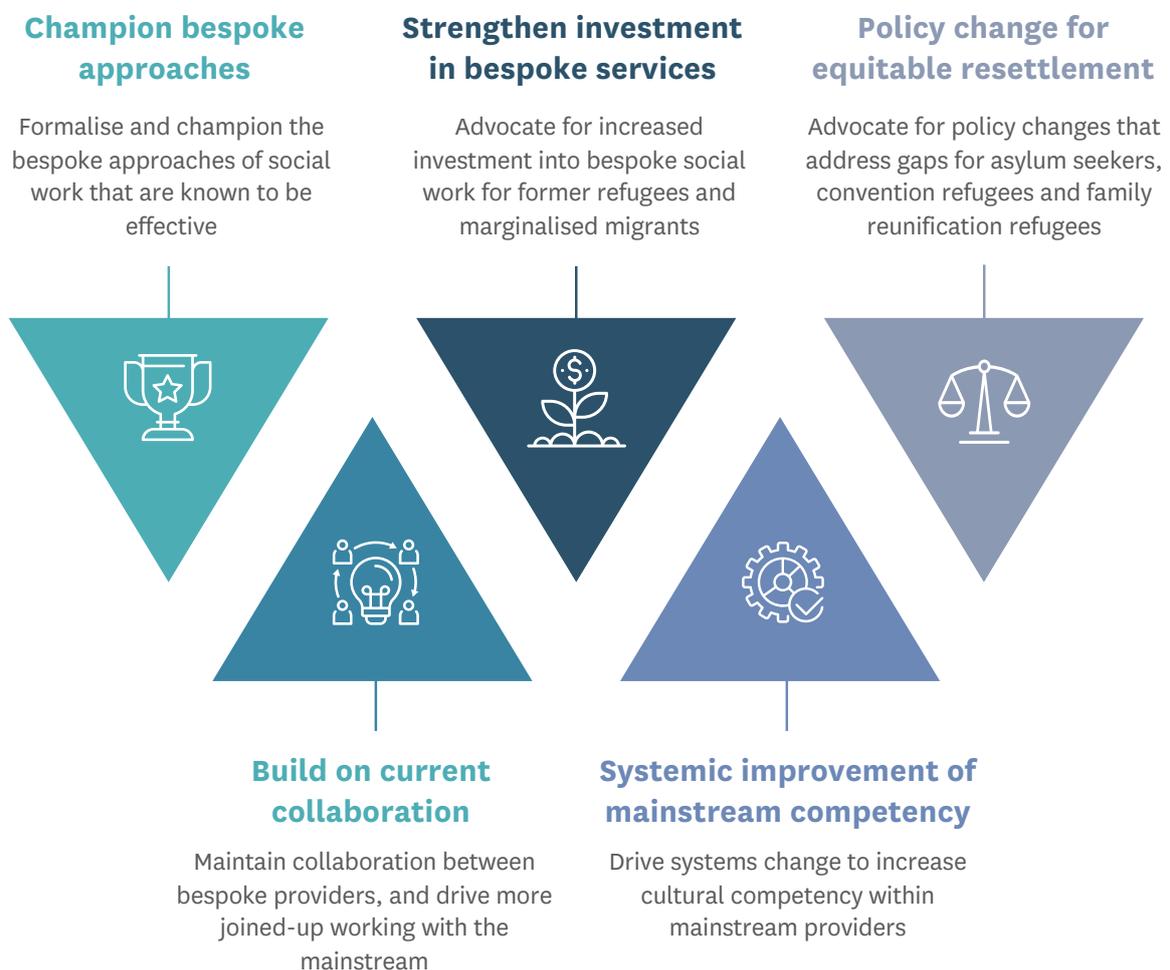
Interview participants identified a range of challenges that affect their organisations. Such challenges impact on their community reach (caseloads), quality/efficacy and long-term sustainability. These challenges include:

- Staff burnout, limited job security due to short-term funding models, and a lack of investment in/opportunities for staff development.
- Insufficient funding – particularly government funding – to meet both the level of demand for bespoke social work, as well as to enable providers to maintain the characteristics of their bespoke service models.
- Challenges in achieving pay parity with government agencies due to systemic under-funding, causing knock-on challenges with staff retention.
- Limited opportunities for organisational development due to a lack of funding; which in turn results in some organisations being unable to meet the requirements needed to access more sustainable government contracts.

“One of the main challenges is employing staff on a permanent basis [...] as a consequence of lack of funding... It is very important that service providers get longer-term funding contracts, like four-year cycles. It is very disruptive for families if a social worker is on a short-term contract. That is a systemic thing that needs to change.”

Summary of opportunities for impact.

Through the insights provided by the participants in this research, it is possible to identify a number of key opportunities that could be further explored in order to improve resettlement/settlement and wellbeing outcomes for former refugees and marginalised migrants. These opportunities are summarised in the diagram below:



It is recommended that the steering group members commissioning this research explore how these opportunities might be prioritised and best taken forward. In doing so, there is significant opportunity for both mainstream and bespoke social work and community support services to be supported to increase their efficacy and better serve the needs and aspirations of our new New Zealanders.

Background.

Research purpose.

This research was commissioned to understand the role of social work in supporting the wellbeing and positive resettlement of people and families from refugee backgrounds; as well as positive settlement for people and families from migrant backgrounds who have experienced significant exclusion and marginalisation (see further definitions in appendix one).

The research is focused on the Auckland region and looks at community sector social work provision that is designed and delivered in ways that are 'bespoke' or tailored to refugee-background and marginalised migrant communities.

The purpose of this research is to generate insights about:

- The type and level of social work need within the identified communities.
- Effective models of social work provision to support outcomes for former refugees and marginalised migrants.
- Service provision gaps and challenges.
- Opportunities for more effective practice and increased impact – including potential policy and resourcing considerations for government and other funders.

Research scope.

This qualitative research was designed to draw strategic insights from key stakeholders with understanding and/or direct experience of the current landscape of bespoke social work provision available to refugee-background and marginalised migrant communities. A total of 17 key informant interviews were carried out between October and December 2019 (see appendix two for a list of participating organisations). Some supplementary organisational data was also provided to the researcher by participants.

The research interviews were designed to understand:

- The key challenges that people and families from refugee-backgrounds and marginalised migrant-backgrounds experience that require the support of a social worker.
- If and how these challenges are experienced differently based on refugee or migrant backgrounds and the different resettlement and settlement pathways.
- The client engagement journey into and from social work services for people within the identified communities.
- Characteristics and/or models of effective practice that are required to achieve outcomes for refugee-background and marginalised migrant clients.
- Service provider challenges and suggested opportunities for increased scale, quality and/or efficacy of bespoke social work provision to refugee-background and marginalised migrant communities.

- Perspectives about future social work resourcing and policy as relevant to refugee-background and marginalised migrant communities.

Some additional desk-based research was also completed in order to further understand the Auckland region's landscape of bespoke social work providers, and to provide further background information related to the scope of this research.

Definitions and language.

A glossary in the appendix provides background to the language used in this report and its definition/intended meaning in the context of this research.

Research project steering group.

The research is being undertaken by a collaborative group of Auckland-based Non-Government Organisations (NGOs), including:

- [Belong Aotearoa](#)
- [UMMA Trust](#)
- [RASNZ](#)
- [NZ Red Cross](#)
- [Asylum Seekers Support Trust](#)
- [Aotearoa Resettled Community Coalition](#)
- [Family Action](#)

These organisations are pursuing this research in order to identify opportunities to strengthen practices, collaboration and resourcing across the refugee and migrant community sector. The research project was funded by the [Working Together More Fund](#).

Community profile.

This research is focused on services provided to people of refugee or marginalised migrant backgrounds in the Auckland region. The section below provides some contextual data about these communities in New Zealand and, where available, in the Auckland region.

Quota refugees.

New Zealand is one of 37 countries that takes part in the Office of the United Nations High Commissioner for Refugees (UNHCR) resettlement programme. Through this current quota system, 1,000 refugees are resettled in New Zealand annually. In 2018, the quota was increased from 750 per annum to 1,000 per annum. This annual quota will increase again in July 2020, to 1,500 per annum.

After completing a six-week reception and orientation programme at the Mangere Refugee Resettlement Centre, quota refugees are resettled in one of eight regions: Auckland, Waikato, Manawatu, Wellington, Nelson,

Christchurch, Dunedin or Invercargill. They are provided with housing and settlement support for up to 12 months – which typically includes social work (Immigration New Zealand [INZ], n.d./a).

National resettlement data shows that:

- In the five-and-a-half years to December 2019 (from financial year 2014/15), New Zealand received **5,177 quota refugees** (reflecting the quota increase in 2018).
- Most quota refugees were resettled from **Syria** (1,121), Myanmar (1,105), Colombia (757), Afghanistan (747), and Palestine (286).
- In the five-and-a-half years to December 2019 (from financial year 2014/15), **Wellington** received the highest number of resettled refugees (1,199); followed by Auckland (805), Waikato (802), Manawatu (756) and Nelson (598).
- In the financial year to date (to December 2019), New Zealand has received **501** quota refugees. (INZ, 2019).

Auckland quota resettlement.

- In the five-and-a-half years to December 2019 (from financial year 2014/15), Auckland received **805 quota refugees**.
- In the five-and-a-half years to December 2019 (from financial year 2014/15), Auckland received the most quota refugees from **Myanmar, Afghanistan** and **Palestine** (exact numbers not published).
- Auckland’s resettlement numbers steadily decreased from a high of 265 per annum in 2012/13, to a low of 86 in 2017/18. However, numbers appear to be rising again, with 98 people resettled in Auckland in 2018/19, and a total of **78** in the current financial year to December 2019 (six months).
- Increased challenges with housing availability and affordability appear to be the main drivers behind Auckland’s changing resettlement numbers (McNeilly, 2019). (INZ, 2019).

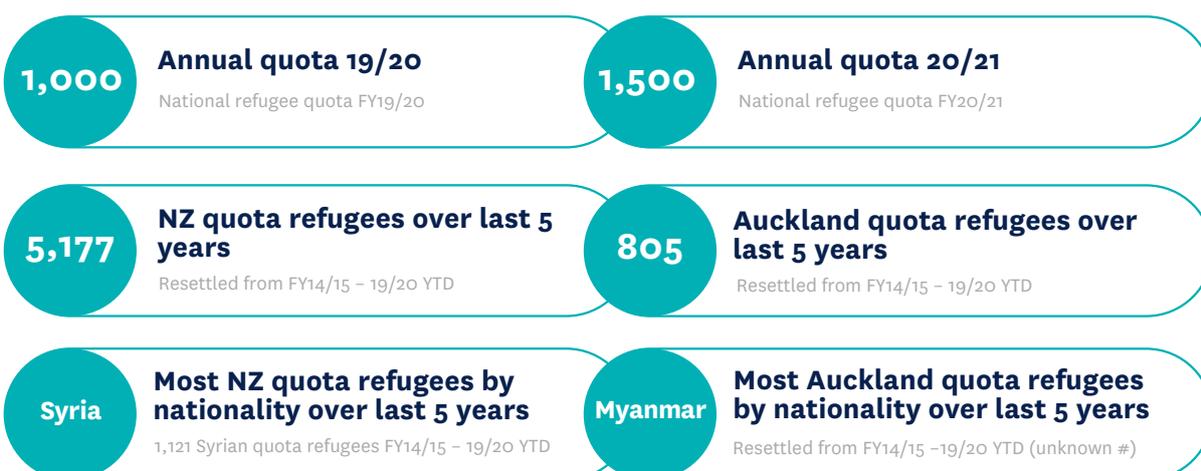


Diagram: Statistics about New Zealand quota refugees (INZ, 2019)

Asylum seekers and convention refugees.

New Zealand has signed an international convention that supports the right of people to seek asylum in New Zealand. Once a person arriving in New Zealand to seek asylum has submitted a claim, it takes approximately three months to be assessed (INZ, n.d./b). If a person's claim is denied, they can appeal to the Immigration and Protection Tribunal; however, there is no set time frame for decision-making from this process (INZ, 2015). This presents potential financial and wellbeing challenges to the claimant.

If a person's claim for asylum is approved, they are granted refugee or protected person status ('convention refugees') and can apply for a visa. Most adults will be granted work visas and school-aged children will be granted study visas; whilst dependent children who are not at school will be granted visitor visas. Applying for residence is a separate process which will take additional time and fees (INZ, 2015).

Claims.

- In the five-and-a-half years to December 2019 (from financial year 2014/15), New Zealand received **2,346 claims** for asylum.
 - Claims have steadily increased – from 328 in 2014/15, to **510 in 2018/19**. This trend appears set to continue, with 297 claims lodged in the financial year to December 2019 (six months total).
 - The largest numbers of claims came from **China (368)**, India (222), Sri Lanka (168), Iran (112) and Pakistan (108)
- (INZ, 2019)

Approved convention refugees.

- In the five-and-a-half years to December 2019 (from financial year 2014/15), New Zealand **approved 29%** of the 2,346 claims for asylum (679 total). This highest approval rate was in 2015-16, at 33%.
 - The total number of approvals have steadily increased – from 100 in 2014-15, to **153 in 2018-19**. The approval rate for the financial year to date is lower than the five year average of 29%, at **only 18%** (52 approvals).
 - The largest numbers of approvals were from claimants from **China (171)**, Iran (39), Iraq (39), Syria (35) and Pakistan (30).
- (INZ, 2019)

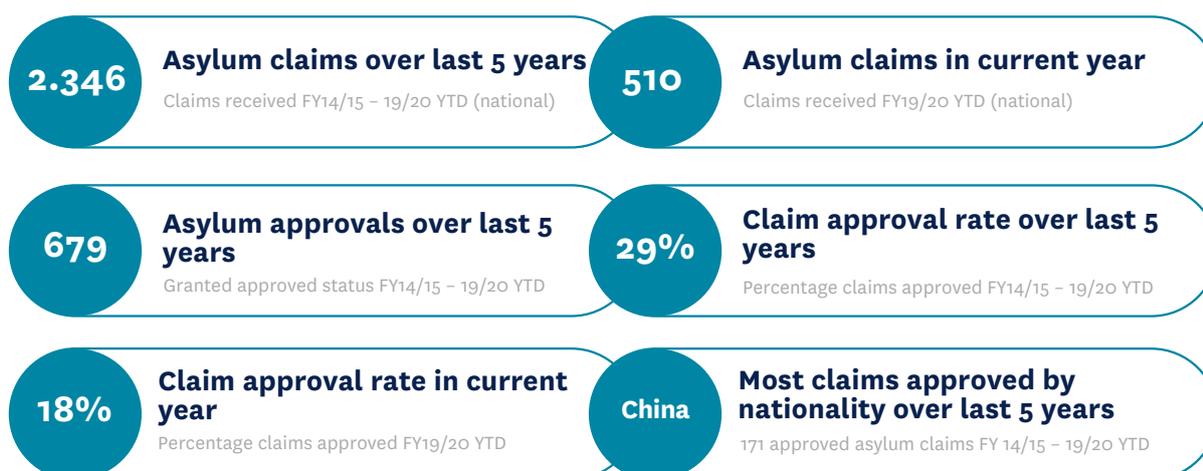


Diagram: Statistics about New Zealand asylum seekers and convention refugees (INZ, 2019)

Family reunification refugees.

New Zealand residents who arrived in New Zealand as quota or convention refugees may be able to sponsor a family member and their partners and dependent children for residence in New Zealand under the Refugee Family Support Resident Visa category. A total of 300 places are made available per annum (INZ, n.d./c).

Sponsors must over 18 years of age and be living in New Zealand with residence granted on the basis of refugee or protected person status. There are two tiers for assessing applications under this visa category – with tier one applications being assessed first, until the annual quota of 300 is met; followed by tier two applications if any places still remain. Tier one applicants must have no relatives already in New Zealand or eligible for residence under other immigration categories. Sponsors must provide housing for relatives arriving as family reunification refugees for the first two years of their residence (INZ, n.d./c).

No data is collected and published to understand where family reunification refugees are living when they arrive in New Zealand, so it is difficult to quantify the numbers that might be resettled in the Auckland region. National data relating to applications, issued residence visas and nationalities is summarised below to provide some context.

Invitations to apply.

- In the five-and-a-half years to December 2019 (from financial year 2014/15), New Zealand issued **4,188** invitations to apply for Refugee Family Support Residence. This included 1,651 tier one and 2,537 tier two invitations.
- In the last full financial year (2018-19), the total number of invitations to apply issued was the highest in the last 10 years (967). The number issued in the financial year to December (six month) is on track to exceed that number (796).

(INZ, 2019)

Approved residence visas.

- In the five-and-a-half years to December 2019 (from financial year 2014/15), New Zealand issued **1,663** residence visas – 807 tier one and 856 tier two.
- Of the 300 available places, **108** visas have been granted in the current year to December 2019.
- In the five-and-a-half years to December 2019 (from financial year 2014/15), the average approval rate, based on the number of invitations to apply, was **40%**. This includes a slightly higher approval rate for tier one applications (49%) compared to tier two applications (34%).
- In the last full financial year 2018-19, approval rates were below average at **30%**. This was due to the 10-year high number of issued invitations to apply and low approval rates for tier two applicants (17%).
- The largest numbers of approvals were from claimants from **Afghanistan** (527), Sri Lanka (125), Somalia (119), Iran (118), Vietnam (115) and Ethiopia (108).
(INZ, 2019).

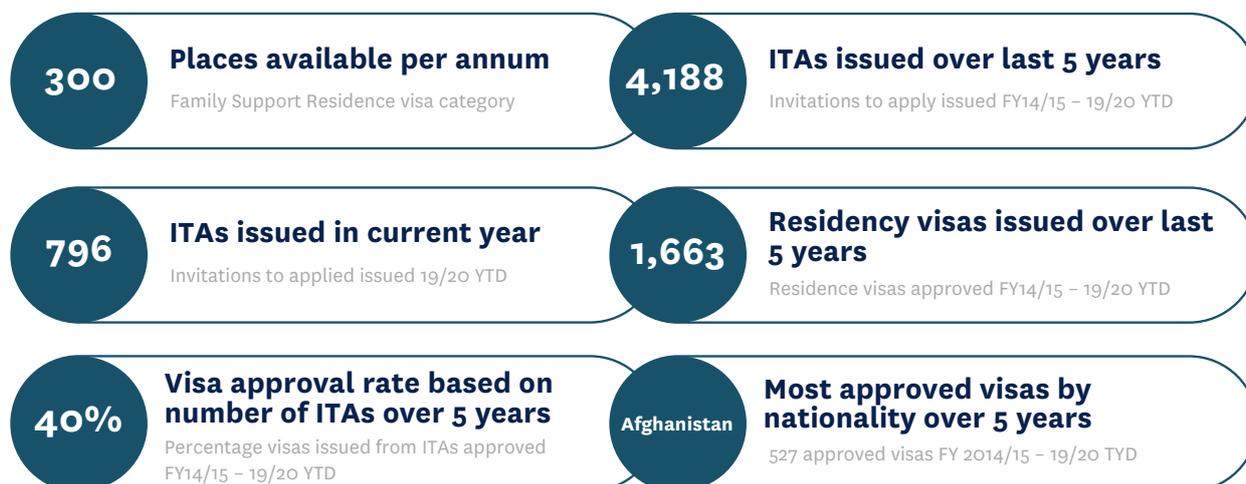


Diagram: Statistics about New Zealand family reunification refugees (INZ, 2019)

Marginalised migrants.

The term ‘marginalised migrants’ has been used in this report to define a population group of people who were born overseas and arrived in New Zealand of their own free-will as migrants to pursue employment, education or other opportunities; and who subsequently experience significant settlement challenges that require access to bespoke social work services.

For the purposes of this research, ‘marginalised migrants’ are considered to have higher needs than most migrants, including:

- Humanitarian-like backgrounds i.e. those with experiences similar to people of refugee backgrounds, but who have not arrived in New Zealand under any refugee pathway.
- Financial challenges i.e. long-term unemployment and/or reliance on benefits.

- Experiences of significant social exclusion and isolation i.e. limited access to family and community support networks.

There are no specific data sets that can be used to provide exact information about the numbers of marginalised migrants in Auckland. However, the following data provides some limited context:

- According to the 2018 NZ census, 28% of the population in Auckland identify as Asian (up from 23% in 2013); and 8% of the population identify as Middle Eastern, Latin American or African (Statistics NZ, 2019a).
- The 2013 NZ census shows that 46% of the Auckland region's usually resident population was born overseas; and, off those born overseas, 9% have been living in New Zealand for one year or less and 18% had been living in New Zealand for four years or less (Statistics NZ, 2019b).

Research findings.

“Social workers are the lifeblood of social service organisations. They are the angels who make the much-needed changes for people in the community.”

One: Refugee and marginalised migrant social work needs.

Interview participants were asked to describe the types of issues and challenges that former refugees and/or marginalised migrants might experience that require, and can be assisted by, appropriate (ideally bespoke) social work support.

Many of the issues identified are common between former refugee and marginalised migrant communities; with some specific nuances (noted throughout this section). Issues related to the resettlement/settlement journey intersect with other social needs, as well as systemic challenges including racism and discrimination, and cultural/language barriers in accessing support services and entitlements.

In general, interviewees described a higher level of need and complexity experienced by former refugees in particular.

Highest need groups – people from refugee backgrounds.

Interview participants identified former refugees as having particularly high and complex needs in relation to social work. In addition to specific cultural and linguistic needs, former refugees experience need in relation to:

- Experiences of trauma.
- Separation from other family members still overseas.
- The impacts of limited educational and economic opportunities during their refugee journey, in some cases due to many years spent in refugee camps.
- Experiences of racism, discrimination/stigma and exclusion in New Zealand by communities and other mainstream service providers.
- Navigating New Zealand systems and accessing entitlements.

Whilst the level of need is often different from individual to individual, there was general consensus amongst all interview participants that those most consistently experiencing the highest needs are asylum seekers, convention refugees, and family reunification refugees.

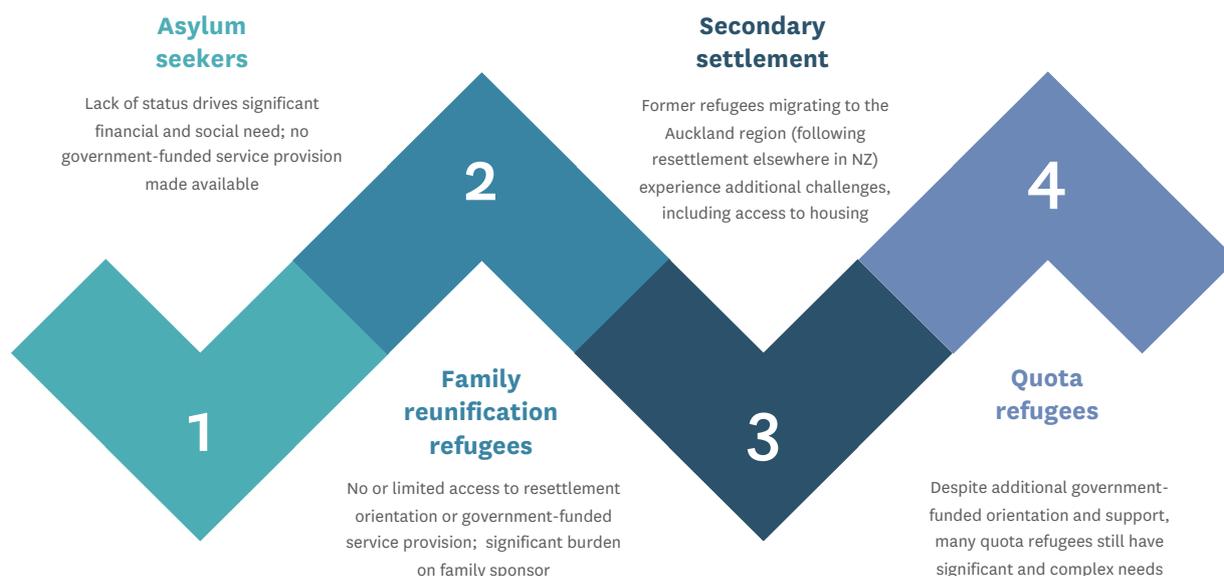


Diagram: Refugee-background groups with highest needs

Asylum seekers and convention refugees.

For those arriving in New Zealand as asylum seekers, there is no significant government support and no or limited entitlements, depending on their legal/immigration status. This results in significant financial stress and mental health challenges, in addition to basic needs around access to food, short- and medium-term housing and legal support – particularly for those engaged in the justice system as a result of their legal status. Social work support was identified as being critical in ensuring the human rights of asylum seekers are maintained and that they can begin to navigate their resettlement journey in New Zealand:

“The asylum seeker journey is quite different to other migrant and refugee groups. They are marginalised. Banks don’t want to open accounts, Work and Income tell us they don’t qualify for stuff daily, when they do. It’s a battle. Asylum seekers [have highest needs] and even convention refugees – who don’t qualify for residency for a couple of years and so don’t get a lot of support. With asylum seekers, often they don’t qualify for anything, so it’s really hard to even find them mental health support unless they are pregnant. It’s really hard to find them services, based on their status. All they get is a navigator from Immigration NZ to check in. They have no budget, and no one else looking after them.”

Family reunification refugees.

Family members of former refugees who are sponsored to residency in New Zealand under the Refugee Family Support Category were identified by interviewees as another group with significant need. As with asylum seekers and convention refugees, family members do not have access to the orientation support or six-to-twelve months of government-funded social work support available to quota refugees through current contracted provider, Red Cross. This gap is filled by NGOs using philanthropic funding.

The sponsorship of family reunification refugees can place significant burdens on families who struggle to adapt to life in a new country with new cultural norms; and is exacerbated by the additional housing and financial pressures:

“Family reunification refugees are the highest needs, because they don’t have any support... The Immigration NZ policy [makes it] very hard... [The sponsors] have to take care of family members for two years. They may be single mothers, not working, taking care of four or five people. Just imagine how they are meant to do that?”

“The families we struggle most with are family reunification refugees. They don’t know the NZ system, they don’t have housing, benefits. It’s the most difficult.”

Quota refugees – secondary settlement.

Some quota refugees may decide to stay in the Auckland region rather than follow agreements from Immigration New Zealand to settle in an allocated resettlement centre outside of Auckland. In some cases where Immigration New Zealand is not able to establish sufficient reason for this decision, quota refugees may be described as ‘self-settled’ and may subsequently be unable to access the usual resettlement supports made available to quota refugees, such as housing and social work support offered by Red Cross.

However, interview participants also described a growing trend ‘secondary settlement’ i.e. where former refugees choose to move from other resettlement regions to the Auckland region. This may happen at a later point in their resettlement journeys (e.g. six months or more). This ‘secondary settlement’ is understood to be driven by perceptions of greater opportunities in Auckland, social isolation and the desire to be closer to extended family members or friends, as well as more established cultural and social infrastructures that exist in New Zealand’s most diverse city:

“We help refugees that have migrated from other resettlement centres to Auckland, with housing, employment. When they arrive in New Zealand, they start to discover that they have friends, family, distant relatives in Auckland and then they want to move close to them to deal with their isolation. Arriving in Auckland they experience housing challenges. There has been three recent cases of suicide in the Somali former refugee community, and of other mental health issues, due to extreme isolation outside of the Auckland region.”

Through the process of secondary settlement, interviewees identified that former refugees are very likely to experience significant challenges in relation to housing and accessing other services in a new city; and as a result are more likely to require social work support. The scale of this issue is not well known, but research feedback suggests that it is a growing issue that may be falling through the gaps of current government-funded social work support to quota refugee communities:

“We need to account for... people being resettled and coming back to Auckland. No one can force them to stay in Hamilton, Dunedin... Finding out how many of them there are [moving to Auckland] is going to be important. Is it 10, 20, more? It will stretch resources [in Auckland].”

Highest need groups – marginalised migrants.

Interview participants working with marginalised migrant communities identified a number of population groups that were more likely to experience high and complex needs requiring social work interventions. The most commonly identified groups were:

- **New migrants, particularly those from humanitarian-like backgrounds** – who were described as being more likely to have difficulties navigating new systems, services and entitlements.
- **Women** – who are described as being more likely to experience language barriers, limited economic participation opportunities, social isolation and domestic violence situations.
- **International students** – who are described as being more likely to experience a lack of social family support and have limited access to government-funded services due to immigration status.
- **Elderly migrants** – who are described as being more likely to experience high social isolation, domestic abuse and difficulty adapting to the New Zealand culture.

“The ones who face the biggest problems are new migrants.”

“Over the years, we have seen a number of new migrants and young mothers lamenting they have no family or friends to support them and are feeling very dejected. When the husband leaves for work, it will just be them with their baby within the four walls of the room.”

“When an international student comes to see us, they are hoping to get support – be it emotional, practical or financial – as they are not eligible for maternity care. They have no one to help them.”

“We support international students. We have an increasing trend of family violence referrals coming for students. They lack in knowledge of the law and legislation and are new to the country with no family support around. They have conflict between couples. We support them with safety planning and try to empower them to have safe study in New Zealand.”

Key social work needs.

Through this research, it was possible to understand both the priority social work needs that refugee-background and marginalised migrant communities have; as well as recurring issues that need to be addressed to support positive resettlement/settlement and broader wellbeing outcomes. These are summarised in the diagram below:

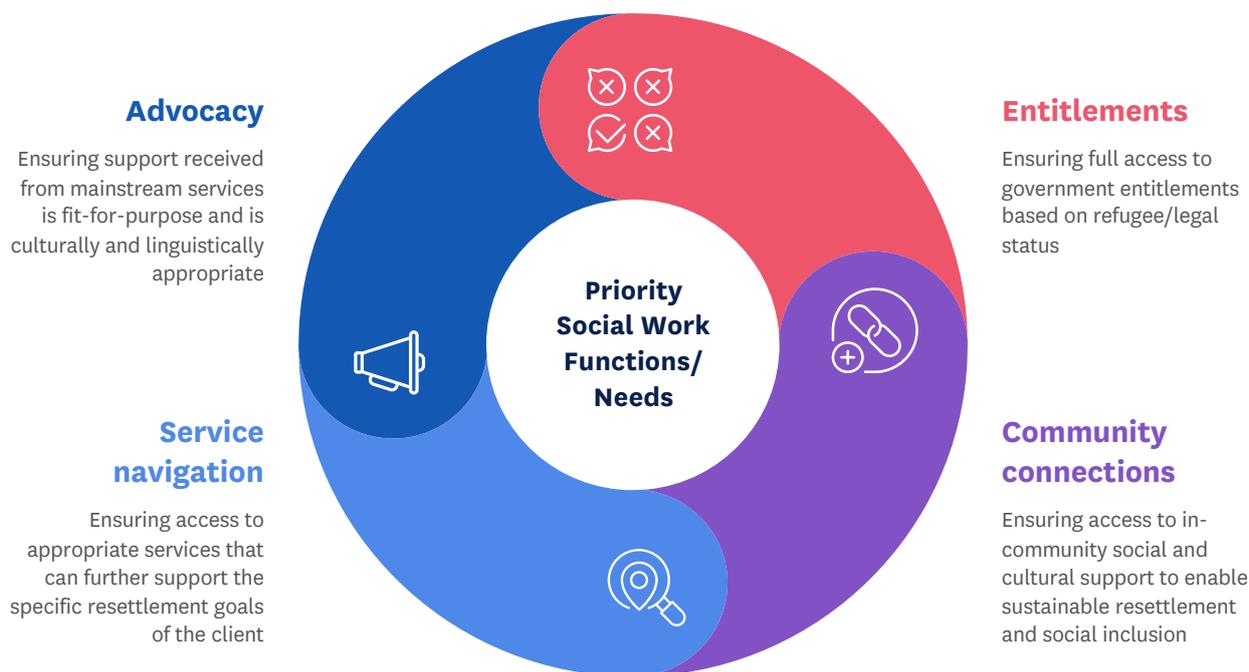


Diagram: Priority social work functions/needs of refugee-background and marginalised migrant communities

Based on interview findings, social workers – supported by the work of community support workers – are needed by former refugees and marginalised migrants in four key ways:

- **For advocacy** – advocating for the needs and aspirations of former refugees and marginalised migrants with other service providers and agencies with which the person/family is engaged. This may include, for example, other (mainstream) social workers, hospitals and health care professionals, Work and Income, Oranga Tamariki and schools. Often, the focus of this advocacy is ensuring that there is more joined-up support, appropriate cultural and linguistic support, and proper recognition and understanding of the resettlement journey and the unique circumstances that this can involve.

“Those with complex mental health issues go through to the mainstream. Our [social work] is about advocacy and [the mainstream’s] cultural competency about what might be presenting. Families can have quite different ways of expressing themselves that might not be understood. Helping the [mainstream] providers to understand what is coming across and the [level of risk].”

- **To access entitlements** – ensuring that former refugees and marginalised migrants have access to full and appropriate entitlements, including benefits, free access to services and social housing. This social work function/need is often strongly linked to advocacy.

“The cultural values can be a challenge. We have to help families understand the New Zealand system and how things work; ensuring that people get their rights in New Zealand. So often, we are dealing with systems and institutions that often don’t understand the

entitlements. The barriers around language and accessing services, rights and entitlements. Especially Work and Income and health.”

- **To navigate systems and services** – ensuring that former refugees and marginalised migrants are connected to other support services and programmes that may be available to them; particularly ones that are culturally and linguistically appropriate. Helping them to navigate and access these systems and services is key; as is ensuring they serve their overall social work goal plan.

“Clients require lots of support... linking them to resources, English classes and community groups. They are reliant on the social worker to advocate for them. Once they are linked to these resources, they [are more able to] become independent, slowly.”

- **To connect with communities** – ensuring that former refugees and marginalised migrants are well connected to social and cultural support in the community, so that a long-term network or community of care is developed to support their ongoing resettlement/settlement journey.

“We see people with mental health issues being referred to us [by social workers] because they know the social interaction at our programme is having a positive impact.”

Interview participants highlighted a range of specific issues that a social worker might typically encounter and support their former refugee and/or marginalised migrant clients to overcome. These most common/priority issues are summarised in the diagram below:



Diagram: Priority issues experienced by refugee-background and marginalised migrant communities, which require social work support

Priority issues identified by research participants include:

- **Mental health** – including dealing with trauma; managing separation from family; dealing with stress and anxiety caused by the immigration process, particularly for asylum seekers; and depression related to e.g., social isolation, unemployment or systemic experiences of discrimination:

“There can be a lot of focus on the fact that they can’t settle, because they have family left behind. Even though they get told about their options for immigration pathways, they find it difficult to manage and often it can get worse [over time].”

- **Social isolation** – including issues with accessing social engagement opportunities and services due to transport, language or childcare needs; a lack of family support systems in New Zealand; and social/cultural exclusion:

“Social isolation [is a big issue]... Children integrate quickest through school, dad through job. But mum – it’s difficult when they are stuck at home.”

“We have a case of someone who has been in New Zealand six years but is so isolated that they experienced mental health and other issues.”

- **Housing** – including advocacy with Housing New Zealand; supporting access to affordable, appropriate and sustainable housing; managing tenancy issues; advocating in situations of discrimination or exploitation with private landlords; supporting access to short-term housing for asylum seekers; and providing refuge for people experiencing domestic violence. The high cost of housing in Auckland exacerbates these housing issues.

“Quota refugees generally get a house. But everyone else [family reunification refugees and] particularly asylum seekers don’t. It’s a massive issue in terms of housing instability.”

“Housing is definitely the number one [issue]. People have nowhere to live and it’s very difficult to solve that in Auckland.”

“We have families with children in emergency housing. Without [stable] housing there are school zoning issues. It’s like a ripple, a vicious cycle.”

- **Legal status** – for former refugees, particularly asylum seekers, ongoing issues obtaining work visas and residency status can create a range of other associated challenges that require the support of a social worker; as well as financial challenges in accessing appropriate legal support. Former refugees who return home to marry also face challenges in navigating spousal immigration, as there is no separate immigration pathway for former refugee partners.

“Asylum seekers are waiting for their claims [to be assessed]. Only 30% are accepted at the first stage. Some come with savings but don’t realise how expensive New Zealand is. They need money for [long-term living costs] and their immigration case fees too. Sometimes they go to loan sharks because they don’t have any work rights; or have to work illegally, which leads to exploitation as they have no rights.”

“Around 60% of our work [with former refugees] was dealing with housing and immigration issues.”

- **Family violence** – for both former refugees and marginalised migrant communities, family violence was cited as a significant issue requiring social work support, education, counselling, mediation and other support e.g., housing refuge:

“We offer mediation – often we are the agents of vulnerable families when something happens. Families come to us directly. We have religious [elders/leaders] to give advice to the family to [ensure they are] in a safe place.”

“Most of our social work clients have family violence related issues. This [typically] means that to address their needs, experienced social workers and counsellors are required.”

Two: The ‘bespoke’ social work landscape.

Defining social work and ‘social work-like’ community support.

As defined by the International Federation of Social Workers (2014), social work is practice-based profession that “engages people and structures to address life challenges and enhance wellbeing”. Social workers act as a facilitator between clients in need and community services including health, welfare and housing. They work with clients in structured ways to determine goals and empower them to develop skills and work towards those goals with increased self-determination.

Following amendments to the Social Workers Registration Act, all social workers will be required by law to be registered by 2021 and hold a Practising Certificate that will need to be annually renewed through the Social Workers Registration Board. From that point on, the title ‘social worker’ will become protected and those without this Certificate will be unable to use the title (Social Workers Registration Board, n.d).

In New Zealand, many NGOs – particularly smaller, grassroots organisations – provide a variety of short- and medium-term programmes, as well as one-to-one support to individuals and families. These programmes and support services may be well-structured, or more informal and offered on more of an ‘as-needed’ basis in response to what staff and volunteers are seeing in the community. They are designed to deliver outcomes that are complimentary to, or seek to replicate, the types of outcomes that might be expected from formal social work practice:

“We have what we would call community support workers, who are taking up roles that would traditionally fall under social work.”

This community support work includes a strong focus on advocacy and helping individuals and families to access entitlements, navigate systems and services, and be brokered/connected to other resources and support that meet their needs:

“We [as community support workers] have had an opportunity to learn the New Zealand way of life, but we also have the same experiences [as refugees] coming to New Zealand. We are a connector, enabler and a bridge.”

In some cases where refugee and migrant mission-focused organisations provide this community support work, it may be provided in addition to having an in-house social worker. Often, based on interview findings, it is either offered by staff with some level of social work qualification (possibly obtained overseas and not formally recognised in New Zealand); or else, these organisations may seek to have a referral relationship or partnership with another organisation that does have registered social workers:

“Last year, we worked with 290 women, and 150 of those we referred on because they needed more support than what we were able to provide [without a qualified social worker in-house].”

“We have one full-time qualified social worker, and 1.5 support staff who do lower-level stuff like going to the bank. They are under the supervision of the social worker. We have volunteers, who come and go.”

“We have two part-time social workers – one is registered, and one is about to be. Prior to [their appointment] we utilised community health workers only. [They] have done lots of social work activities, and still do that alongside [our social worker].”

The continuum of support – from qualified social work to community support – is illustrated in the diagram below:



Diagram: Continuum of social work and social work-like community support

A key driver for providers utilising community support workers over social workers appears to be funding-related. These roles can more easily be managed by part-time staff or supplemented by volunteers to increase reach. Furthermore, the salaries of qualified social workers can be more challenging to fund on a consistent basis for grassroots organisations reliant on philanthropic funding, which often prioritises grants for projects over ongoing salaries/operating costs:

“We don’t get a great deal of funding, so we have to [refer to others] in order to meet the need. We don’t have enough counsellors, social workers; we can’t pay them as we do not get sufficient funding. All of the services we provide are free. We have no government funding for our employees [including social workers]. Without funding, we had to close down our safe house.”

Interview participants describe this continuum of social work and community support as having important value in effectively meeting the needs of families from refugee and marginalised migrant backgrounds; particularly – and importantly – when community support is offered in addition to social work, rather than in-lieu of. This ensures that the individuals and families with more complex needs receive both structured, professional support

and wider, ongoing community-based support – reducing any potential risks and increasing the quality and efficacy of support:

“We have to be careful what we call social work, a lot of things are like social work but are not [from a practice point of view]... In Auckland, we have registered and qualified social workers; we have some unregistered but [they are] trained social workers. We have both, [each] having a good understanding of what social work is, and doing the face-to-face work with families. The idea of the social work is to work on the more complex cases with more high and complex needs, so [social workers are preferred because it] needs a bit more skill on how to address the families we are supporting with resettlement.”

“Employing a social worker I get 8 hours but employing a support worker is 20 hours [at the same cost]. That’s the decision you have to make. But it is a big difference in the service that a social worker provides versus a support worker. We have to continually supervise the support workers around boundaries, self-care. Social workers are trained on how to do all that stuff.”

“Social work is different to general community support roles. With my experience and training [as a registered social worker], you know how to deal with certain issues, how to navigate the system a little bit easier [especially] where there are more complex clients and needs to follow up on... But, the cross-cultural community workers can also do things that we cannot do [as social workers] because they have influence in their communities. They are very embedded in the communities. And [they] know what is going on with the client’s lives and can follow up on things like appointments.”

“We really value the grassroots, bespoke social service providers, that have the right cultural competencies. It needs to be [a combination of] formal and informal in order to get the best outcomes.”

Bespoke social work.

‘Bespoke’ social work services are defined for the purposes of this research as those that are specifically targeted towards clients from refugee and/or marginalised migrant backgrounds, and are therefore able to meet the specific cultural and linguistic needs, as well as other unique needs, specific to these client groups. This research seeks to further understand and characterise the factors that make such provision both ‘bespoke’, and, as a result, more effective in delivering outcomes. More detailed characteristics of effective bespoke support are further detailed in section three.

Social work providers – the Auckland sector.

The diagram below summarises the key types of social work and community support providers that typically reach former refugees and marginalised migrants. These organisations can be grouped into different types as illustrated, dependent on factors such as

- Their overall mission focus.
- Whether they provide qualified social worker or other similar support.
- Whether their services could be considered to be bespoke in serving former refugees and marginalised migrants (see more in section three for bespoke characteristics).
- Their level of cultural competence.

- Their overall client base i.e. reach into former refugee/migrant communities.

The diagram includes key examples of organisations that fall under each category (focusing on participants in this research):

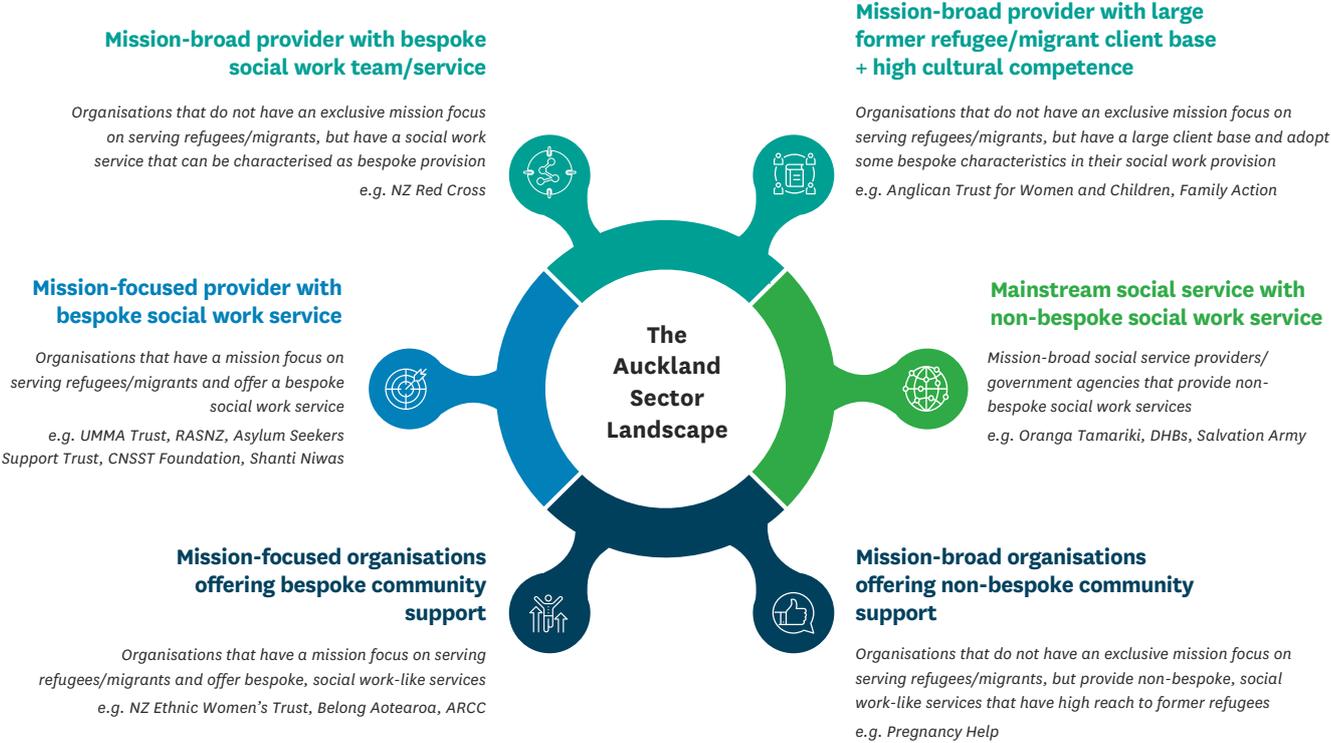


Diagram: Types of social work providers in the Auckland region

Appendix three lists organisations that were identified by interview participants as places of regular referral in order to provide effective wrap-around support to former refugees and marginalised migrants.

Three: Characteristics of effective bespoke social work provision.

Through this research it was possible to identify key characteristics of ‘bespoke’ social work provision – i.e. approaches and practices that are more tailored to better meet the specific needs of people from refugee and/or marginalised migrant backgrounds (see diagram).

There are, in some cases, further unique differences between bespoke social work provision that is designed for former refugees as distinct from marginalised migrant or ethnic communities (noted in this section); however, bespoke provision for the two population groups shares many similar characteristics.

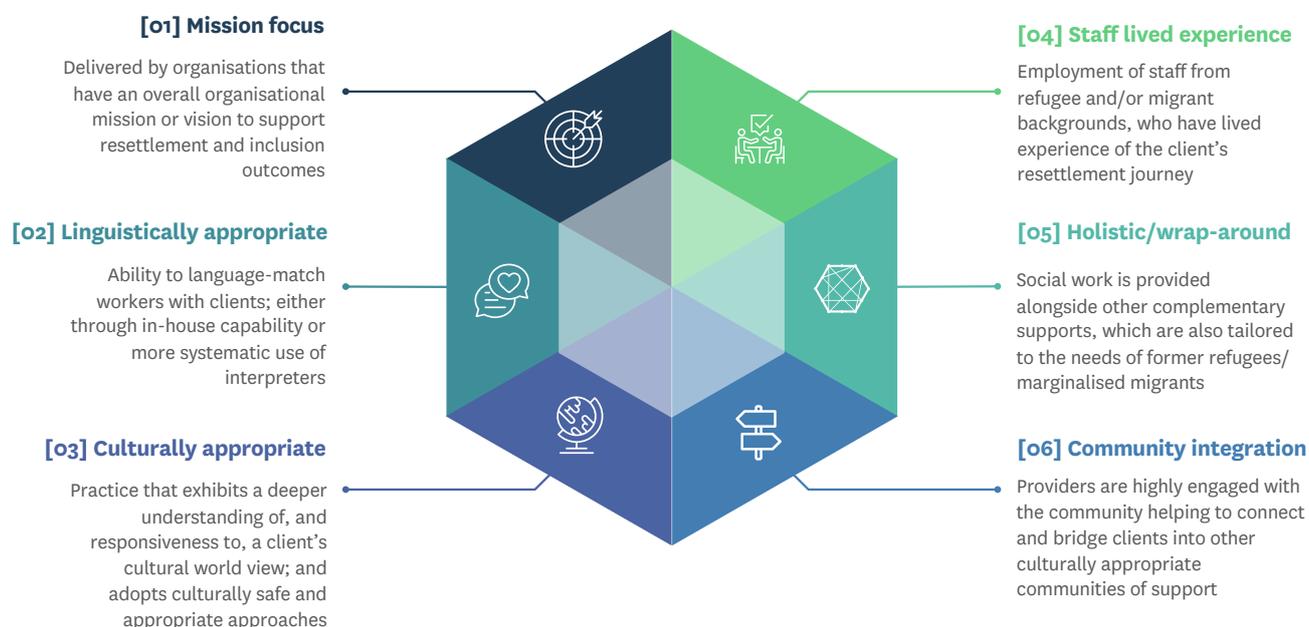


Diagram: Characteristics of Bespoke Social Work Provision

Having a specific mission focus.

Almost all of the participants in this research were from non-profit organisations whose mission or vision was centred on supporting better life outcomes for former refugees, marginalised migrants, or, in some cases, specific ethnic communities. This mission-focus enables organisations to be more focused in their approach and to develop (and employ) relevant expertise to the client group’s needs. This is understood by interviewees to support increased effectiveness:

“Our organisation has a mission to service refugees and migrants. It’s our main scope of work.”

“Refugees are all we are working with in terms of caseloads. We aren’t working with any other client group; so, our focus is on resettlement and [the] support needs around that.”

“The social workers from [bespoke refugee organisation] are outstanding. They’re highly focused. Working with them has been outstanding. The more bespoke ones are more effective, yes. The smaller ones, the really niche ones – I notice a [positive] difference.”

The mission-focus also enables them to develop, over time, stronger connections, working partnerships and ‘warm’ referral processes with other organisations that also serve former refugee/marginalised migrant communities effectively, and that offer other complimentary bespoke support services:

“Even if we do refer them on, we [ensure] a warm handover to someone who [we know] can provide culturally appropriate services.”

“If an organisation needs something from us, or we do from them, we call each other. It’s a collaboration.”

The mission-focused nature of bespoke social work providers also means that they have a deep commitment to achieving outcomes for clients; going ‘above and beyond’ what might reasonably be expected by a service provider in order to ensure that the needs of refugee and marginalised migrant communities are being met:

“We are there to serve the community. It’s our culture.”

“We are available in ways that mainstream organisations aren’t – it’s a way of life... For us, there is a cultural context that makes supporting people an obligation, not work. It is a collective society and it doesn’t matter if we get paid. Our point of difference is that we do it for our community. That is the difference between us and the mainstream.”

“Our staff take clients to the hospital, and I say to them ‘you’re not a social worker’, and they say, ‘well who else is going to do it?’”

“People call at 9 o’clock at night. I always take the calls. They need...to feel safe.”

This trend of ‘being available’ was particularly noticeable for organisations that provided informal ‘social work-like’ support services, without registered and qualified social workers; as these organisations in general tended to describe practices that were highly responsive and less structured. This does, however, present risks that need to be well-managed.

Whilst this commitment to serve the mission can present some challenges for the organisation in terms of capacity, staff burn-out and resourcing; it was also viewed as a positive in terms of making the services more responsive, particularly in emergent crisis situations:

“[Clients] know that we are there for them 24-7...My phone is always on. I don’t know much about other organisations, but they work on a set time. But as soon as we get a referral, we immediately swing into action. It’s immediate response to their needs.”

Providing linguistically appropriate support.

All interview participants highlighted the importance of responding to the language needs of clients from refugee and marginalised migrant backgrounds. Bespoke providers often had strong in-house language capability through multi-lingual social workers, as a consequence of their increased likelihood of employing people from refugee and migrant backgrounds (see further below in this section):

“We are culturally appropriate. We know their needs. I can speak 5 or 6 languages. We have people that can communicate easily.”

“Our staff represent the communities we serve; we don’t need to use interpreters.”

Several of the interview participants described receiving mainstream case referrals, or requests to provide support, due to their in-house linguistic capabilities:

“Some other service providers, hospitals and the courts call us to provide translation and also expertise around cultural writing.”

Where specific language-matching is not available in-house, interview participants described a systematic practice of ensuring that language needs of clients were otherwise met; either through the use of in-house support staff or volunteers as interpreters, partnerships with other providers that have the relevant language capabilities, or the use of mainstream interpreting services.

“Each of us speaks more than two languages. Some three, four, five. If there is [still] a language barrier, we have a network of community leaders to draw on who can support us.”

Providing culturally appropriate support.

By far the most commonly described characteristic of bespoke social work provision was that providers possess a depth of cultural competence that enables delivery of best practice approaches in terms of cultural safety and fit. Provider organisations, their social workers and other support staff have a more nuanced and in-depth understanding of diverse clients’ cultural world views and needs; whilst also understanding how this might interface with the New Zealand culture and systems.

Other key cultural considerations that underpin bespoke social work practices were described by participants as including language-matching (see point above); ensuring a strong social work focus on the whole family unit instead of the individual; and navigating culturally specific expectations around certain issues – such as housing and parenting.

Larger service providers participating in the research appeared more likely to formalise their cultural competency into bespoke cultural frameworks, interventions and practices:

“We focus on Asian migrants; for our services we have special skills in this area and can adopt a culturally and linguistically appropriate approach to empower our families. We have developed an Asian family violence framework, which uses a culturally appropriate approach to meet the niche complex needs. We can use our skills, experience cultural knowledge and strengths to develop specific interventions.”

By providing more culturally appropriate support, all bespoke social work providers believe that they are more able to provide relevant and effective support to the client and their family.

“We are using our knowledge and cultural values to advise and help.”

“We understand [our client’s] culture. If you didn’t know their culture, it would be more difficult to advocate for them. [Our practice] is more effective.”

“It makes a big difference [to culturally match the client and social worker] because they know their cultural beliefs but also know the New Zealand system. Otherwise you don’t know what is behind [a person’s situation/needs].”

“We know our community – the values, the culture, the languages... We know how to deal with the families. There is a lot of difference between mainstream social work and cultural social work. The main difference is that the mainstream is client-focused, and we are family-focused. We cannot take an individualistic approach, we have to be holistic because, for [our culture], family is the main unit.”

The cultural approaches and practices are often ethnic group specific. Where a bespoke social work organisation is unable to achieve an exact ethnic group or cultural match, they describe systematically using cross-cultural workers with sufficient cultural understanding and to ensure appropriate levels of cultural competency:

“Auckland is the largest resettlement centre in New Zealand and there are more ethnicities settling here than anywhere else. So, we don’t always have the key worker matched by language to a family; we use cross-cultural workers [alongside the social worker] when we have those needs.”

“For some minority groups in the Asian community, we don’t have enough specific resources. As an Asian provider, we do our best to empower and support their needs.”

Bespoke providers working with former refugees position themselves and their approaches to be able to respond to ethnically and culturally diverse clients. This is supported further by having a more in-depth understanding of the unique experiences and needs that clients may have as a consequence of their refugee resettlement journey:

“Asylum seekers are a wide range of people – they could be from many different countries and therefore cultures. Afghanistan, Sri Lanka – our staff have to understand the cultures.”

“Our focus is bespoke [because] we look at the cultural needs of support as a key focus... [We have] cultural competency and an understanding of different cultural values. We see the social work framework as an ecological model – how a person and family interface with the community, with systems they come across, and the political environment in their home country and how that impacts them here.”

Culturally matched staff with lived experience of resettlement.

Almost all interview participants’ organisations employed staff with lived experience of either the refugee resettlement or migrant settlement pathway; and one interviewee highlighted the importance of having lived experience at the organisation’s governance level.

For social work providers working with former refugees in particular, the ability to employ refugee-background social workers was seen as a critical enabler of trust-building and, subsequently, better engagement and social work outcomes:

“We’ve been through the journey ourselves... Even if mainstream social workers have had cultural competency training, they haven’t got these shared experiences... I was helping a former refugee family with immigration issues, and when we talked, we realised that we used to be in the same refugee camp. This builds confidence through [shared] experience. You can’t find that in other agencies, coming from the same journey. The relationships and trust matter.”

“I come from a refugee background and do know their culture. It’s personally been helpful for me [as a social worker], and for the clients as well. It’s been a privilege to use that cultural knowledge. In the mainstream, you can’t use that cultural knowledge. So, it’s good for the clients and also for me to use those skills. Because I know the culture, I can read between the lines and figure things out a bit more.”

“What I notice with our social workers is their discourse with families is a rich picture that captures all of their hopes and fears, and then they get the information that fits with their cultural vision and they can make the right decision, and then they are [ultimately] settled.”

“A lot of our staff here are from refugee backgrounds. That makes a phenomenally outstanding difference. It brings them right in with the clients in way that I don’t know [others] can. And, secondly, the cultural awareness makes a phenomenal difference. People feel safe with [our staff] because they are ‘their’ people. So, the support they can provide to their people is phenomenal.”

Proactive efforts to employ social workers from refugee backgrounds – as well as ensuring professional development opportunities for refugee-background cross-cultural community support workers – was identified by two interviewees as being critically important in building a pipeline of qualified, experienced, diverse and culturally competent social workers into the mainstream:

“For our social work team, we only employ people from refugee communities. We want our refugee communities to have the opportunities to have experience, get qualifications and registration, and move on into the mainstream as professional social workers.”

“All of our team come either from a refugee background themselves or they have had similar journeys; or came through migrant pathways and then worked with former refugees for quite a long time. So, often the pathways for them to be in the [social worker] role is as a cross-cultural worker – like a broker, interpreter role – and they go on to a social work role.”

Adopting a holistic or wrap-around approach.

The bespoke social work providers that participated in this research were highly likely to offer other programmes and services that could be considered as complimentary to social work in helping to achieve positive outcomes for clients. These complimentary services were similarly tailored to meet the needs and aspirations of former refugee and marginalised migrant communities. In this way, providers described an ability to meet the whole needs of a client, in the context of their family, community and stage of resettlement/settlement:

“We work for a family, not just one client... We have a wrap-around service. The goal might be, for example, housing or getting a driver licence to reduce social isolation - but it’s more than that. It transforms family life.”

“We have wrap-around support, family centred, culturally and linguistic appropriate approach for Asian families. We provide intensive social work and counselling support; [supported by] settlement support and employment and enterprise support; as well as social housing and immigration services.”

Integrating social work support within the wider community context.

Interview participants all described ways in which their social work services were integrated into the community. For small, grassroots organisations – that provide community support workers in lieu of registered and qualified social workers – this community integration is particularly common. In practice, it can be characterised by:

- The provision of one-to-one/family support alongside other programmes that are community-led, and that families are supported to access and participate in.
- A general level of high visibility in the community; supported by staff and volunteers who are highly connected to community elders/leaders and community networks, who in turn can provide clients/families with further ongoing cultural and social support.
- The capacity to encourage and accommodate community ‘drop-ins’ to help families manage and navigate any emerging or one-off support needs.
- The capacity to connect families with other families and help to build a wider social support infrastructure.

“They know us [through participation in our community programmes], they have my number, so they call us when they want help.”

“We can provide more long-term support when people have been working with a social worker. We are an open platform for them to come in and out [for support].”

For larger providers with qualified social workers, community integration is still a characteristic of their services; however, interview feedback suggests that this community integrations is more likely to be achieved by:

- Organisations maintaining active two-way referral partnerships with the smaller grassroots groups.
- Employing community support workers whose role is to build connections that enable the organisation to consult with, and be more embedded into, culturally appropriate communities.

“Our community support workers are really recognised within their community, both in and outside of their roles with [our organisation]. They have respect and mana... The community leans on them enormously.”

“Our social workers knows the subtlety of the links in the community – which people will be able to support which people. It’s an enormous power, connecting people to those communities... [We] see how they struggle when they are isolated.”

Four: Challenges with mainstream social work (and other) services.

Through this research, interview participants offered their perspectives as to the approach, quality and efficacy of ‘mainstream’ social work provision – i.e. social work services provided by organisations that do not have a specific focus on serving communities from refugee and/or marginalised migrant backgrounds.

These insights also included perspectives about other non-social work services delivered by mainstream providers – including government departments such as Work and Income, Housing New Zealand and Oranga Tamariki; as well as others such as District Health Boards.

Insufficient cultural and linguistic competency.

In general, mainstream providers were criticised by interview participants for having underdeveloped competency in dealing the cultural and linguistic needs of clients from both refugee and migrant backgrounds. This is understood to compromise the quality and efficacy of these services:

“The culture, it’s not something [staff at mainstream organisations] can comprehend, it is a big, big obstacle for them... [Mainstream] agencies have different policies and procedures and [they] aren’t really able to get outcomes for the clients.”

“Trained social workers are meant to be culturally competent; however, they do get caught in the systems of providing the same type of service [to all people], and not taking the time to listen.”

This lack of appropriate competency in the mainstream often results in bespoke social work providers receiving regular requests to offer additional cultural and linguistic support to mainstream social work clients:

“Sometimes the hospital social workers will contact us because they don’t have [capability] for the cultural needs.”

Whilst some mainstream service providers may have implemented steps to increase their cultural competency, this competency is described by interview participants as not being suitably advanced or nuanced enough to deal with the unique needs of people from refugee and marginalised migrant backgrounds. Once social work clients experience inadequate cultural competency, trust can be lost and the likelihood of maintaining effective ongoing engagement and outcomes is reduced. Where clients subsequently engage with bespoke social work providers, overcoming this lack of trust can be a significant obstacle:

“If a mainstream worker has already been engaged with a family, when we are engaged with them later, the family is more reluctant to accept our services. It is a barrier for them to get timely and appropriate support if they had a [poor experience] – they are not open to you, they are reluctant, it is more difficult. If we are [engaged] in the first place, we have the right approach.”

Limited responsiveness to complex resettlement needs.

Interviews highlighted perceived lack of competency across mainstream social workers – and other mainstream service providers and government agencies – in effectively supporting former refugees and their complex resettlement needs. This includes a lack of ability to recognise, understand and manage needs that former refugee families experience in navigating a new culture and new systems, dealing with trauma and separation from family members, and managing other intersecting needs such as disability:

“I don’t think the mainstream providers are well equipped [to support former refugees]. Thinking about disability providers or Oranga Tamariki, it’s quite shocking how they consider working with families. You’d hope they’d be culturally competent, [but] there is still quite a lot of work to do.”

“The mainstream don’t understand the situations that the refugee population comes from. I’ve worked with the mainstream in regards to my [refugee] clients – they try and apply the same rules and thinking that they would to other people, even though the situation is really different.”

“[There are mainstream] social workers saying that [a refugee client] is lazy. It’s not laziness, it’s trauma. It’s that sort of thinking. We notice a huge difference between our social workers [and mainstream]. It’s shocking.”

“The refugee community comes with levels of trauma that mainstream organisations are learning how to deal with but don’t fully understand how to support.”

Systemic issues with Work and Income.

Based on feedback from a large majority of interview participants, there are widely-held perceptions across the sector of systemic issues with the way that Work and Income New Zealand manages cases and interactions with former refugees and marginalised migrants. This includes criticism of front line staff for the lack of consistent understanding of refugee entitlements and the lack of cultural competency training. This is demonstrated by the frequency with which former refugee and migrant clients have reported experiences of racism and discrimination directly to interview participants:

“The whole system at WINZ isn’t [working]...The WINZ workers can be judgemental and non-strengths based. WINZ staff need more training... One of our clients said to me, ‘I’d rather be dead than go to WINZ, but I have to for my children.’ So many of our clients say the same things.”

“I constantly work with WINZ and have had to go back to them to get decisions reviewed because the people working on the front line don’t know the rules for people from refugee backgrounds.”

“Discrimination in general is [an issue] particularly in WINZ.”

Five: Challenges experienced by bespoke social work providers.

All interview participants cited organisational challenges in relation to the effective and sustainable delivery of bespoke social work services for former refugee and marginalised migrant communities. Some of these challenges are unique to the organisations’ operating context in serving these specific communities; whilst many of these challenges could also be characterised as widespread issues affecting any NGO organisation in New Zealand e.g., funding and staff burnout.

In general, however, there is a perception amongst the interview participants that these challenges are exacerbated due to:

- The level of resourcing needed to deliver bespoke social work services that address the complexity of needs experienced by marginalised migrants, and in particular, former refugees.
- The increased likelihood of bespoke providers offering more holistic and wrap-around models of support, including additional cultural and language support.

“[As a funder] we notice a tendency for these [refugee and migrant] organisations to do more of the holistic support, the wrap-around support than any other general [service provider]. I think it is because of the lack of provision at a mainstream level to effectively meet the needs of refugees and migrants.”

The diagram below summarises the key organisational challenges identified; which are also described further in the sections below:



Diagram: Challenges experienced by bespoke social work organisations

Funding limitations.

Most of the interview participants whose organisations had registered and qualified social workers, stated that they have a mixture of government funding and philanthropic funding. In these circumstances, government contracts were the primary source of income, and philanthropic funding was typically utilised to ‘top up’ these contracts.

These interviewees felt that their government contracts presented financial limitations, which would otherwise compromise their operating viability and efficacy without further philanthropic investment. Funding from philanthropy was seen to help these providers to:

- Maintain their more intensive, holistic and culturally and linguistically appropriate service models, seen as essential for dealing with the complex needs of former refugees and marginalised migrants.
- Have extended capacity to meet levels of demand within the community; including reaching clients that do not meet government contract criteria but still have high levels of need, e.g., asylum seekers.
- Achieve better pay parity with other government agency social worker roles.

“We get funding from MSD [Ministry of Social Development] as well as non-government funding. We are contracted by government for a particular number of clients. It’s not 100% of the funding we need. For example, we have contract to work with 80 clients a year, and we get \$50,000. That is roughly the salary of a full-time social worker at an NGO, and the agency also has to cover all the social worker’s transport, computer, mobile phone and office costs. The actual amount paid for a social worker [salary] is significantly lower than in a government agency, such as Oranga Tamariki. In addition, 80 clients is a lot of clients when they are refugee clients, because they have multiple issues and it’s complex; and settlement for new arrival refugees is measured in years not months. We might have 179 clients on our books at any one time, because some are continuing on. So, I would say there is a poor match between the contract and the dollars per client.”

“The main challenge is the number of hours we have available to do the work. The demand is so high, so it comes to resourcing. We don’t get any government support; politically they don’t want to support [asylum seekers].”

“We operate at a deficit of government funding of about \$150k per year, which we fill with philanthropic [funding]. We are funded per referral in some cases – some might just be a phone call, but others are much more intensive. The really difficult ones that you need to do the work with would be the ones that aren’t really [well] funded.”

“Government funding is not sufficient to meet the increasing needs of the community. As a community-based provider, we over-deliver [on our government contracts] over the past three years and supported 30% extra [families] in response to the increasing need.”

Whilst the medium and larger providers typically had some government contracts, the more grassroots organisations providing community support were much less likely to have any regular or sizeable government funding contracts. This presents challenges with long-term sustainability.

Interviewees from philanthropic funding organisations were clear about how their funding approach is different to government funding, with a stronger focus on:

- Investing in outcomes for priority communities, particularly former refugees and including asylum seekers and family reunification refugees.

- Funding in ways that seek to encourage organisational self-determination.
- Supporting systems change to ensure that communities of highest need have more equitable access to support services (including social work).

“We deliberately don’t fund mainstream services. It’s not where our focus lies, and there are other funders that can – and should – do that, especially government. We are more interested in the reasons various groups and communities don’t have equitable access to services; the systems change required, and ways of fixing a broken system.”

“We are looking to fund to build resilient communities, to empower active citizens that know how to navigate challenges in their lives, to understand their rights. It all leads to reducing isolation, increasing inclusion and building resilient communities with inter-generational type outcomes. That is the value with social work.”

Staffing, staff development and burnout.

There was consistent feedback from interview participants that issues relating to staffing were a significant challenge for bespoke social work providers. Staff issues centred on:

- Stress and burnout related to both the difficult nature of the work and the levels of demand placed on staff to be available and meet the need in communities.
- A lack of long-term funding security, which limits the number of permanent roles and affects job security.
- Low staff salaries compared to government agency social workers; which often results in staff turnover as staff seek more secure and higher paid employment.

“One of the main challenges is employing staff on a permanent basis [...] as a consequence of lack of funding... It is very important that service providers get longer-term funding contracts, like four-year cycles. It is very disruptive for families if a social worker is on a short-term contract. That is a systemic thing that needs to change.”

“The pay band for social workers is quite low. Government social workers can be quite well paid. People working in the NGO sector – even registered and qualified social workers – there is a pull for the work itself, it’s a different type of motivation. But it’s difficult to retain people.”

“Groups want to pay people well, but it is not at all [on par]. We see mainstream providers paying \$70-80,000 for a social worker, and for an ethnic group it might be \$40-50,000. And they bring so much cultural competency that can’t be quantified.”

“We have a high turnover of staff. It might be wages, also the level of trauma we are working with is huge [and] we work long hours.”

“We lost a social worker to Oranga Tamariki. How long can people [be expected to] work for passion?”

Organisational capacity, capability and development.

As with many NGO organisations, interview participants consistently described challenges with organisational capacity, capability and development. For some organisations, their practice-focus on responding to high needs cases means there is little time to focus on operational planning and development:

“We are constantly responding to emergency, so we aren’t able to plan for the long-term.”

“[We need] more capability building investment [to] build our capability and help to maximise our strengths, and community approaches that are more sustainable.”

Most organisational challenges are driven by insufficient resourcing, particularly for small- and medium-sized organisations, which impacts on their ability to:

- Work on long-term organisational strategy.
- Ensure regular professional development and capability building.
- Properly evaluate the short- and long-term impact of their services; and work on service improvement.
- Build the internal competencies, policies, processes and accreditations required to access more sustainable government contracts.

“Government funding is rare, and it’s so difficult. They are only looking at the big organisations. The grassroots organisations are dying.”

“We’ve had to close [critical services] because we could not secure funding... We are hoping that we can get MSD level 2 accreditation [to address this].”

Opportunities to improve services and impact.

The interviews with research participants generated a number of insights about opportunities to address bespoke social work service gaps, overcome common organisational challenges, and ultimately increase the positive resettlement/settlement outcomes and long-term wellbeing of former refugees and marginalised migrants. Based on these insights – and in response to findings from this research – the following opportunities for impact have been identified:

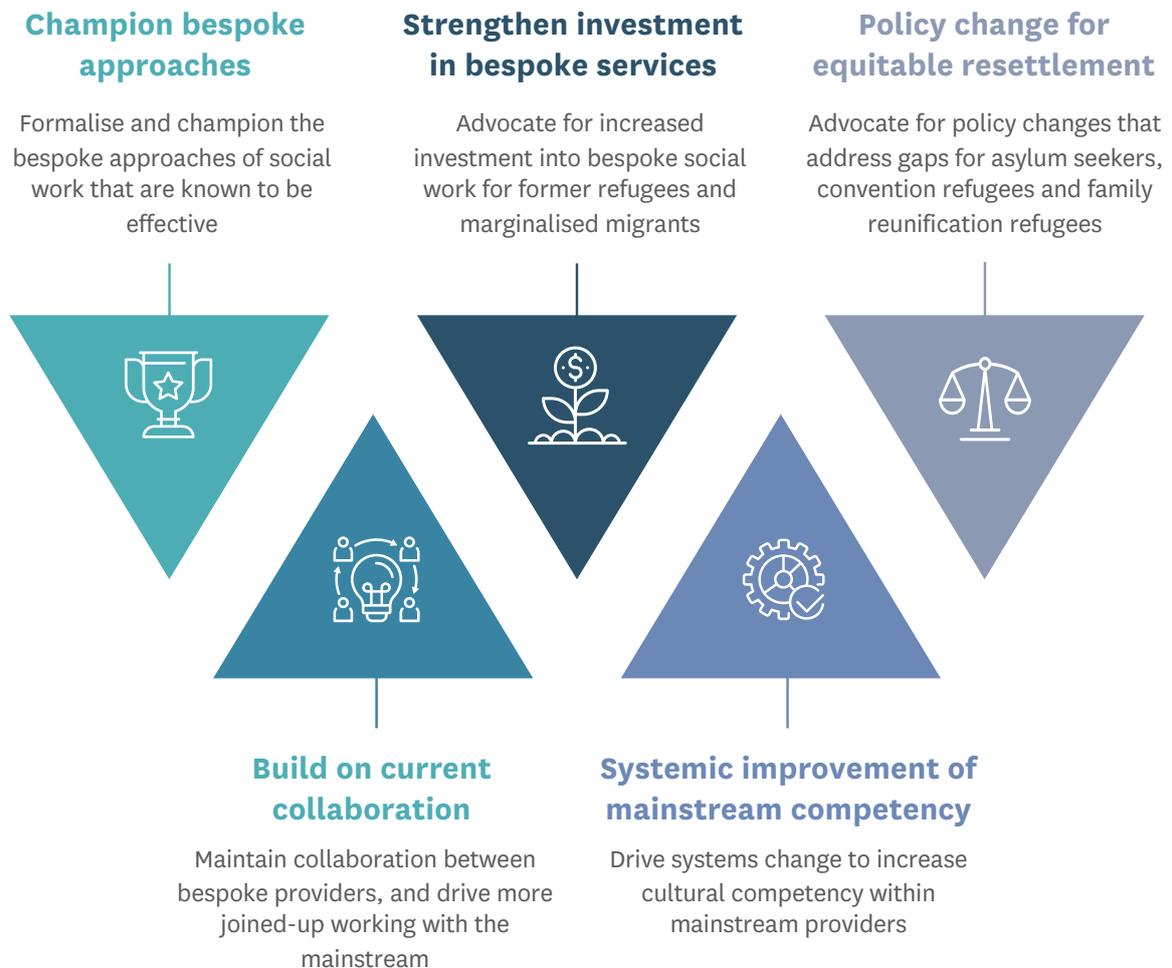


Diagram: Opportunities to improve bespoke social work services and strengthen outcomes for former refugees and marginalised migrants

One: Formalise and champion bespoke approaches

This research has generated insights that help to describe the characteristics of bespoke social work support that generates the most effective outcomes for former refugees and marginalised migrants. These characteristics are described in detail in the sections above (see page 24).

There is potential for sector leaders to formalise these characteristics into a framework or model that can be championed to other providers and funders to share and invest in good practice. This framework may require further development by lead organisations.

Interviews highlighted that such bespoke approaches are critical for impact; and can be most effective when supported by quality community development work. This development work is seen by interview participants as having potential to offer more long-term impact by supporting community resilience and early intervention/prevention:

“I would think we need more [support workers]... [They] are the forerunners – they know what is going on, the community talk to them, they know the culture... [Their] presence is very important for people to come and ask for help. They are a bridge or conduit to [social workers and other professionals] ... There are ethical boundaries that social workers have to deal with, so they can't be embedded in the community [in that same way]. Having the cross-cultural workers [adds values] by working in the community.”

“[Investing in community navigator support alongside practicing social workers] would make more sense to me... You need to have both – good connections and qualified social workers... A bit of both – helping to navigate [alongside social workers]; people in small organisations supporting families on where to go.”

“People need caring communities. A lot of the future response, including mental health, have to be in a community setting.”

“We need to learn from the Whānau Ora model – from organisations like The Fono and Waipareira Trust. The whānau ora approach shifts outcomes for families. It's culturally appropriate. They have navigators so you don't get to the point of crisis where you need a social worker. What equivalent model could we have [for refugees and migrants]?”

Two: Strengthen investment in bespoke social work approaches.

Every interview participant described the need for more investment into bespoke social work and complimentary bespoke community support roles, to improve outcomes for former refugee and marginalised migrant communities. Recommendations from interviewees included:

- Increased investment in bespoke social workers by government funding agencies, to enable greater reach and ensure uncompromised delivery of the quality bespoke approaches required (language support, wrap-around approaches etc.). This will be particularly important in terms of investing in support services available to former refugees as the quota intake increases.
- Systemic changes to government funding contracts that enable bespoke providers to achieve social worker pay parity.
- Increased investment into supporting community development/navigator roles within smaller grassroots NGOs, to help extend and sustain the outcomes that are possible through social work services alone.

“It is costing the country millions to deal with the historical issues of [culturally inappropriate and ineffective services] for Pacific and Māori. We have an opportunity with refugees to do a better job... Let’s have more social workers now... and put in sufficient resources now so the support doesn’t have to increase ten-fold in twenty years because we didn’t put enough support in at the beginning.”

“Despite the ideal – of having mainstream providers being able to provide [culturally appropriate] support – it’s not happening at the moment and there are limitations on what other providers can do. The [solution] needs to be managed quite carefully. It’s important that there are people managing complex cases... that you have the right people doing the right role, so it doesn’t cause more damage than good.”

“If we had a team of 5 or 6 social workers, we could do much more proactive work, to ensure people are engaging in their communities, finding work quicker, have their housing issues sorted.”

“Our government funder didn’t specify we needed to have social workers; we decided to [use funds in that way] because we saw that social work has the best fit in managing complex needs around resettlement and that the complexity and risk issues required [a social work] skill base. It’s more complex than other types of social work support for other [populations groups].”

“Auckland’s refugees will increase in numbers, so the resources need to increase accordingly.”

“We need to be funded at a reasonable level to equip us to respond to the increasing need; to keep our professional development, structure, high quality and safe practice.”

Three: Drive policy change that support equitable resettlement outcomes.

Interview participants described the need for policy change to address current inequities of access to support for former refugees, dependent on their status and resettlement pathway. Currently, the level of funded provision available to quota refugees – who arrive in New Zealand as permanent residents – is not matched for asylum seekers, convention refugees or family reunification refugees. According to interviewees, this is leading to significant disparities in terms of resettlement and wellbeing outcomes within refugee-background communities.

A number of key opportunities for government policy and funding strategy review were suggested by interviewees, based on their potential to address inequities and strengthen resettlement and community wellbeing:

- Access to funded orientation programmes for asylum seekers and family reunification refugees.
- Extended social work support, beyond the current first year of resettlement – and ideally for the first one to five years of resettlement.
- Funded social work provision for asylum seekers and family reunification refugees.
- A review of the government support policies for quota refugees that are resettled in other regions and subsequently move to Auckland (secondary settlement).

“Not all government agencies have specific refugee policies, yet the Government is committed to a refugee annual quota. Some agencies have had refugee policies in place for 20 years – such as the Ministry of Education, which funds refugee children in schools for up to five years. That’s a recognition that refugee resettlement takes at least five years. MSD [Ministry of Social Development] has no specific refugee policy, and very few of the other agencies do. Settlement doesn’t happen in one year. All of the research shows it’s 5-7 years.”

“If we make enough noise, then [mainstream providers] will make an exception [to support asylum seekers]. But, it’s only that one-off exception. We have to be careful how often we do it. Ideally, what we want is a policy change.”

“If the government is not able to fund support for families arriving [under family reunification], they should make sure the sponsor is actually able to support. Which is really difficult [to assess]. So, ideally, it’s important for people to have their families around them for support, but we know there are cases where [family reunification] has been detrimental to [the sponsor]. If there was support provided to the families that arrive, then they wouldn’t fall apart. I would advocate for funding and support”

“If you are committed as a country to bringing in refugees with special needs, solo mothers, at-risk women with children; then it goes without saying that you need social workers... An Afghan solo mother – is she going to be able to get a job in the first 5 months of resettlement? Almost impossible. It’s a three-to-five-year journey to go from benefits to working part-time or full-time. If she only has six months of [social work] support... how will we support them to stand on their own two feet financially and socially?”

Four: Build on current collaboration between bespoke providers.

The majority of interviewees discussed the value of collaboration between bespoke providers, and the ongoing need to:

- Continue positive collaboration between bespoke providers.
- Continue and build on collaboration between formal social workers and other in-community supports.
- Improve joined-up working in a wider 'systems' context – i.e. between the mainstream and bespoke providers, and between government departments that fund and/or provide services to former refugees and marginalised migrants.

To generate impact, interviewees suggested that collaboration should be focused on:

- Generating resourcing to increase the level of bespoke social work services available to communities.
- Developing more consistent and reliable referral pathways with the mainstream.
- Strengthening inter-agency case management for the highest risk families that are engaged with multiple agencies.
- Proactive sector collaboration on addressing systems issues, such as the lack of mainstream cultural competency.

“We need better system connectedness, so we know there are reliable referral pathways.”

“The sector needs to come together, to talk about the issues and the solutions. The sector is too small to work in silos... People on the ground at the coal face need to meet, to talk about the issues and how they respond. [Currently] they might all be doing their own thing.”

In relation to support for former refugees, a number of interviewees outlined the possibility of exploring the development of a lead social work agency, or type of consortium. One interviewee noted that their organisation was part of a small consortium with two other agencies, focused on serving the needs of a specific age group:

“We need a [lead] organisation to deliver social work, so we can refer people to that organisation, who is able to deliver culturally appropriate services [for refugees], with trained, refugee-background social workers.”

“We would [like to see] a central resource of social workers that we could draw from to requisition support for clients. I've been advocating for this for some time – sharing resources and skills.”

“The [social work response] needs to be collaborative, it's not [an either/or] bespoke or mainstream. Combine the services, maybe have a lead agency. Other agencies need to be supportive. It shouldn't be competing for resources or approaches. Families won't benefit if they're not in agreement or four agencies are doing their own thing [in isolation]. I do believe someone needs to bring everything together.”

Exploring the idea of a consortium could include looking at other models from different sectors, for example, Māori and Pacific Trades Training, which has developed a specific vision, model and membership approach to

develop culturally appropriate ways of meeting the educational needs of Māori and Pacific learners. A consortium approach may enable organisations to maintain their specific cultural or issue-based expertise, whilst, as a sector collectively, more effectively managing limited resourcing and meeting the diverse and complex needs of former refugee communities.

Five: Drive systemic improvement of mainstream cultural competency.

Through this research, it was possible to identify systemic challenges within mainstream social work services and other services (e.g. hospitals, Work and Income), in relation to their cultural and linguistic competency, as well as with their understanding of the unique needs, aspirations and entitlements of former refugees and marginalised migrants.

Interviewees described a trend for bespoke providers to be contacted by a range of mainstream organisations to provide ad-hoc cultural advice and language support. In addition bespoke providers regularly receive referrals from mainstream providers that are not equipped to meet a client's cultural needs.

These findings signal that there is significant opportunity for systems-level improvement of mainstream cultural competency, which would result in better mainstream service experiences by former refugees and marginalised migrants. This would prevent harm that can be caused by poor experiences, and would also reduce pressures currently placed on bespoke NGO providers that have limited resources to meet current needs.

Opportunities to drive system-level improvements to mainstream cultural competency might include:

- Working to address the quality and efficacy of social work training and curriculums, to drive up professional standards within mainstream social work services.
- Working with key stakeholders – such as key government departments, including the Social Work Registration Board – to explore opportunities for system-level professional development.
- Exploring opportunities for resourcing bespoke providers to exchange skills and expertise with mainstream providers.
- Advocating for increased investment in mainstream cultural competency training resources, as well as other frontline resourcing such as language support.

“Other providers should be able to do the work. Sometimes they don’t have enough cultural competency... But it is still quite hard to imagine that mainstream providers would have that capacity [without some intervention].”

“If we don’t move to a direction where government-funded mainstream organisations take on the cultural competencies to support migrants and refugees, it won’t be helpful for the outcomes we want to see.”

“When you think about what Te Ngākau Kahuhura is doing – it’s a training and learning hub for rainbow communities that will also be a valuable resource for mainstream providers. Could this work in other sectors?”

“Change is coming very fast, especially for ethnic communities. The government needs to be ready to do something and provide enough services.”

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Appendix.

One: Glossary.

<p>Refugee-background (also referred to as refugees, former refugees, resettled communities)</p>	<p>Persons that arrived in New Zealand through refugee pathways, including:</p> <ul style="list-style-type: none"> ▪ Quota refugees i.e. persons arriving in New Zealand under the United Nations High Commissioner for Refugees (UNHCR) quota system (currently 1,000 places per annum, to increase to 1,500 by July 2020) and are granted permanent residence on arrival. ▪ Asylum seekers i.e. persons who arrive in New Zealand seeking asylum and are granted temporary work, study or visitor visas (prior to assessment and/or approval of their claim for asylum). ▪ Convention refugees (sometimes called spontaneous refugees) i.e. persons arriving in New Zealand seeking asylum whose cases are approved and are granted Refugee and Protected Persons Status. ▪ Family reunification refugees i.e. family members sponsored by former refugees resident in New Zealand who can obtain residency under the Refugee Family Support Category. ▪ Persons arriving in New Zealand through other Immigration NZ refugee pathways e.g. the pilot scheme Community Organisation Refugee Sponsorship.
<p>Marginalised migrants</p>	<p>Persons who were born overseas and arrived in New Zealand of their own free-will as migrants to pursue employment, education or other opportunities; and who subsequently experience significant settlement challenges that require access to bespoke social work services.</p> <p>For the purposes of this research, ‘marginalised migrants’ are considered to have higher needs that most migrants, including:</p> <ul style="list-style-type: none"> ▪ Humanitarian-like backgrounds i.e. those with experiences similar to people of refugee backgrounds, but who have not arrived in New Zealand under any refugee pathway. ▪ Financial challenges i.e. long-term unemployment and/or reliance on benefits. ▪ Experiences of significant social exclusion and isolation i.e. limited access to family and community support networks.
<p>Resettlement</p>	<p>The process of arrival and integration into New Zealand society for persons from refugee backgrounds.</p>

Self-settlement	Some quota refugees may decide to stay in the Auckland region rather than follow agreements from Immigration New Zealand to settle in an allocated resettlement centre outside of Auckland. In some cases where Immigration New Zealand is not able to establish sufficient reason for this decision, quota refugees may be described as 'self-settled' and may subsequently be unable to access the usual resettlement supports made available to quota refugees, such as housing and social work support offered by Red Cross.
Secondary settlement	Some former refugees who were initially resettled outside of the Auckland region may, at some point in their resettlement journey, choose to move to Auckland. For the purposes of this report, this process is described as secondary settlement.
Settlement	The process of arrival and integration into New Zealand society for persons born overseas who arrive in New Zealand as migrants in search of employment, education and other life opportunities.
Social work	<p>As defined by the International Federation of Social Workers (2014), social work is practice-based profession that “engages people and structures to address life challenges and enhance wellbeing”.</p> <p>Social workers act as a facilitator between clients in need and community services including health, welfare and housing. They work with clients to determine goals and empower clients to develop skills and work towards those goals with increased self-determination.</p> <p>Social workers who work with people of refugee-background or marginalised migrants typically support resettlement and settlement outcomes.</p> <p>Following amendments to the Social Workers Registration Act, all social workers will be required by law to be registered by 2021 and hold a Practising Certificate that will need to be annually renewed. The title 'social worker' will become protected and those without this Certificate will be unable to use the title (Social Workers Registration Board, n.d)</p>
Community support work	<p>'Community support work' is used in this report to describe social work-like services that may be offered by an organisation in addition or in lieu of their ability to directly employ a registered and qualified social worker.</p> <p>Typically community support workers work directly with people and families of refugee-backgrounds, or marginalised migrants, in ways that offer social work-like support and/or compliment the work of other registered and qualified social workers that may be engaged with the person/family.</p> <p>Community support workers may have part or full social work qualifications, in some cases from overseas that have not been recognised in New Zealand.</p>
Bespoke social work services	<p>Targeted or tailored social work services that are designed to support the unique experiences and needs of refugee-background and/or marginalised migrant persons, families and communities.</p> <p>Bespoke services may typically involve the following characteristics that differentiate them from mainstream social work services:</p>

	<ul style="list-style-type: none"> ▪ Services are delivered by organisations that have an overall vision or mission centred on achieving resettlement (or settlement) outcomes. ▪ Services are designed with a strong emphasis on cultural competency – including consideration of e.g. language needs and religious or cultural protocols. ▪ Services are delivered by staff from appropriate cultural backgrounds and with relevant skills, training and/or experience of working with persons of refugee-background and/or marginalised migrants. ▪ Services are delivered by organisations that offer other specialist programmes – such as counselling, advocacy work and community initiatives – that can work holistically alongside social work provision to achieve resettlement/settlement) outcomes.
<p>Mainstream social work services</p>	<p>Social work services delivered by organisations that do not have a specific ethnic or cultural focus and are designed to reach and service a wider cross-section of New Zealand society, which may also include persons of refugee- or migrant-background.</p> <p>Mainstream services may be provided directly by government agencies or by community sector organisations that use a mixture of government and grant funding.</p>

Two: Interview participants.

With thanks to representatives of the following organisations for their generous time and insights:

Aotearoa Resettled Community Coalition

Anglican Trust for Women and Children

Asian Family Services

Asylum Seekers Support Trust

Belong Aotearoa

CNSST Foundation

Family Action

Foundation North

JR McKenzie Trust

Ministry of Education

New Zealand Ethnic Women's Trust

New Zealand Red Cross

Pregnancy Help

RASNZ

Roopa Aur Aap

Shanti Niwas

UMMA Trust

Three: Referrals to and from bespoke providers.

The following organisations were mentioned by interview participants as places of regular referral – either to their services, or from – to provide other and/or wrap-around support to former refugees and marginalised migrants:

Who refers to bespoke services?	Where do bespoke services refer to?
<ul style="list-style-type: none"> ▪ Community Mental Health ▪ DHBs ▪ Hospitals, GPs and other medical professionals ▪ Lawyers 	<ul style="list-style-type: none"> ▪ Age Concern ▪ Anglican Trust for Women and Children ▪ Aotearoa Resettled Community Coalition ▪ NZ Sikh Women's Association ▪ Plunket ▪ Pregnancy Help ▪ RASNZ

<ul style="list-style-type: none">▪ Oranga Tamariki▪ Police▪ Self-referral▪ Tertiary institutions▪ Other organisations that don't have the required cultural or linguistic expertise	<ul style="list-style-type: none">▪ Asian Family Services▪ Asylum Seekers Support Trust▪ Auckland Refugee Family Trust▪ Belong Aotearoa▪ CNSST Foundation▪ English Language Partners▪ Family Action▪ HIPPY▪ Kāhui tū Kaha▪ Man Alive▪ Migrant Action Trust▪ Mixit▪ NZ Ethnic Women's Trust▪ NZ Red Cross	<ul style="list-style-type: none">▪ Roopa Aur Aap▪ Sahaayta▪ Salvation Army▪ Shakti▪ Shanti Niwas▪ Shine▪ Social housing providers▪ The Fono▪ UMMA Trust▪ Victim Support▪ VisionWest▪ Women's Refuge▪ Youthline
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**An analysis of need,
effective models of
provision and opportunities
for increased impact**