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Equality, Local Government and Communities Committee

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Gateway
Protection
Programme

Good Practice
Guide



Refugee Action is an independent, national charity working to enable refugees to build new lives in the UK. We provide practical emergency support for newly arrived asylum seekers and long-term commitment to their settlement, and we deal with some 40,000 enquiries from refugees and asylum seekers each year. As one of the country's leading agencies in the field, Refugee Action has more than 25 years' experience in pioneering innovative work in partnership with refugees.

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The Refugee Council is the largest charity in the UK working with refugees and people who are seeking asylum. We provide support and advice to clients, work in partnership with refugee community organisations and others, campaign and lobby for the rights of refugees, and help them to rebuild their lives in safety.

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Abbreviations and acronyms

COELT: Cultural Orientation and English Language Training

ESOL: English for Speakers of Other Languages

FGM: Female Genital Mutilation

GP: General Practitioner

GPP: Gateway Protection Programme

IOM: International Organization for Migration

JC+: Jobcentre Plus

NHS: National Health Service

PIP: Personal Integration Plan

RCO: Refugee Community Organisation

UKBA: United Kingdom Border Agency (formerly known as Border and Immigration Agency, BIA and Immigration and Nationality Directorate, IND)

UNHCR: United Nations High Commissioner for Refugees

Foreword

Gateway is all about partnership. At its simplest it is about national government playing its national (and international) facilitating and enabling role effectively and efficiently, providing clear information and process.

It is about local authorities ensuring that Gateway fits strategically in the local area, that the services are in place or able to be developed to meet the needs of the programme and that it is used to enhance cohesion in local communities.

Finally, the voluntary and community sector are key to ensuring that the support and the development of the new refugees is paramount and that the programme is focused on providing a real opportunity to build new lives and strengthening local capacity.

Sounds easy? It isn't, it is hard work and requires a mature approach to partnership that is built on honesty, trust and clarity of role. The key thing about Gateway is that it can be a catalyst for developing good ways of working and increasing capacity within communities, whilst changing the quality of life of the refugees themselves.

The local authorities who have engaged with the Gateway Protection Programme rarely regret it, and have found that it provides new opportunities for strengthening work on community cohesion and improved services for new migrants across the piece. These outcomes are rarely achieved without partners and developing a programme that suits the locality, the Gateway Protection Programme allows local authorities and partners the opportunity to do that.

I welcome this *Good Practice Guide* as an attempt to capture some of the complexities of providing the support service to refugees arriving under the Gateway Protection Programme and hope that it will provide a useful template for new areas considering participating in this very worthwhile programme.

Jon Lord
Head of Bolton Community Homes - Bolton Council

1 Introduction

This report shows how a Gateway Protection Programme (GPP) can work and examines the fundamental principles behind such a scheme. It is based on the GPP experiences of Refugee Action and the Refugee Council in the UK, and draws on their long history of providing high quality services to refugees. This is a flexible model that can be applied to all clients, irrespective of their country of origin or where they now live in the UK.

However, this is not a blueprint for all services because every individual and every region will have very different needs. This document, illustrated with case studies, describes an approach and a way of working to show how a GPP service can be established that effectively aids integration.

The report does not cover the employment, education, housing or health services required by GPP clients. Much of this is covered already in other good practice documents describing services for refugees. And, it does not detail clients' experiences prior to their arrival in the UK, or what happens to them after the one-year period of support ends. Instead, it focuses on the 12-month support programme within the settlement region.

Section 1 draws from the Home Office publication, *Indicators of Integration*, to establish outcomes appropriate to the Gateway Protection Programme.

Section 2 explains key service principles to inform the design of a service to achieve the outcomes.

Section 3 describes the elements of a service that are needed to achieve the desired outcomes and is based on the principles identified in section 2.

Section 4 identifies key features of the approach to human resources needed to make the service operational.

Section 5 explores the monitoring and evaluation framework required to measure whether the service is meeting the intended outcomes.

The Appendices are resources from existing Gateway Protection Programmes to illustrate the previous sections.

2 Overview of the Gateway Protection Programme

History of Gateway Protection Programme

UNHCR promotes three durable solutions to the plight of refugees. These are:

- Voluntary repatriation
- Local integration
- Resettlement

In the past, resettlement was often considered to be the worst option, but in April 2000, the then UN High Commissioner for Refugees, Sadako Ogata, said:

“Resettlement can no longer be seen as the least-preferred durable solution; in many cases it is the only solution for refugees.”

International resettlement programmes have been running since the early 1980s. The largest programmes are run by USA, Canada and Australia who between them take up to 100,000 refugees a year. In Europe many countries take around 1,000 refugees a year. These programmes are diverse in their approach (Key Resources: UNHCR’s Resettlement Handbook).

In 2002, David Blunkett, the then Home Secretary, proposed the UK’s own resettlement scheme called the Gateway Protection Programme.

Eligible groups are selected by Home Office ministers in consultation with UNHCR. (<http://www.ind.homeoffice.gov.uk/lawandpolicy/refugeeintegration/resettlement>)

Application process for resettlement

Applications are made through UNHCR and refugees are interviewed in camps by teams from United Kingdom Border Agency (UKBA). Applicants have to satisfy the criteria laid down in the 1951 UN Refugee Convention, as well as meet the criteria for resettlement.

Criteria for selection

Under UNHCR criteria, a refugee will be considered for resettlement if:

- *their life, liberty, safety, health, or other fundamental human rights are at risk in the country where they have sought refuge;*
- or
- *in order to provide a durable solution the applicant's situation is not secure in the long term (they may not have immediate protection concerns).*
 - *In addition, the UNHCR's resettlement handbook states that applicants may:*
 - *have legal or physical protection needs*
 - *have medical needs*
 - *be a survivor of violence and torture*
 - *be a woman at risk*
 - *not have local integration prospects*
 - *be elderly (and in a situation that makes them particularly vulnerable)*
 - *be a child (and in a situation that makes them particularly vulnerable)*

Typical house, Kakamu Camp, Kenya



Sudanese group in Bolton

Between November 2004 and February 2005, 83 refugees from southern Sudan arrived in Bolton and Bury as clients of the second Gateway programme. They came from Uganda where they had been in a refugee camp at Kyangwali. There were 22 households (14 in Bolton, 8 in Bury) consisting of 34 adults and 52 children. Their ethnic backgrounds were Dinka, Acholi, Kuku, Bari and Nuer tribes. Most of the group were farmers but some had teaching and social work experience gained in the camps. Arabic (Juba) was the main language spoken by the group with varying levels of English from beginners to intermediate.

The group had been long-term refugees and for many this was their second camp. They had been forced to move from their first location in Northern Uganda after being attacked by the Lord's Resistance Army, a rebel army which has been waging war against the Ugandan government since 1987.

The group had experienced horrendous conditions and lost, or been separated from, their family and friends. They had been exposed to torture and organised violence, with many women suffering sexual violence including rape. They had experienced hostility from local Ugandans and there was little prospect of integration.

Phases of the Gateway Protection Programme

The aim of GPP is to help groups from refugee camps integrate into UK society by providing a co-ordinated support package in resettlement areas.

The processes required to operate GPP can be divided into four separate phases:

- Set up and pre-arrival.
- First main period of support: focus on statutory services and basic support needs.
- Second main period of support: focus on longer-term needs.
- Exit Strategy: programme wind-down.

Set-up and pre-arrival

After UKBA has conducted interviews, applications are processed in the UK. About six weeks before the group arrives, a list is drawn up which is given to GPP service providers. It contains basic information including medical details, case notes and information about the ethnicity of the group and the languages they speak.

The information is used to identify housing needs and to prepare local stakeholders for the group's arrival. Stakeholders include representatives from key services such as health, housing, education (including adult education and ESOL providers) and Job Centre Plus (benefits processing). Even at this early stage an exit strategy is developed to prepare clients for their long-term future.

Meanwhile, in the camp, refugees undergo Cultural Orientation and English Language Training (COELT). These sessions are run by IOM (International Organisation for Migration) and prepare the group for life in the UK. The refugees are usually moved to the city of their departure a week before they leave. Here they receive final health checks before starting their journey accompanied by IOM representatives.

Clients usually arrive in three groups of approximately 25 people at intervals of two to three weeks.

When they arrive in the UK, the group may be met by a Reception and Orientation Service based near Heathrow. They may stay here for several days before travelling to their final destination.

Arrivals timetable in Bolton and Bury

Week 1

Arrivals week is a frenetic time so extra staff are needed. Workers from other services and volunteers are heavily involved with the programme, helping clients to settle into their new homes and the local area.

Monday

Reception and housing orientation/health and safety. Clients are shown how to use central heating, hot water and home security devices, such as door and window locks. Smoke alarms are demonstrated and they are told about stop taps, rubbish and recycling collections and what they should do in an emergency.

Tuesday

Information and local orientation. GPP is explained and the following issues are addressed: levels of service, the client charter, confidentiality and data sharing. Health needs are identified and road safety is explained. Clients are shown the local shops and food is bought.

Wednesday

Tenancy agreements are signed and the clients are given a demonstration of public transport. They are also shown the location of their GP.

Thursday

Clients visit JC+ for benefits processing and are taken around town and given useful information, such as the locations of specialist shops, housing offices, transport hubs, schools and colleges, post offices, supermarkets, town hall, markets, libraries, police stations, the hospital and the NHS Walk-In centre.

Friday

A welcome meal is organised which gives an opportunity to introduce sections of the local community such as faith groups, support groups, refugee community organisations and various stakeholders.

Week 2

The programme of events in week two is more flexible which allows caseworkers to begin the process of establishing a relationship with their clients and making a more detailed assessment of their needs. The programme includes: ESOL initial assessment at local colleges, distribution of donated clothes, school inductions by Education and GP registration.

First main period of support

Support providers receive clients locally and address their immediate needs before they are taken to their accommodation. The first weeks are an intensive period of structured activities for the new arrivals. It is important at this stage to explain to the clients about the nature and extent of GPP support, the levels of service, and their rights and responsibilities.

During this period unforeseen events are inevitable. It is advisable to think about potential risks and draw up a contingency strategy before the group's arrival. In the past there have been health emergencies requiring hospitalisation, home emergencies such as a lack of heating, as well as relationship problems.

Second main period of support

At this stage the focus is on the longer-term needs of the individuals and their groups. Briefing sessions are held with clients and a more in-depth assessment and action-planning process is carried out using a Personal Integration Plan (PIP). The focus of GPP is to promote independence and support clients to help themselves. This is achieved by presenting them with choices and helping them to make decisions. Development workers are an integral part of this support process through their work in developing opportunities for individuals and groups in the host community.

Clients often arrive with high expectations of life in the UK, some reasonable and some less so. Many expect that access to higher education is quick and easy or that they will find work straight away. The reality is that higher education can be difficult to access, especially if there are language difficulties, and that the UK has an extremely competitive labour market. Caseworkers identify and work with these expectations in a constructive way by working with the clients to complete the PIP. This process enables the client to identify life goals and plan how to achieve them.

Family and other relationships may be put under pressure during this time. In some cases this has led to family breakdown and hostility between clients. Domestic violence, patriarchy, and the physical punishment of children are accepted practices in some cultures. GPP offers an equal service for all clients and this means challenging practices that clients may feel are normal, but are illegal or unacceptable in the UK.

Group session with clients



Working with complex issues

Domestic violence has been an issue in several programmes. The most urgent issue is to address the immediate physical and emotional danger faced by the victim(s), often by finding alternative accommodation. But many different interventions are required. These hinge on partnerships with other services such as housing providers, the police, social services, mediation services and specialists such as Women's Aid.

As part of a strategy to prevent domestic violence, where it is known to be an accepted cultural practice, the topic is covered in group briefing sessions. Both men and women need to have access to information and know the law and cultural attitudes within UK. Group elders may sometimes resolve disputes, but clients also need to know about mechanisms for dispute resolution in the UK.

Groups are educated about the police and social services to explain their roles and show how they become involved when laws are broken. During group briefings it helps to be explicit about the consequences of illegal behaviour, such as domestic violence. This knowledge has helped to empower the less powerful clients. It is important that this information is given in mixed gender groups, but that time is also made for single gender sessions and one-to-one advice. This approach has been used for briefing sessions on sexual health and well-being, and female genital mutilation (FGM).

GPP's run by Refugee Action and Refugee Council have benefited from pre-arrival training to inform staff about the culture of clients. It is vital to retain an open-minded approach as this information is necessarily partial, incomplete and often contentious. The most valuable information comes from the clients themselves.

In families the man is often the principal applicant. Responding to patriarchal family systems requires careful and considerate planning by GPP teams. In some domestic violence incidents women fear a threat to their own status if they leave their husband. They think - incorrectly - they could be returned to their country of origin.

This period can be very challenging for family relationships. Men can find it difficult to conform to a different set of 'rules', and they also struggle to cope with new challenges to traditional male authority. Women may, for the first time, have access to money and bank accounts and take joint responsibility for household finances.

Some adapt quickly, others are overwhelmed and their behaviour may become challenging. It is vital to continue working with clients at these points, even though it may not be comfortable for workers. On previous programmes, clients have shown signs of stress-related illnesses. Their levels of anxiety and frustration have increased when medical professionals are unable to provide a 'cure'. Some clients have become isolated from the rest of the group and expressed a desire to return to the refugee camps because they miss friends and family. At these times it is important to retain a sense of perspective and recognise that this is a normal phase of the programme.

Exit strategy

There is a gradual withdrawal of support once clients gain confidence and know more about their local community and the services available. The PIP is continually revised so that clients have a clear sense of direction about their future.

When a programme ended in 2006 clients said they felt supported and reassured by the PIP and the practice of recording information. They said the PIP had helped them to focus on the longer term and allowed them to "see the future".

End-of-programme evaluation events have been used as a means of gathering information to inform and develop future services. They are also used to raise clients' awareness of how far they have come in a single year. This helps to increase their confidence for the future journey. Of course, it also marks the end of the programme and is an opportunity for everyone to say their farewells.

Section 1: Achieving integration

The most suitable recognised framework for assessing the intended outcomes from GPP is the Home Office publication *Indicators of Integration*. Based on an analysis of existing research, this lays out the areas/domains that integration services should address. Within each area/domain it identifies a number of indicators.

These indicators have to be adapted to meet the needs of GPP, however, it is beyond the scope of this document to do this comprehensively. Where appropriate we have suggested further indicators based on our experience of running GPP.

Furthermore, indicators of integration should not be interpreted as a measure of success for every client. Each individual will have their own needs, wishes and priorities and will have to make their own journey towards integration. A service (or range of services) that addresses all the indicators can encompass the full range of these individual needs.

Equal opportunities

It is important that the indicators are applied within an equal opportunities framework. The needs of sub-groups must be understood and addressed. Indicators must not be applied with a 'broad-brush'. It should be done sensitively, with understanding and empathy for the group's culture.

GPP has addressed equal opportunities by:

- helping to set up women's groups
- holding targeted information sessions for young adults
- hosting mediation sessions for families
- working with both the perpetrator and victim of domestic violence.

Client perception of the integration process

When clients first arrive they are full of hope and glad to be safe. Despite the briefings they have received, they often have unrealistic expectations about life in the UK. The optimism of the first few weeks can be tempered when reality bites. For example, there will be difficulties gaining employment, paying for higher education and making friends within the local host community.

The indicators of integration do not mention an individual's attitude to integration as one of the desired outcomes. However, without a positive attitude progress is far slower and more difficult. An encouraging and constructive viewpoint creates the motivation and commitment that allows clients to move forward. It enables them to keep taking the risks needed to overcome the numerous barriers they face.

GPP has to deal with these feelings because some clients feel they have been misled. The service helps them to adjust their expectations while maintaining a sense of optimism. At the end of the support period clients should feel confident about their knowledge and skills and they should have a clear sense of where they are going, and how they will get there. The aim is to make them feel positive about their move to the UK and the support they receive, as well as feeling keen to contribute to UK society.

Services must address these issues throughout the life of the programme and measure the client's subjective attitude toward the integration process. This can be achieved with client reviews and other evaluation techniques. As with all the indicators there is a need to be realistic about the outcomes. Life in the UK can be difficult and challenging and it is extremely unlikely that all clients will feel positive about integration.

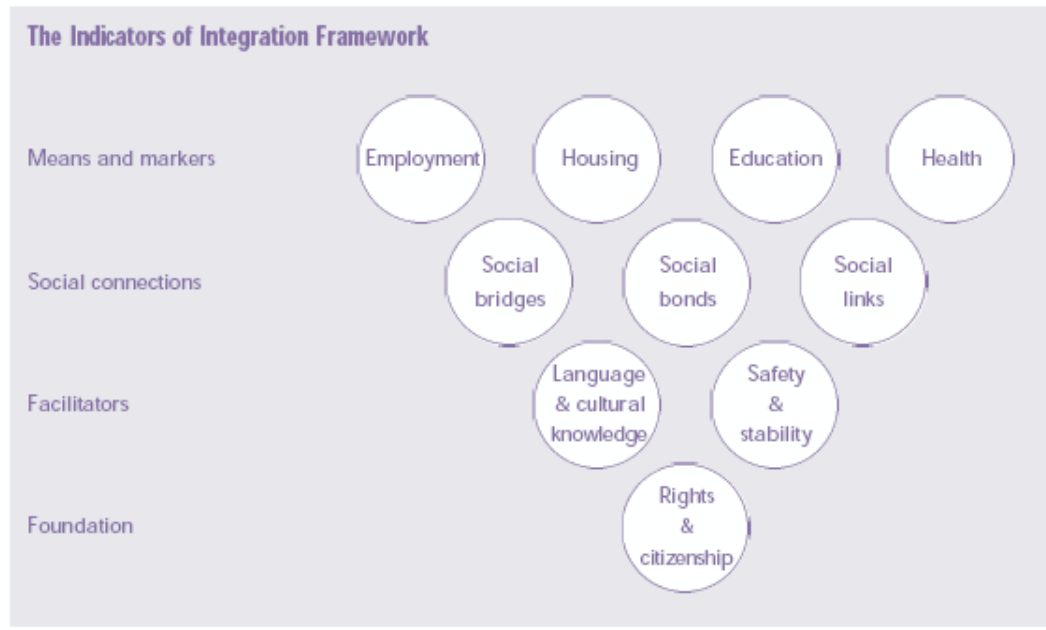
The Home Office has been conducting an ongoing programme of research into the experiences of clients since the resettlement programme began. A link to the research can be found in the key resources chapter of this publication. (Key Resources: IRSS Longitudinal Survey).

Integration indicators

The diagram below is taken directly from the Home Office publication *Indicators of Integration* which identifies 10 key influences on integration. It shows the main areas/domains that lead to integration.

The top tier portrays the major themes that most people would immediately think of as the outcomes of integration: a good job, a nice house, a sense of well-being and access to education. These are titled 'means and markers'. The 'social connections' in the community are identified on the following tier and help to illustrate how people plug into their communities. This activity is underpinned by the facilitators: 'safety and stability' and 'language and cultural knowledge'. The long-term aim is for a significant proportion of settled clients to contribute to the wider host community and understand their rights and obligations as UK citizens.

This is not a process model or identified path to integration where one domain leads to another. Instead, people are involved in a range of activities and a variety of domains at any one time. They are inter-dependent and an integration service must address all of them, directly or indirectly.



Indicators of Integration, Ager and Strang, Home Office, 2004 (Reproduced with Crown permission DPR28)

Means and markers

The means and markers are largely self-explanatory. In 'Housing' for example, it would be useful to measure the quality of housing, the type of housing provider, the length and security of tenancy and satisfaction rates. Other domains require further explanation of their application to GPP.

Social bridges

These are the links between the host community and the new community and are the key to social cohesion.

GPP clients need considerable help to make these bridges given the obstacles. In addition to a lack of cultural knowledge and English language skills, clients may not be literate and may have health problems. They may also suffer from culture shock and could face racial harassment and discrimination. It is rarely sufficient to just provide information and guidance. Clients need practical assistance which includes mentoring, and working with local organisations to help forge links.

Indicators include participation in youth clubs, childcare facilities, sports clubs, churches, mosques (and the extent to which these are mixed) and the involvement by GPP clients in voluntary work. Public attitudes to refugees are also significant.

Refugee Action training team

The Bolton Training Project was established in 2005 and is funded by both Bolton Council and GPP. The Project was developed to add value to GPP by providing refugee awareness training to statutory and voluntary groups in Bolton and Bury. This covers issues such as the definitions of ‘asylum seeker’, ‘refugee’ and other immigration categories; the needs and experiences of asylum seekers and refugees, and the asylum process and legislation. It also examines why refugees leave their countries of origin and presents information about GPP and how it differs from the asylum process. It includes specific details about the programme in Bolton and Bury. The training is tailored for specific groups with modules that address how the needs of refugee clients in particular sectors can be met.

The training team is able to prioritise and target resources by working closely with GPP project workers. Caseworkers and development workers identify issues and problems experienced by GPP clients. The training team and GPP development workers promote community cohesion in communities showing signs of racial tension by mapping key local services and community organisations.

Following the racial abuse of several clients in an area housing dispersed asylum seekers, training sessions were held with the police, tenants’ and residents’ associations, youth workers and mediation and housing services to improve their understanding of refugees.

GPP has developed social bridges by:

- collecting and passing on targeted information about local groups and events.
- delivering refugee awareness sessions with local voluntary groups and schools.
- conducting development work with local agencies, faith groups and schools to enable them to integrate refugees.
- preparing exhibitions about refugees. Bolton Museums Service recently commissioned an exhibition about GPP Sudanese clients. Testimony was collected over a period of 10 months prior to the exhibition in April 2007.
- enabling GPP refugees to participate in public meetings such as the Refugee Communities Forum in Sheffield.
- assisting access to community activities through community development work. An example is the formation of a community football team in Hull which includes GPP refugees, asylum seekers and members of the host community.

Social bonds

This is defined as a sense of belonging to a particular group or community.

GPP clients often have a sense of group identity that may become more intense in an alien environment. There may also be existing communities from their country of origin living locally.

Links within the group or community are often more complicated than may be initially understood. GPP groups are rarely culturally homogenous and may have members of several ethnic or tribal groupings that may or may not coexist easily. There may be cultural practices within the group that conflict with those of the host community, such as witchcraft, which may cause divisions within the refugee community. Such cases can have a particular impact on children attending a local school. The pressure of cultural assimilation can also challenge gender roles. The links with existing RCOs need to be handled carefully because they may have strong views about how services for GPP group should be provided and their role in the provision.

Indicators include: the number of RCOs worked with; assistance in setting up RCOs; sense of belonging; engagement with cultural festivals; press and other coverage of cultural heritage.

GPP has addressed these indicators by:

- Assisting groups to set up their own RCO. There is a Congolese RCO in Hull, a Karen RCO in Sheffield and a Sudanese RCO in Bolton.
- Arranging media coverage of positive stories. One client was the focus of an article in Marie Claire magazine entitled 'Hero of the Month' (see appendix 4 for full article).
- Assisting the formation of women's groups.
- Enabling contact with people from the same ethnic background.
- Setting up a community football team.
- Participation at cultural events - the Zeela choir in Sheffield (see Community Development section) and a women's dance group in Bolton.

Social links

Social links are defined as the way clients carry out their civic duties and engage with local governmental and non-governmental services. In the GPP context it is the extent to which the new community knows about and feels able to access local services in the statutory and voluntary/community sectors.

GPP clients are supported for one year. In that time few will feel ready to become involved in school governing boards (although some have achieved this) or in the management of local organisations (except for internally created organisations). For GPP clients it is more appropriate to look at the early steps they can take, such as their knowledge and use of local agencies and a perceived sense of connection with local community. These form the basis for fuller engagement at a later date.

GPP has addressed these indicators by:

- facilitating and enabling clients to identify and make use of local services (housing support, health services, local CAB, police and libraries) by giving advice and showing clients where services are located.

- enabling clients to access local faith groups. This has included some clients such as a Liberian group in Sheffield forming their own prayer group within the church they attend.
- working with local agencies to provide a range of services to GPP clients on key issues such as childcare and volunteering opportunities.
- supporting clients' activity in their children's schools. A client in Bolton became a member of her child's school's PTA after only six months in the UK.

Language and cultural knowledge

As well as learning English, GPP clients need to understand local customs and learn practical information about daily life that will help them use public transport, pay bills and go shopping. It is also beneficial for the wider community to learn about the cultural background of refugees.

The provision of sufficient and appropriate English tuition can be difficult to find given the pressures on local services. The GPP has found that considerable work is needed with local colleges to enable access. The shortage of affordable childcare provision is also a big barrier for services to overcome.

Gaining cultural knowledge is not as simple as providing leaflets or briefings, although they are important, together with direct support from caseworkers. Clients need assistance to develop the sources of this knowledge which tends to come from friends, neighbours and local agencies.

Indicators include the number of refugees enrolled in English language classes, conversation clubs, knowledge of local services and facilities, and the knowledge of customs, culture and history of refugee communities within the non-refugee local population. It also includes the availability of public sector interpreter and translation services for refugees.

GPP has addressed these indicators by:

- working with local colleges to facilitate entry into English classes. A steering group has been formed between Bolton Community College, Bury Adult Education and Bury College with a representative from Lancaster University's Literacy Research Centre. The group employs an ESOL development worker to link all aspects of ESOL provision for GPP.
- providing briefing sessions on many aspects of local services and customs. During UK cultural briefings, for example, Halloween, Bonfire Night etc (see Group Briefings section).
- helping to set up exhibitions concerning the cultural background of the refugee community.

Safety and stability

Safety is a key concern for refugees and lack of it can lead to significant obstacles to integration. Stability is fundamental to the very idea of settlement.

It is natural for people to feel unsafe when they first arrive in a strange environment. They don't know who to trust, how to deal with local customs or where the safe parts of town are. Over time, positive experiences help to build familiarity with local people and the area, such as where to buy familiar foods and products. This promotes a feeling of safety and security and helps develop a sense of confidence. This stability encourages people to move forward in many other areas of life - the quicker this happens the faster people can move on. The role of GPP is to assist this process.

This starts long before the clients arrive in an area. Pre-arrival briefings are given in the refugee camps and in the UK careful consideration should be given to the areas where people are placed. Work should also be done with local organisations to prepare them for the new arrivals. On arrival, clients are introduced to their locality and welcomed by community representatives. Trips are organised to civic amenities. Often neighbours, local church groups and tenant associations help refugees to settle in.

Problems must be dealt with. Some GPP clients have experienced racial abuse, and this has been addressed through individual casework, briefing sessions for the whole group and close work with the police and support agencies.

Indicators include: reported levels of crime and racial harassment; level of trust in police; feelings of safety and security of refugees; reported levels of bullying and racist abuse in schools; length of residence at current address; reported satisfaction with local areas.

GPP has addressed this domain by:

- monitoring levels of racial harassment.
- working with local police, schools and other agencies to improve the response to racial incidents.
- arranging talks by local police and race/hate crime support groups.

Tackling racism

In Sheffield a member of the first arrival group and his family experienced high levels of harassment by a neighbouring family. They shouted insults, kicked his gate and threw stones and eggs. With the support of their caseworker and housing staff they reported the neighbours to the police and kept a log of incidents. Eventually this resulted in court action and an anti-social behaviour order was issued against two family members. Other neighbours in the street thanked the refugee family for taking a stand as they had also suffered harassment from the family in the past but had been too afraid to tackle it.

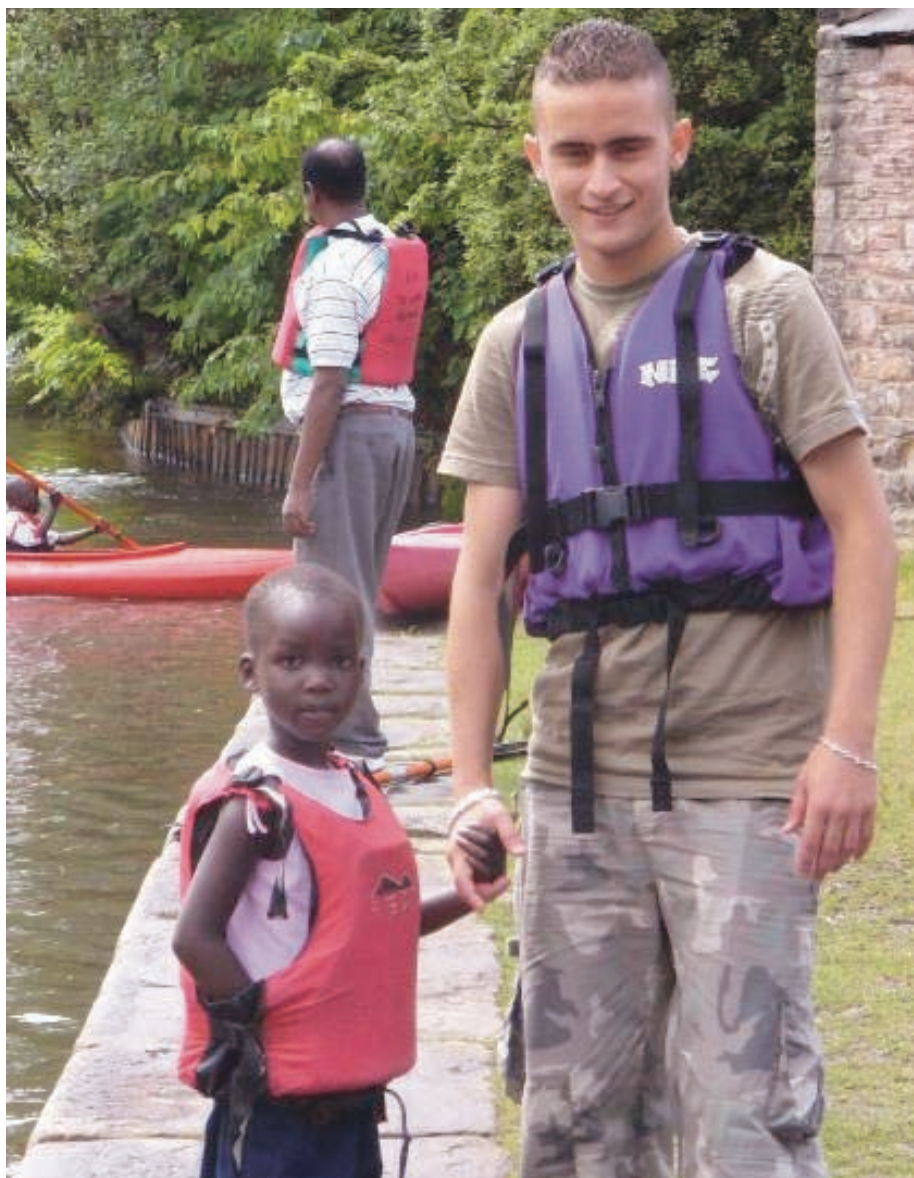
Rights and citizenship

- GPP clients' one year of support is a relatively short time for anyone to establish themselves in a new country. Within those 12 months the service needs to encourage clients to move along the path toward full and active citizenship.
- indicators include: access to, and utilisation of, legal and welfare benefits advice; the extent to which refugees feel a sense of equity in access to services and entitlements.

GPP projects have addressed this domain by:

- enabling clients by giving information and accompanying them to use local legal and welfare advice services.
- working with a large variety of local services to inform them about the needs of refugees, to develop the access to their services and by working with clients to enable them to access those services.

A visit with volunteers to a water centre



Conclusion

- The *Indicators of Integration* are a comprehensive framework for planning and evaluating integration services. They encourage a complex understanding of the interplay between a variety of factors influencing the road towards integration. No individual service could possibly address them all. In order to provide seamless and effective provision for GPP clients the key services need to plan together and work in partnership.
- This guide focuses on six of the 10 domains - social bridges, social bonds, social links, language and cultural knowledge, safety and stability and rights and citizenship. These may be less familiar to readers. The domains of employment, housing, health and education are equally important. GPP plays a central role in assisting local providers to understand and meet the needs of clients, through information, training, and the development of services for these domains. However, it is beyond the scope of this document to address these areas in detail.
- It may be helpful to illustrate the interdependency of the domains through the example of employment which many people would identify, rightly or wrongly, as being the most important outcome. The chances of a client getting a good job are enhanced if:
 - a. They live in good quality accommodation in an area where they want to stay and do not experience racial abuse (Housing, Safety and Stability).
 - b. They are in reasonable health and know where to go to find help and support if they are not (Health and Social Links).
 - c. They know people in the local community and people within their own community who have key contacts with employers (Social Bonds and Social Bridges).
 - d. They speak a reasonable level of English and understand how to apply for work (Language & Cultural Knowledge, Education).
 - e. They are aware of their rights at work (Rights and Citizenship).
- Every client has a different path and GPP helps them to develop a Personal Integration Plan (PIP). This plan identifies the actions to be taken in each domain. The following sections identify the elements of the service designed to assist each client to fulfil their plan. The last section suggests ways of measuring the success of the service against the indicators of integration.

Section 2: Service design principles

All services are designed on the basis of a set of service principles. These embody the underlying values that set the standard for service delivery and provide cohesion between team members. They are a constant point of reference for staff to guide their work with clients, stakeholders and other staff and volunteers.

The principles are reinforced regularly through supervision, team and case meetings and in all decision-making processes. They are explained to partners and stakeholders who are involved or interested in GPP.

The following is a list of service principles used by Refugee Action and Refugee Council. We suggest they should also be used for all GPPs.

Creating independence

The service is planned so that every facet is designed to assist clients in the process towards independence. This entails providing a service to each client based on a Personal Integration Plan (PIP) that addresses all aspects of the integration indicators.

Working in partnership with refugees

It is important to understand and work with the complex cultural background of GPP clients - to recognise their strengths and their ability to help themselves.

Enhancing and developing local services

The aim of GPP is sustainable settlement. This requires local services, over a period of time, to adapt and develop to meet the short and long term needs of GPP clients. This will also benefit other users of those services from the wider community. GPP should be configured to play a significant role in this process.

Evaluation and service review

Meeting the needs of refugees is a complex task that requires a commitment to keep the service under continual review. This review should be informed by

client-led evaluation, local stakeholders and outcome measures based on integration indicators.

Stable, skilled and motivated workforce

The main GPP resource is the competence and commitment of the team. The retention of experienced and high quality staff is essential. This involves an ongoing commitment to staff development through training, supervision and team development.



Craft afternoon at a women's group session

Section 3: Elements of service provision

The following section does not attempt to offer a blueprint for service provision. A guide that is too prescriptive may stifle the creativity that is essential to meet the challenges of running a GPP. The intention is to describe one approach, illustrated with examples, based on “Indicators of Integration” and service design principles.

This section identifies the following core elements:

- Planning, coordination and service development
- Community development
- Communications strategy
- Structured casework process
- Group information
- Volunteering
- Interpretation

How these different elements are put into practice will depend on the agency providing support, the client group, local stakeholders and a host of other factors.

Each of the elements has to be combined into a coherent whole. This is no easy task and requires a high level of organisational commitment and competence, as well as a skilled management and workforce. As with any other complex service this takes a number of years to fully develop.

Planning, co-ordination and service development

One agency cannot work alone to provide a service based on the *Indicators of Integration*. So many areas need to be addressed that it can seem overwhelming. There is the question of employment, the provision of English language teaching, the availability of crèche places, and the issue of racial harassment. Services must also consider the provision of cultural information, access to health services and

the number of social links that each individual needs to make. Integration domains are all linked and all need to be addressed.

It may be easy to identify the providers of health and housing services, but it can be much harder to earmark the key social links and bridges for individuals living in a particular community. Even for statutory agencies it may be difficult to find the key individuals with the power and enthusiasm to make sure GPP clients obtain the services they need.

Planning, coordination and service development are at the heart of running GPP. Together, the large number of agencies involved make a coherent whole, much greater than the sum of its parts. In a practical sense this makes the relationship between the integration domains work - between housing and safety and stability, and between employment and social links. Sometimes these naturally fall into place, but often they only happen through active co-ordination and service development.

It is unrealistic to imagine that all these links can be addressed at the same time. They have to be prioritised and dealt with over a long period of time. This prioritisation is made on the basis of client need, of mapping local and community services, of understanding the local structures for decision-making and of identifying opportunities for change.

For example there may be a need to improve support around employment and gaps may have already been identified in existing provision. Despite this, there is little chance of making useful changes if the key employment support services are subject to internal restructuring and incapable, at that time, of taking remedial action.

Over time GPP can attempt to address, together with partners, a range of issues that effect clients' lives. Existing schemes have included working with Job Centre Plus (JC+) on benefit provision, with local education colleges about the provision of ESOL to women with children and with health providers on the provision of interpreters. Often, successful outcomes provide benefits not only for GPP clients but for other users as well.

Each staff member has a part to play in planning, co-ordination and service development. Caseworkers, through their work with clients, may have opportunities for development with a GP's surgery or a youth club. Community development workers can use their contacts with community organisations. However, the project manager is likely to play the key role. Before GPP starts, and throughout the process, the project manager has to devote a large amount of time and effort to ensure that services are planned, work together and provide what clients need.

Stages of planning and co-ordination

1) Starting GPP

Before GPP can start the Local Authority, or equivalent body, must take an 'in principle' decision at a political and executive level to be involved. They take into

account the pressure on existing services, the provision of housing as well as their commitment to the protection of refugees. Once this has been done an initial planning group is formed consisting of representatives from the voluntary sector provider, local authority, education provider and health service. This group agrees the key details of GPP in the area and negotiates with the Home Office for funding.

2) Pre-arrival period

Detailed operational planning takes place in the three-month period before clients arrive. Key services and staff are identified. The Home Office releases an interim manifest (a limited set of details about clients) to inform the planning process. The final manifest is sent around six weeks before clients arrive in the UK.

Among many other things, housing is procured, education provision planned for children and adults, arrangements are made for GP registration and the provision of welfare benefits.

The media strategy is also planned and links to local media organisations are made in consultation with key stakeholders. Initial links with wider stakeholders and organisations that may have an interest in GPP are made, such as faith groups, voluntary organisations and well-being services.

3) Arrival and beyond

Strategic and operational meetings continue throughout GPP but become less frequent. As experience grows a more detailed mapping of local services takes place informed by client need. This is used to address volunteering opportunities, lack of childcare facilities and a range of other needs.

As the programme continues GPP may become more involved in other local decision-making structures. In Bolton, Refugee Action has joined the Asylum Seeker and Refugee Health Forum to help develop services. These closer ties provide opportunities for GPPs to identify where key decisions are made and use the knowledge and experiences of their client group to influence improvements to services.

Service development

Many services do not have previous experience of working with refugees. Some may recognise they need to change to meet the needs of GPP clients. Others may have sufficient internal resources to carry out these changes or require assistance from an external organisation. GPPs run by voluntary sector refugee agencies are often the best placed organisations to do this through our knowledge of the needs of refugees and of good practice in meeting those needs.

There are many ways of providing service development support but some of the key ones are:

- **Information about clients.** What does the group need? What are their backgrounds? What cultural barriers and opportunities are there? What

languages do they speak? A developing service will require answers to these questions and a range of other information.

- **Training.** Staff in some services may be apprehensive about working with refugees and require general training about refugee issues.
- **Planning.** Managers who are keen to make their services more appropriate may need help with operational planning. For example, helping them to think through the consequences of carrying out changes for staff, volunteers and in the other areas of their organisation.
- **Resourcing.** Services may want to change but lack the resources to do so. They may need a venue for a group to meet, money to put on an event or for other reasons such as access to childcare or extra photocopying.
- **Feedback and evaluation.** Before a service goes through a change or once it has made changes there may be a need for detailed feedback from clients. This can help to plan what needs to happen or evaluate the changes that have taken place.

There is a constant tension in GPP between time spent on direct provision and time spent on helping other services to develop. It is often easier to do it yourself rather than spend time and energy helping another organisation to develop a service. In line with the service design principle of 'enhancing and developing local services' the presumption is always to focus on sustainable development of local services.



Karen group session

Jobcentre Plus and Benefits

A key part of a successful arrivals phase in GPP is the co-ordination of welfare benefits. Job Centre Plus (JC+) acts as the link for welfare benefits and as such is an extremely important partner.

Six weeks before arrival, eligibility for key benefits is established by JC+ from the Home Office manifest and a benefit-processing day is arranged. JC+ co-ordinates the processing day. This involves inviting colleagues from National Insurance Number processing and Inland Revenue Child Tax Credits and Child Benefit, and Housing Benefit

With two weeks to go an agreement on the allocation of benefits across families is made. Application packs are made up by JC+, forms are completed where possible and a timetable for the processing day is agreed.

In the first week of the clients' arrival, the Client Immigration Status Documents (ISD) are received. Benefit forms are completed by clients with assistance from caseworkers and are returned to JC+ along with copies of ISD (usually five per client). The forms are then processed by JC+. Clients should receive their benefits about two weeks later.

The planning of benefit provision is extremely important. Mistakes can lead to clients being left without money and this delays integration. To avoid delays, ensure:

- benefit is paid equally to a husband and wife. For example, the husband receives JSA and the wife gets the child benefit and child tax credits. Failure to do this has led to conflict when husbands have refused to give money to their spouse for food or bills.
- clients who are ineligible to work are registered with GPs in the first week. JC+ will need a certificate from the GP as soon as possible to ensure benefit is continued.
- claims are processed accurately by liaising with a named contact within JC+. Clients' forms are processed clerically and are at greater risk of being lost or misplaced.
- there is a contingency plan. Some benefits may take a considerable time to process.

Community development

GPP clients face severe disadvantages when it comes to playing a full role in their communities. They may not speak English or know how things work in the UK. Furthermore local community organisations may not provide the right kind of services or know-how to work with refugees and may initially be hostile to newcomers.

The role of community work is to help clients build their own communities and increase their opportunities by working with local community organisations. Social bridges and bonds form the networks that tend to define the limits of what GPP clients can achieve. It's not only what you know, it's who you know.

To some extent all GPP staff are involved in community development. Caseworkers might introduce a client to their neighbours; admin staff play a central role in organising group events; while managers make presentations to community organisations about GPP. However, assisting a refugee community organisation to develop or even organising a trip to a National Park requires the specialist skills of dedicated community development workers.

Identifying needs and opportunities

There are two sides to identifying needs and opportunities. The first is to identify the needs and opportunities within the client group. Community development workers do this by attending casework meetings, talking to caseworkers, reading Personal Integration Plans and by talking to clients individually and in groups.

The second is to identify the needs and opportunities within the local communities where clients live. When clients first move into a new area, the community development worker will map the organisations, networks and key people in the area that may be relevant. This includes refugee community organisations, tenants' groups, schools, churches/mosques, community centres, sports and leisure clubs. Starting with a few key contacts they will build a picture of the community. This will show what clients can immediately start using, where opportunities for joint working may lie and who they might be able to work with.

This mapping and understanding of local communities can be a slow process. But as community workers become more knowledgeable about an area and better known and trusted, they are increasingly able to use their expertise and connections to create opportunities for GPP clients.

Bolton and Bury Women's group

A client in one group said she was feeling isolated. In the refugee camp she had close contact and support from other women in the community. Her husband was an active member of the community and outwardly their household appeared busy with lots of visitors. However, the woman wasn't involved or included in these community activities, partly because she felt unable to communicate in English and lacked confidence.

A consultation was arranged with other women in the group. It identified that these women shared similar experiences and feelings. They decided that they wanted time together to meet and share activities, as well as provide each other with support, and participate in activities such as sewing, crafts, singing and developing IT skills.

The development worker identified an existing host community organisation to work in partnership with them. This organisation ran classes and activities and was keen to develop its service by working with the women.

The development worker helped the organisation obtain additional funding to support this work. She also helped them to organise themselves so they could sustain and manage their own activities.

This approach has helped to ensure that the women's group is sustainable and will have a lasting long-term impact, both for its members and the wider community.

Taking action

It is not easy to prioritise the work of community development workers. GPP clients have diverse needs and strengths and it may be equally hard to identify the most promising opportunities in a local area. Furthermore, GPP groups have a diverse make-up. There can be a variety of ethnic groups, families and single people, and all may have particular interests of their own.

Sometimes particular needs are obvious and take priority, for example, when dealing with community organisations following racial incidents. Sometimes GPP clients make specific requests for support, typically if they want to set up their own refugee community organisation. Much of the time priorities have to be set through careful discussion, based on community development work and expertise and experience built over time. This way it's possible to consider what is likely to work, have the highest impact and be sustainable. Each community development worker can only take on a limited number of projects and still be effective.

The actual work carried out by community development workers is highly variable. It depends on the GPP group and the local area. It has included: finding funding for a community organisation to put on craft activities; helping a community artist to create an exhibition about GPP clients; lending expertise about refugees to a community network meeting; assisting GPP clients to set up a

refugee community organisation; and helping a group of young men to start a football team.

The boxes in this section give more detail about particular work that has been done by Refugee Action and Refugee Council community development workers.

The Liberian experience in Sheffield

In Sheffield a group of Liberian refugees wanted to form a refugee community organisation. The development worker supported the group's formation.

The pace of the organisation's development was slow and involved unresolved issues between some members. Some of the women decided to set up a separate project to allow them to meet together and raise awareness of their culture and "have fun".

They formed a women's choir, Zeela, and the development worker helped them to raise funds to buy instruments and pay for tuition and rehearsal space.

Zeela has enjoyed considerable success singing at local and national events, raising not only their profile but also helping to give a positive image of refugees. But they have not lost sight of their original aim to provide a support network. This success has been sustained and developed beyond the time frame of GPP.

Wider benefits

Community development work does not only impact on GPP clients. It also affects local community organisations. They gain knowledge and experience of working with people from very different cultures. This is likely to have an impact on their work with all minority ethnic groups and especially any other refugee groups in the area. The practical and effective approach used by GPP community development workers to bring together the host community and GPP clients can be applied to any disadvantaged group. Community development workers may also assist the community to strengthen local networks. The integration work carried out by development workers contributes to community cohesion.

Forming a football team

In Hull a group of young men wanted help to set up a football team. They were also keen to meet other young people. With the support of the development worker they formed a joint football team with a local voluntary group. This has allowed them to meet and build relationships with peers from outside their community.

The team plays in a regular league, competing against more established sides in Hull and has received positive attention from the local media. This has helped raise awareness within the community.



A group visit to Bolton's Reebok Stadium

Communications strategy

Media strategy

The media experience of GPP has generally been good. The programme has been covered by several positive news stories. The aim of this strategy is to ensure that the programme is perceived by the media and the public as a successful and positive way of offering sanctuary to refugees; one that helps them to fully integrate and contribute to their new community.

It is important to minimise the likelihood of negative coverage which may impact directly on the resettled refugees and could also jeopardise future settlement in that area. The planning of a media strategy should include the Home Office, local authority and the service provider organisation.

The aim should be to ensure the refugees retain their privacy and that measures of protection are considered before they arrive. A support plan should be worked out for those refugees who may want to speak to the media. Through the media strategy it is possible to promote partnership working and put GPP in context both nationally and internationally.

A pre-planned approach allows accurate information to be prepared for the media about the programme and the arriving refugees which should encourage a welcoming environment.

The media strategy needs to be flexible and is likely to change over time. It will respond to the climate in the local area and the experience of GPP. As programmes develop, different strategies may be considered and different levels of coverage may be encouraged. In some areas a close media strategy has been used for the first year's programmes. For further programmes a 'business as

usual' strategy is implemented. The duration of the strategy also needs to be considered – whether it covers the arrivals phase or the whole programme.

As well as the media strategy for new schemes, and continuing schemes, consideration should be given to an emergency strategy if there are problems during the programme.

Close partnership working is required when considering the media strategy for an area. Different partners may have conflicting agendas but agreement is required prior to the strategy being implemented. There may be tensions between different stakeholders. For example, voluntary sector partners may be keen to promote positive refugee media stories when the local authority wants to keep a low profile about its work with refugees. The welfare and privacy of the arriving refugees should be at the heart of media work.

Suggested programme of media activities

Produce media briefing notes on the role of the service provider within the wider resettlement programme coalition.

Arrange limited access pooled news interviews with refugees who have said they wish to speak to the media on arrival or in resettlement regions.

Arrange exclusive feature interviews with refugees who wish to speak to the media.

Hold a press conference when the flights arrive with lead agency spokespeople. Prepare a press release to accompany the conference.

Follow up news stories and features with letters to the media from supporters.

Prepare press releases and prompt statements in response to government announcements etc.

Look for follow-up stories that update the progress of programme and refugees.

External communications

GPP needs to be communicated to the local community to aid integration prospects. The use of media is one way of communicating information to the local community, but other methods of raising awareness and understanding are also required. Positive action can be an effective way to help communities understand the experiences and cultures of the newly arrived groups. Exhibitions, talks in schools, participation in community events are all useful examples.



Community development session

Supporting clients through a structured casework process

GPP has, at its core, the relationship between caseworkers and clients. These relationships provide great opportunities for growth and learning, but, as with any caring relationship (if handled poorly) have the potential to cause damage. In every interaction there is a potential for bringing about positive change and making progress toward greater integration. However, there is often a fine line between promoting independence and fostering dependency, or between building on strengths and reinforcing weaknesses. When deciding on a course of action or intervention with clients the fundamental question should be: "On this day, in these particular circumstances, with this particular client, is it better to do something for her, or help her do it for herself?"

Caseworkers have to make these decisions in every interaction with their clients. A structured casework process is fundamental to their continuing ability to make good quality decisions about how best to help their clients.

There needs to be a clear understanding of the nature of the relationship between the caseworker and client. This should be based on the principle of promoting independence and developing a joint agreement on the work of the caseworker. GPP clients may initially refer to caseworkers as their 'family', which can lead to a confusion of responsibilities. Clients, facing the uncertainties of settling in to a new place, may find it easier to be dependent on their caseworker and to confuse professional relationships with family relationships.

A clear written statement of the service principles helps to build a client's understanding of service boundaries (appendix 3: Client Charter).

The prime role of the caseworker is that of an enabler or facilitator - not primarily an advice giver. Clients are given options and the necessary information to make their own choices. Experience has shown that this can be difficult; some clients expect to be told what to do. Being encouraged to make decisions can be frightening and cause anxiety, and clients have expressed considerable frustration when told that caseworkers cannot tell them the 'right' decision.

Past programmes have demonstrated that many clients can experience what has been referred to as the 'GPP cycle'. This may occur once the clients feel a level of safety and security and after they have completed the many practical tasks of the first few weeks. At this point it is not uncommon for some clients to become distressed or disillusioned and experience physical symptoms relating to stress.

The ability to manage expectations and the understanding of these phases within GPP comes from the experience and knowledge gained by individual staff working in a structured way with clients over a long period. Regular team and case meetings are held between team members to share knowledge and information, to help plan services and provide opportunities for problem solving. Often, representatives from external partners and agencies are invited along to these meetings to share information and knowledge.

Bolton and Bury - moving clients into accommodation

On the day that clients move into their property, housing officers from accommodation providers carry out induction briefings at each property. This covers basic health and safety including: use of electrical equipment; heating and hot water; basic security of locks, windows and doors; refuse collection; and rights and responsibilities in the property.

Tenancy agreements are signed in the first week so Housing Benefit is paid at the start of the tenancy. This happens at a group briefing session where housing officers explain the agreement in detail and answer questions. The officers work with clients on a one-to-one basis, explaining the document and resolving queries.

Personal Integration Plan

A Personal Integration Plan or PIP (appendix 2) is begun at an early stage in the support process and is kept by the client. Every adult within a family is likely to have their own PIP. It is based on lengthy discussions with the client and may take several weeks to complete. A high degree of cultural sensitivity is needed by the caseworker as well as considerable expertise. It covers the themes of Housing, Benefits and Finance, Education & Training, Employment & Volunteering, Health & Well-being, Social & Leisure, and Legal action. Within each section the caseworker assists the client to identify their strengths and needs, their hopes and aspirations, and the steps that will be needed to achieve their goals. An action plan is developed which identifies the tasks to be completed, when and by whom. The document is 'live' throughout the entire period of support and is designed to make reviews, evaluation and monitoring an easy process. This document remains with the client and underpins the relationship

between the client and the resettlement worker, as well as informing the developmental work undertaken by GPP.

The PIP is updated as and when necessary. At set intervals the manager of GPP reviews the PIP with the client and the resettlement worker to ensure consistency and quality across the service.

Recording and acknowledging a client's progress is a key aspect of building their confidence and self-esteem. Often clients fail to fully recognise the progress that they have made. The PIP is one way of making sure that clients know what they have achieved.

Interventions

Simply put, the approach of caseworkers is:

"..As much as necessary.....as little as possible..."

The caseworker is continually aware of the need to promote independence. Careful thought is given to every interaction with a client - what actions are carried out, by whom and how. For example, although it may be easier and less time-consuming for a caseworker to book a GP appointment on the phone, it will greatly assist the longer-term integration process if time is spent helping the client to plan and make the phone call themselves. If all actions and interventions are planned with this approach rather than the quickest or easiest, clients will depend less on their caseworkers and their confidence will increase more rapidly.

Opportunities for learning

There are often many opportunities for learning in everyday life that could easily be taken for granted. A skilled caseworker will identify these and exploit them to take full advantage. For example, buying an item such as a mobile phone provides knowledge of being a consumer and how to make informed choices as well as budgeting and finance. It can assist local orientation by helping to identify shops as well as giving the chance to practise English by asking for information and carrying out the transaction. Skills developed can be applied to many other consumer situations such as choosing a utility company or bank.

Clients need to be given time and encouragement to work out their own solutions to problems. They need to take risks, and like all of us, to fail. But workers will step in if the risk is too high or the consequence of failure too great, for example, mounting debt can undermine all other client goals. Caseworkers use coaching methodology to help clients to think through the issues and identify choices to arrive at their own conclusions.

Workers adopt a broad range of interventions with clients similar to those used by caseworkers when helping other disadvantaged or excluded groups. These include: emotional support and problem-solving; advice and information; referral and signposting; mediation between family members; advocacy; and skill teaching. Additional support may be offered through volunteers.

For each of the interventions there are limits to the kind of support that can be given. The caseworker cannot deal with serious emotional problems that need counselling, or give specialist advice about complex welfare benefits. They cannot mediate serious family or neighbour disputes or deal directly with racial incidents. They are able to teach someone how to use a phone, where to shop, or how to use a bus, but cannot teach childcare skills. They can help a client to find a solution to a minor debt problem, but not to a major one.

The caseworker must be very clear about what they can or cannot help with. If something is beyond their remit they should help the client to form social links or connections with services that can assist them. Accompanying the client to these services is a very important part of the caseworker's job. There can often be issues accessing services and the caseworker may need to advocate on behalf of the client. Clients are then more likely to be able to use these services once the GPP period of support has ended.

There are regular staff supervisions and case meetings, involving the manager and community development workers, where caseworkers think creatively, share information and challenge one another about their approach to individual clients and the effectiveness of their interventions.

Using a bus

When clients first arrive in their resettlement area they go on a local orientation tour with team members.

On day one the caseworker will meet the client at home. Clients are encouraged to handle money and participate in a discussion about the value of items and become familiar with notes and coins. Caseworkers and clients find the local bus stop for a demonstration about catching a bus. This involves working out the fare beforehand and having the right coins available if possible. It also means identifying the bus service from the number on the front and the side of the road they need to be on to catch it.

Once on the bus the caseworker will demonstrate how to buy a ticket and encourage the client to ask for, and pay for, their own fare, having already practised this at home. Caseworkers move to the next stage by arranging to meet clients at the bus stop, encouraging them to get there independently. Clients are further encouraged to ask and pay for fares on their own with caseworkers helping out only if absolutely necessary.

At the next stage clients and caseworkers arrange to meet at a pre-arranged destination with clients taking responsibility for working out how much time they will need, as well as travelling independently. For some clients, this process is much quicker than others. Most people however will accomplish this by the end of the first week.

Working with complex issues (2)

A family of five arrived in the UK as part of GPP. The family consisted of a husband and wife and their three children, aged 10, 4 and 2.

During the arrivals week the wife spoke to her resettlement caseworker and told her that she wanted to separate from her husband. Her caseworker discussed the options and implications with her and offered her support.

From these discussions the woman made the difficult decision to go ahead with the separation. The caseworker offered practical support to both husband and wife, and arranged new accommodation to suit their new circumstances. High levels of support were given by the team at this time as the couple didn't have the knowledge to undertake these tasks for themselves.

Throughout this period of adjustment the caseworker kept both husband and wife fully informed while housing was found, making sure that they still carried out tasks for themselves, with support, to enable them to become familiar with interacting with services and organisations.

In the following weeks the woman became isolated from the rest of group for going against their cultural norms. The husband also found the adjustment extremely hard, often blaming his caseworker for the family break-up.

The caseworker referred the woman to SureStart where she received help, support and advice from staff and a network of women using the centre, some of whom have since become friends. Following a case meeting the community development worker encouraged the husband to participate in some group events to minimise his isolation. During their work together the caseworker had discovered that the husband was interested in football. The community development worker helped him to join a local football team.

Both husband and wife had suffered trauma prior to arrival in the UK and they both felt that this had contributed to the family's breakdown. With their agreement they were both referred to a specialist service which offered therapeutic support to refugees and asylum seekers. This referral led to joint and individual sessions and a further referral to a befriending service for the husband.

Over the course of the 12 months of support both the husband and wife were able to adjust to their new family situation as well as their lives in the UK.

The interventions used by the team throughout the 12 months included empowering both the husband and wife to make their own informed decisions by providing good quality information and expert knowledge of local services and support. The case was discussed at team meetings with input from the entire team which enabled a proactive approach. Impartial support was offered to both parties and they were encouraged to do as much as they could themselves.

Group information

Key information is delivered to the group all together, covering topics such as: sexual health and well-being, family planning, budgeting and finances, healthy eating, fire safety, RCOs, and children's services.

Some of the information required can be identified before the group's arrival based on information from the Home Office manifest. Other data comes from the initial assessment of the group, regular client case meetings and discussion within the team. Once the process begins clients play a major role in defining their own information needs. It is important to allow sufficient space within a briefing programme for this to happen.

Information is delivered using a variety of methods. These include group briefings, written material (translated where necessary), trips and events and other activities. These involve input from external agencies and groups with specialist knowledge.

Group briefings

Group briefings are properly structured and planned with clearly defined aims and objectives for each session. External agencies are engaged to deliver a variety of specialist information. To ensure these sessions are valuable for clients it is necessary that these aims and objectives are clearly discussed with the deliverer. Learning styles, ability and cultural awareness should also be covered. This ensures that information is delivered appropriately using a variety of teaching methods including active participation.

Clients evaluate the sessions during group discussions and by using simple feedback forms with smiley and not-so-smiley faces to convey satisfaction. Venues are accessible, safe, clean, warm and inviting and refreshments/food are provided. The timings of sessions must take into account clients' commitments, such as college timetables, festivals, and school holidays. Childcare provision should be provided where possible to ensure that women are not excluded.

Sexual health and well-being

Following consultation with client groups in Bolton and Bury, several group briefings took place on sexual health and well-being to address concerns expressed by clients.

Women in the group asked for family planning advice including some who were survivors of sexual violence. Sessions were delivered in mixed-gender groups but with follow-up sessions for women or men when requested.

Issues around sexual health and well-being have included: contraception, surviving rape and sexual violence, promiscuity, legal age of consent, HIV, FGM, and pregnancy and childbirth.

The sessions were delivered by health professionals in both Bolton and Bury.

Volunteering

Within GPP there is a need for volunteering support on two levels: to enable refugees to access volunteering opportunities and to involve volunteers from the host community in supporting the refugees and the work of the support team.

The aim when working with volunteers is to further assist integration of the group. Not only do volunteers boost resources, allowing an agency to expand services, but are also an important way for refugees to build social bridges and meet people from the host community. In order to achieve this aim, high quality support is required for the volunteers.

There are many benefits for refugees who volunteer. It provides essential work experience and helps to build social bridges. Other benefits include: meeting people from their local communities; gaining an understanding of the work environment in the UK; using their skills to help others; and building confidence. It allows them to contribute, to gain skills (including English language skills) and helps them to integrate.

Involving volunteers in delivering services to refugees is vitally important to both clients and organisations. Volunteers enhance GPPs run by Refugee Action and Refugee Council in the following ways:

- Volunteers extend the amount of work that can be done and add further quality and value to services. Volunteer facilitators in Bolton and Bury help clients access social and leisure activities. Activities volunteers assist during the arrivals phase and during trips and events.
- Volunteers increase the diversity of teams delivering services, both in terms of cultural diversity and skills and experience. Volunteers in Sheffield and Hull run an English at Home project as a befriending scheme for refugee families with a focus on providing support with English conversation.
- Volunteers provide perspectives on services that staff and agencies deliver that can make those services more responsive to client needs. For example, the Hull Hawks football team is supported by volunteers.
- Volunteering allows people to put something back into the community and provides them with a way of showing their support for refugees. In Hull members of the first Congolese group volunteered with Refugee Council to assist the arrivals of the second programme. This helped the team understand some of the cultural issues.
- Volunteers help to let people know the true facts about refugees and asylum seekers and dispel some of the myths surrounding asylum. The Bolton and Bury Training Project uses volunteers to help deliver training and information sessions using personal testimony.

After school club

In Sheffield volunteers developed an after-school homework club for young people in the Burmese and Karen community. A volunteer wrote the original proposal and won a Marsh volunteer award gaining some funding to set up the club. Working closely with the refugee community, volunteer co-ordinator, community development worker and education colleagues, the club now meets twice a week. It is supported by a number of volunteers who provide assistance and support with schoolwork.

Volunteers should be recruited, trained and inducted to National Occupational Standards (see Key Resources). They also require appropriate guidance and supervision.

Interpretation

Groups arriving as part of GPP have mixed English language ability. The requirement for interpreting varies according to the group. A rough assessment of English language ability prior to arrivals is useful for estimating demand. But flexibility is required to ensure that adequate levels of interpreting services are available.

Both Refugee Action and Refugee Council have interpreter policies that cover recruitment, selection and remuneration and it is not intended to cover those in this document. However, there are other complexities involved with interpreting for GPPs that are detailed here.

Sourcing interpreters

Interpreters must have good language skills (in both languages) but they also need the ability to work with a group which has complex needs. Wherever possible, trained and qualified interpreters should be used. Reputable local interpreting agencies can be a good source of trained, qualified and experienced interpreters. Some refugee supporting agencies also have their own lists of trained interpreters.

Ensuring that the correct dialects are sourced can be a time-consuming process. Thought should also be given to cultural sensitivities. Where a refugee speaks two languages, it may be inappropriate to use an interpreter speaking one of them because of ethnic and cultural divisions.

For languages uncommon in the UK (for example, the languages used by Burmese Karen refugees) interpreting agencies may be unable to supply interpreters. Contacts with potential interpreters can be made through refugee community organisations, universities and refugee supporting agencies. In cases where inexperienced and unqualified interpreters have to be used it is essential they are given training and regular supervision.

With both agency and community interpreters it may be worth providing training specifically on working with refugees involved in a GPP. Information is given

about the programme to help the interpreters understand the issues they may face. It is also an opportunity to reinforce some of the service principles and aims of GPP, as well as cover ethics for professional interpreters such as confidentiality and impartiality.

Clear guidance on roles and impartiality are essential to retain a professional client/interpreter relationship. It is the role of the staff member using the interpreter to give a clear briefing and guidance to the interpreter before each session and to debrief at the end of the session. Issues can be addressed at this stage and support can be given when dealing with a difficult situation.

GPPs should ensure that staff are trained to work with interpreters and are clear about their responsibilities in the relationship. In particular, briefing and debriefing, room set up, support, payment systems, challenging poor practice (appendix 1, Refugee Action Interpreter Training Programme).

Independence

The relationship between the interpreter and client can be complicated – they may be part of the same community and seen by the client as someone who understands their language and can help them in addition to their role as an interpreter. The interpreter may have contact with members of the group in various capacities. For example, the interpreter may be working with a client as an interpreter one day, then as part of a faith group another day, and then as part of a refugee community organisation another.

Responsibility is on members of staff to be aware of signs that an interpreter is being put under pressure by client(s) during sessions. This may involve interpreters entering into dialogue with clients without involving the staff member. When this has happened staff members have stopped the session to emphasise the interpreter's role - to provide word for word interpretation only. Accordingly, if any other explanation is required it must come from the staff member.

Volunteers may be used to give English language support through conversation practice sessions. This provides the client with the opportunity to practise their English language in a non-threatening environment, helping them to build confidence.

Exit strategy

Interpreting is an important part of the exit strategy. As with casework support, interpreting needs to be considered from the start of the programme as part of this strategy. Levels of interpreting support should be reviewed and assessed through the different stages of the programme to enable the group to be self-supporting at the end of the 12 months.

Some clients will need full interpreting support throughout the programme but wherever possible, clients should be encouraged and supported to speak in English.

Interpreters are a vital part of GPP and are used in a planned and strategic way to reinforce independence. The resource they provide requires the same consideration given to interventions by other members of the team.



Exploring the local region

Section 4: Staffing

To operate GPP effectively staff require an extensive array of competencies in the areas of: advice and advocacy; community development; supporting people; information advice and guidance; administration; volunteer management; service management; and service development. Careful thought needs to be given to recruitment and selection in order to ensure that people with this range of skills can be brought together in a multi-disciplinary team. Staff already working for an organisation about to undertake a GPP will not necessarily possess the aptitude to carry out this specialised work.

Teams will need to have experience of working in a planned way with vulnerable clients that may have been gained in a variety of settings such as education, mental health services and the voluntary sector. Workers must be skilled in using a variety of culturally appropriate assessment tools with a diverse range of client groups.

Team skills should also incorporate experience of developing community-based services. Workers require strong communication skills to be able to network and collaborate with a variety of other organisations from the statutory and voluntary sectors.

Volunteers can provide a broad range of complementary knowledge, skills and experience which requires volunteer management by experienced practitioners.

Our team approach is one of development and continual learning to improve and inform not only our own service, but that of key stakeholders.

Supervision and support

Good quality support and guidance for all workers must acknowledge the difficult and complex nature of the work. The challenges for staff come from maintaining and delivering support which allows clients to help themselves. The role of a caseworker is primarily that of an enabler and facilitator.

Staff members at Refugee Action and Refugee Council have regular supervision every four to six weeks. In addition, caseworkers at Refugee Action receive

external group supervision from a professional in the mental health field on a monthly basis. This supports their professional development and shares learning across the team.

All staff members require a carefully planned induction. For new services this includes: visits to existing GPP; participation at skills sharing events; and access to research and publications. In the past team members have visited other GPPs and shadowed workers in similar roles to gain an insight into different approaches. Staff members at Refugee Action and Refugee Council meet at regular intervals to share information, good practice and participate in joint training.

Regular team reviews that include all staff are held every six months to ensure there are appropriate levels of planning, review and evaluation. Annual service plans are produced to identify the priorities for service development during the next year.

Retaining staff is extremely important for the maintenance and improvement of quality of GPP, and salary scales need to reflect this.

Training

A programme of training is needed to maintain and increase the capacity and competence of the workforce. Training in Refugee Action and Refugee Council has included training on:

- child protection
- domestic violence
- working with interpreters
- rights and advice
- working with volunteers
- cultural awareness
- understanding of casework process
- family therapy
- dealing with challenging behaviour
- advocacy skills
- mental health issues
- mediation skills.

Ongoing training programmes have been established. Training needs are constantly assessed and reviewed. This process is informed by case and team meetings and regular supervision.

Training Programme by Medical Foundation for the Care of Victims of Torture North West

In January 2006 Refugee Action approached Medical Foundation North West to discuss setting up a training programme for the Gateway Protection team in Bolton/Bury. The team needed in-depth training to deal with the complexities of working with Gateway clients. The aim and proposed content of the training was further discussed with Head of Family and Couple Therapy at the Medical Foundation.

Aim and content of the training:

The aim was to provide the team with a framework from which to consider how they worked with families. This framework was a systemic model with a focus on working from an empowerment-based approach.

A five-day training programme was created, with days four and five left unplanned to be devised in collaboration with the team.

Training programme:

Day 1: A model for developing relationships with clients: Beginnings, Reviews and Endings. This day focused on setting up 'helping relationships'; working with complex dynamics and boundaries in these relationships; working from an empowerment-based approach and providing an insight into life in refugee camps and their impact.

Day 2: Mental health distress and trauma. Issues considered: recognising mental health distress, managing this situation appropriately, and when and where to refer to specialist services. Issues resulting from torture and organised violence were also considered, as well as dealing with risk and suicidal feelings and holistic assessments.

Day 3: Working with refugee families. The Systemic Family Model and how to apply this model in working with families. Reflective practice. Using genograms to map out family dynamics.

Day 4: Working with interpreters and the impact of rape on families: this included both best practice with professional interpreters and in working with community members as interpreters when professional interpreters are unavailable. Also considered: rape as torture and a tool of war, and its impact on families.

Day 5: Review/consolidation of the training programme. This day included a further half-day on working systemically with families and the impact of this work on individual workers and the team as a whole. The day offered the opportunity to consolidate the training programme and consider future work.

Evaluation:

The training was fully evaluated and extremely positive feedback was received about both the content and methods used. Feedback from the manager and from the team showed that workers are more reflective about their practice, make better use of supervision and of each other in considering how to deal with dilemmas. They feel more confident in dealing with issues around risk, mental

health and maintaining appropriate boundaries. They consider their input in light of empowerment-based practice.

Jess Michaelson

Medical Foundation NW

Section 5: Monitoring and evaluation

GPP is a complex and intricate programme. Monitoring and evaluation are used to establish a picture of the service for clients, the local community and stakeholders. At the heart of Refugee Action and Refugee Council's approach is consultation, both with clients and stakeholders, and this is built into every aspect of the programme. Our approach is to constantly search for and gather data in a pro-active way. We collect a mixture of quantitative and qualitative information to continually improve and develop our service, provide feedback to others and to influence the UK GPP and other stakeholders to develop or improve their services.

Refugee Action interpreters

Through information gathered at team and case meetings and feedback from clients, it became clear to Refugee Action that community interpreters employed through the service were not meeting the expected competencies required of impartial interpreters and were having difficulty in maintaining personal, professional and organisational boundaries.

Refugee Action reconsidered its recruitment and induction procedures for interpreters and piloted a one-day training course, as well as introducing external training for staff and a general improvement in systems, including the briefing and debriefing and support offered to interpreters.

Outcomes include a more skilled and motivated team of community interpreters with increased levels of confidence. Refugee Action staff have also developed their own proficiency and confidence when using interpreters.

Evaluation methodology

A variety of methods are used to obtain information and gather feedback through formal and informal processes.

Informal

- Stakeholder meetings and community development work
- Information sharing networks

- Volunteers
- Casework/team meetings
- Supervision with team members

Formal

- PIP reviews with clients
- Research
- Stakeholder evaluation: regular stakeholder meetings, information and planning sessions
- Collection of statistics: number of advice and information sessions with clients and their topics; number of children in mainstream schools; number of adults in employment, education, ESOL; number of racial incidents suffered by clients; number attending group information briefings.
- Regular communication with RCOs
- Evaluation of group briefings, trips and events
- End of programme evaluation event with clients

Research carried out on GPP

Home Office IRSS Longitudinal Research Study

GPP Evaluation Report by the Resettlement Inter Agency Team (RIAT)

Women's Integration within GPP (carried out for Refugee Action, 2006)

Brighton Research Project- Refugee Studies Department, Sussex University (ongoing)

For links and further information see Key Resources.

The information from all these sources is analysed and brought together through formal and informal planning sessions in a cycle of continuous development. There are regular service review meetings, themed discussions (e.g. on ESOL and employment), facilitated discussions of group need, good practice-sharing sessions and community mapping. High-quality management is needed to maintain the freshness and creativity vital to these processes.

Comparing programmes across the UK

GPP clients are a rich and diverse mixture of people and cultures and have many experiences and skills. Clients are in a complex mix of relationships - there are groups within the group: women, young adults, children, older people, different tribal groups, regional languages and dialects, family members, people from urban and rural backgrounds, university graduates, and people who have had no formal schooling.

Furthermore, the areas those clients move to vary hugely. The opportunities to learn English, gain employment, find good schools, make social bridges and address all the other integration domains depend on the characteristics of the host community, and the quality and availability of services.

These and other differences make it impossible to directly compare clients in one area with clients in another area. It is of little value to compare, for example, the job readiness and short term prospects for these different groups - progress will take longer for some clients than others for a whole variety of factors.

To make genuine comparisons between GPP areas requires a richly detailed understanding of the group, the area, how the work of GPP impacts on individual clients, the group, the host community and the services that clients access.

Evaluating clients' perception

On 21 December 2006, Refugee Action in Bolton hosted an event to evaluate GPP for a group of clients who were approaching the end of their one-year support.

The evaluation was divided into three sections:

1. Pre-arrival induction and external agencies.
2. Service provided by Refugee Action to Gateway Protection Programme Clients.
3. Levels of integration (measured Against the 'Indicators of Integration' framework).

The evaluation set out to achieve the following objectives:

- Obtain a sense of levels of improvement in the clients' integration in particular areas of their lives.
- Provide an opportunity to trial approaches to evaluation of integration outcomes and clients' responses to this approach.
- Enable clients to reflect on and talk about aspects of their progress, aided by mapping them visually on a spider diagram.

Some examples of what clients said:

On their neighbours (Social Bridges):

"It is different to Africa - I have learned that it takes time to know them."

"My neighbour is now my best friend here in this country."

"I left my key in the front door and my neighbour came to tell me"

On personal safety (Safety and Stability):

"Generally, I feel safe"

“Only problem is the children - they go into gardens and take things away”

“I had trouble at home when young people came banging on my door to fight in the daytime”

“I feel like I can call the police”

On UK culture (Language and Cultural Knowledge):

“I now know what Halloween is... it was very surprising... at first I found the fireworks frightening”

“Accents are difficult - I struggled to understand people in Bolton at first”

Framework for reporting

The quarterly report for the funding agency UKBA is based on the integration domains in ‘Indicators of Integration’. This formal reporting process is a combination of hard, quantitative data enriched by context, and a thorough understanding of the group illustrated with qualitative data in a format that is underpinned by the ‘Indicators of Integration’.

Local and group context is provided under key headings to give an understanding of the background of the clients and of the environment in which they live. For example, under the heading of ‘employment’, information may be provided about the local job market, support services to help clients into employment, levels of health and language ability, and the skills and experience of the clients.

Following this context-setting, information is provided concerning the progress of clients using a small number of key indicators, and the action taken by GPP to address this area of integration. This includes direct work by caseworkers, links made to local and national services, group information sessions, trips and provision of volunteering opportunities as well as development work done to extend the capacity of local organisations to meet the needs of GPP clients. The gathering and collection of data for reports is an ongoing process that involves all members of the team.

Quantitative data is often insufficient in assessing the progress of clients. Take the example of the indicator concerning the level of English attained by clients. A report that simply detailed the exam levels they had reached is of limited use. It gives little idea of the ongoing changes and progress that the adults are making in their learning. In college learners will only progress to the next level following formal examinations at set times of the year. A more valuable report would include additional information covering more subjective information such as what clients are able to accomplish for themselves as a measure of their increasing confidence in using English.

The following, written by a caseworker, is from a recent report and illustrates one form of qualitative information monitoring used to assess progress in learning English:

“When my client arrived in the UK two months ago, he had little to no use of English and very little confidence at all. When I met the client last week, he told me that a letter had arrived giving him a hospital appointment. He clearly understood not only where the letter had come from, but also its contents. This is considerable progress, nobody had read the letter to him and he certainly wouldn’t have been able to do that when he arrived.”

Quarterly reporting template

Group profile: numbers of households, locations, numbers of adults/children.

Numbers of advice sessions: (month on month).

Numbers attending group briefing sessions: topics, background information.

General update: overview of group progress and major themes/issues since last report.

Housing: locations, suitability, nature of local community, sustainability.

Education: children's access to mainstream schools and their progress; adults accessing further/higher education and ESOL, context of group's previous educational achievement and levels of literacy.

Health and well-being: major physical and mental health issues and updates on previous reports.

Employment: numbers of clients into work; action to progress client links to support services; training opportunities.

Social bridges: access to faith groups and community organisations; new links to voluntary groups, tenants and residents associations; presentations and talks to raise awareness of the client group.

Social bonds: community events that clients have taken part in; use of local community facilities; links through mentoring and buddying projects; development work with community groups, and local agencies including faith groups; examples of the group of clients supporting themselves, i.e. women's group, football team, RCO; levels of contact with people from the same ethnic background.

Social links: examples of new links to agencies in the statutory and established voluntary/community sector; examples of community action such as involvement in schools (in a variety of capacities, eg PTA, classroom volunteer, fundraising etc.); activity undertaken with civic responsibility (one client is involved as a volunteer with the local Race Equality council, another volunteers on a local mediation project).

Safety and stability: levels of racially motivated crime and anti-social behaviour experienced by clients; feedback from clients' experiences with the police; reported levels of bullying in schools; client satisfaction with local area; monitoring of clients' housing moves.

Language and cultural knowledge: subjective evaluation of progress of clients' acquisition and use of English language, written and oral; issues relating to clients' access to interpreters through external agencies, particularly availability and accuracy; observed understanding of cultural practices and customs; use of public transport.

Rights and citizenship: recording of topics covered at advice sessions; work carried out with local legal advice and welfare benefits agencies.

Conclusion

There are no easy answers and no shortcuts in monitoring and evaluating GPP. It may be tempting to rely on small amounts of relatively easily gathered quantitative data, but this, on its own, is of little worth. At best it may indicate where there are problems or successes but not how these have come about or how to change services.

A much richer picture can be drawn that really helps the funders, the staff, the client, and local stakeholders understand what is happening and why. Everyone involved must understand, and agree, intended outcomes and the service design principles, while monitoring and evaluation should be built into every facet of the service. If this is the case all participants are more likely to provide the data required and work together to improve the service clients receive.

Key resources

Web links:

Home Office	http://www.homeoffice.gov.uk/
United Kingdom Border Agency	http://www.ind.homeoffice.gov.uk
Refugee Action	http://www.refugee-action.org.uk
Refugee Council	http://www.refugeecouncil.org.uk
British Red Cross	http://www.redcross.org.uk
Migrant Helpline	http://www.migranthelpline.org.uk
Refugee Housing Association	http://www.refugeesupport.org.uk
Scottish Refugee Council	http://www.scottishrefugeecouncil.org.uk
Welsh Refugee Council	http://www.welshrefugeecouncil.org.uk
UNHCR	http://www.unhcr.org.uk

Resettlement information:

Refugee Council - summary of the Resettlement Programme and further links:

<http://www.refugeecouncil.org.uk/howwehelp/directly/resettlement/>

UNHCR - UNHCR Resettlement Handbook;

<http://www.unhcr.org/protect/3d4545984.html>

Borders and Immigration Agency (Formerly IND):

<http://www.ind.homeoffice.gov.uk/lawandpolicy/refugeeintegration/resettlement>

Home Office:

<http://www.ind.homeoffice.gov.uk/documents/asylumpolicyinstructions/apis/gatewayprotectionprogramme.pdf>

<http://www.ind.homeoffice.gov.uk/6353/6356/17715/closedconsultationsrefinteg1.pdf>

List of documents available on Refugee Council website:

Guide to cultural norms: Liberian, Sudanese and Congolese

Resettlement – a guide for Refugees (Welcome to the UK) in English and French

Understanding Resettlement to the UK – a guide to the Gateway Protection Programme

Resettlement Programme Evaluation

Understanding the Gateway Protection Programme

Welcome to the UK

Burma Cultural Profile

Sudanese Cultural profile

Liberian Cultural profile

Congolese Cultural profile

Karen Cultural profile

Sheffield Programme Plan

Hull Programme Plan

Opting out of the Programme – leaflet

End of Programme booklet

Gateway Protection Programme Skills Share day notes and contact list

Gateway Protection Programme evaluation report by Maggie Cramb and Jo Hudek

Appendix 1: Personal Integration Plan

The PIP covers the following areas

Housing

Legal

Benefits & Finance

Education & Training

Employment & Volunteering

Health & Well Being

Social & Leisure

Legal

The format is the same for each issue and an example for Housing is on the following pages. The action sheet is used to record actions for both the caseworker and the client.

GATEWAY PERSONAL INTEGRATION PLAN

Name:

Caseworker:

Caseworker telephone:

Caseworker mobile:

Date Personal Integration Plan (PIP) started:

1st Review:

2nd Review:

3rd Review:

Exit Interview:

Housing	
Background	
Hopes & Aspirations	Timescale
<p>1st Review: What has happened since the last meeting?</p> <p>Have hopes & aspirations changed? Comment if yes:</p> <p>Further action agreed? Y N See action sheet</p>	
<p>2nd Review: What has happened since the last meeting?</p> <p>Have hopes & aspirations changed? Comment if yes:</p> <p>Further action agreed? Y N See action sheet</p>	
<p>3rd Review: What has happened since the last meeting?</p> <p>Have hopes & aspirations changed? Comment if yes:</p> <p>Further action agreed? Y N See action sheet</p>	

Personal Integration Plan - Action Sheet

Client Name:

Caseworker Name:

Date:

Caseworker Tel:

Tick all relevant areas:

Housing Benefits and Finance Education and Training Employment and Volunteering Health and Wellbeing Social and Leisure Legal Other

What action do we need to take?	Who is responsible for this action?	What information do we need?	When will this happen?	When will this action be reviewed?

Appendix 2: Client Charter

Refugee Action is a national voluntary organisation (or NGO) with offices across England. You are clients of the Gateway Protection Programme which Refugee Action helps to run in Bolton and Bury.

The service will provide:

- a named caseworker to support, inform and advise you.
- a Personal Integration Plan (PIP) (for clients aged 16 and over) that lists what you want to achieve.
- help and assistance with finding and using services.
- a fair service to all our clients.

Our service:

- We normally work during office hours: 9.30am – 5.30pm, Monday – Friday.
- Our staff can not look after children.
- We can give you different choices, but we can not make them for you. Our role is to help you to do things for yourself.

Your rights:

- a free and confidential service
- impartial advice and information delivered during home visits, drop-ins and group sessions
- information concerning UK Government policy changes to Gateway
- to read case notes and PIPs and change if necessary
- to take part in regular PIP reviews with your caseworker
- to take part in an end of programme evaluation
- the services of an interpreter if needed
- to work with a Refugee Action volunteer if needed
- complain if we do not meet the standards of service

The Refugee Action team will:

- be on time
- return telephone calls within 24 hours (except week-ends and public holidays)
- give you a named contact if your caseworker is on holiday
- rearrange appointments as soon as possible if we need to cancel the previously arranged appointment

- The Refugee Action team would like to hear your views about our service and has a complaints procedure.

If you have a comment about our service:

- speak to your caseworker and discuss it with them

Appendix 3: Interpreter Training Plan Overview

Session aims:

- to increase understanding of Refugee Action's work and the role the interpreter has within that.
- to raise awareness of best practice, policies and procedures interpreters should follow to best meet client needs.
- activities and Learning Objectives
- icebreaker Activity on the Role of the Interpreter
- define the role and qualities of an interpreter
- underline the idea that different roles in different contexts require different qualities

Introduction

- Introduce session and aims
- Set groundrules and understand housekeeping information

Presentation and discussion on the role of the interpreter

- Define the role of the interpreter
- Define impartiality

Activity on impartiality

- Apply the concept of impartiality to advice-giving situations

Checklist and second discussion on the role of the interpreter

- Outline what the interpreter can expect from Refugee Action
- Outline what the interpreter can expect from the Resettlement Worker
- Outline what Refugee Action expects from the interpreter

Activity on Confidentiality

- Define confidentiality
- Recognise what confidentiality means in practice
- Identify the consequences of confidentiality being breached
- Develop empathy with clients regarding their personal information

Third Discussion on Role of the interpreter

- Underline the role of the interpreter

Activity using Case Studies

- Identify issues surrounding interpreters being from the same community as clients
- Recognise the role of the interpreter in difficult interpreting situations

Sometimes, Always, Never Activity on Boundaries

- Apply knowledge of boundaries of caseworker and interpreters to different possible scenarios
- Discussion on the advantages and disadvantages of interpreters being from the same communities as clients
- Raise awareness of the boundaries surrounding the interpreter role

Physical Dynamics Role Play Activity

- Practise the physical dynamics in the interpreting situation
- Practise managing difficult situations likely to occur while interpreting

Final Case Studies

- Apply understanding of roles, boundaries, impartiality and confidentiality to difficult situations that could occur when interpreting.

Appendix 4: Example of media coverage



marie claire magazine

Esther Freeman, centre, and inset right, with members of Zeela, the choir she co-founded in Sheffield to help traumatised refugees

HERO of the MONTH

THE SERIES THAT CELEBRATES ORDINARY PEOPLE DOING EXTRAORDINARY THINGS

ESTHER FREEMAN THE WAR REFUGEE WHO SET UP A CHOIR IN SHEFFIELD TO PROMOTE PEACE

People were killed in front of me,' says Esther Freeman, a 35-year-old refugee from Liberia, West Africa, now living in Sheffield. 'Babies were shot in front of their parents and parents in front of their children. Most nights I think about it when I shut my eyes. I have seen terrible things. Sometimes, I wonder how I will ever forget.'

More than 200,000 people have been killed since Liberia's civil war started in 1989, and many thousands more have fled their homeland. Esther is one of the 133,000 Liberian refugees who fled to the neighbouring country of Guinea.

She walked for a week carrying her son on her back to get to safety. Exhausted, she was met with a squalid, overcrowded refugee camp in which to raise her family. It became her home for 14 years – and her three younger children were born there.

Finally, in April 2004, Esther was relocated to Sheffield under the United Nations' Gateway Protection Programme with her four children, Newman, 17, twins Florida and Florence, 13, and Mike, seven. Until they arrived in the UK, the children

had never slept in beds, and electricity and running water were a distant memory even for Esther. She now works as a care assistant in a local residential home.

Esther and her friend, Rose Bazzie, a fellow camp survivor, set up a choir with Liberian female refugees – called Zeela, which means peace – as a way of coming to terms with what they've been through. The choir meets once a week.

'Being in the choir has reduced the trauma of my experiences, and I have made new friends,' says Esther. 'We write songs based on our experiences. I hope that when people hear us sing, they are inspired and want peace in their hearts.'

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Appendix 5: yearly timetable (Sheffield)

	Operational tasks	Processes	Agencies	Objectives
1st phase Set up phase	<ul style="list-style-type: none"> DWP NINO's Health Permanent housing Access to schools Adult education/ English classes Banks/PO accounts Family support Orientation Transport systems Budgeting/money management Utilities Group support Family tracing Access to libraries etc. Recruiting volunteers Volunteering opportunities Skills audit 	<ul style="list-style-type: none"> Outreach/home visits Mobile telephone contact Fortnightly group meeting Team meetings Stakeholder's meetings IAMG/RIAP etc. Volunteer support 1st phase of Community development 	<ul style="list-style-type: none"> Refugee Council/Safe Haven Job centre plus - personal advisors Health - Central Health Clinic, GP and dental services Refugee New Arrivals Project, Sheffield - access to adult education EMAS - access to schools/ further education and nurseries Schools and colleges 	<ul style="list-style-type: none"> To assist refugees in settlement process and in accessing appropriate services To assist with orientation - practical help with finding way around and using facilities available To facilitate support within the group To assist with any urgent medical or other issues on arrival
2nd phase	<ul style="list-style-type: none"> Employment and training Volunteering opportunities Family support Community links Hospital visits Community development Social services/police Family reunion 	<ul style="list-style-type: none"> Outreach Mobile phone contact Referrals to agencies Fortnightly group meetings Stakeholder's meetings IAMG/RIAP etc. Team evaluation 	<ul style="list-style-type: none"> Refugee Council/Safe Haven Job Centre Plus Refugee Education and Employment Project - Sheffield Refugee New Arrivals Project 	<ul style="list-style-type: none"> To facilitate the process of integration for resettled refugees To promote independence To support individual group members in settlement process To evaluate process to

	<ul style="list-style-type: none"> • Benefits advice 	<ul style="list-style-type: none"> • Volunteer support • Community development 	<ul style="list-style-type: none"> • RCO's • Schools/colleges • Volunteer Bureau • Northern Refugee Centre • Women's Group 	<p>move forward with programme</p>
Final phase	<ul style="list-style-type: none"> • Referrals to mainstream services if necessary • Information / resources • Liaison with other agencies • Finalising case plans • Future planning • Community development • Wind down of volunteer programme 	<ul style="list-style-type: none"> • Information workshops • Drop-ins • Stakeholder meetings • Liaison with mainstream agencies • Team meetings • Community self support through fortnightly meetings 	<ul style="list-style-type: none"> • Citizen Advice Bureaux • Northern Refugee Centre • Local advice services • Schools/ colleges • Community organisation 	<ul style="list-style-type: none"> • To withdraw services in a managed and planned way at the end of 12 months • To fully inform refugees of services available at the end of the programme • To work with other agencies to facilitate withdrawal of support from Refugee Council and Safe Haven

The Gateway Good Practice Guide

This guide is an essential reference document for all staff within statutory, voluntary and community organisations involved with the setting up or early stages of operating Gateway Protection Programmes.

It offers an insight into the complexities of co-ordinating and providing support services to a very unique group of refugees from the 2 leading voluntary sector organisations that have been involved since the programme began in 2004. ■

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