



## About the research

### *Social impacts of the Inverbrackie Alternative Place of Detention on Woodside and surrounds*

The Inverbrackie Alternative Place of Detention (APOD), is a low-security detention facility for children and families in the Adelaide Hills, which opened in October 2010. DIAC commissioned this study, undertaken by the University of South Australia, to analyse the social impacts of the facility in six domains: health, education, the local economy, local services and facilities, security and community relationships. The research methods employed included interviews, ethnographic observation, and analysis of statistics, community reports, media and inquiry findings.

DIAC also commissioned complementary research into the economic impact of the APOD, which was conducted in parallel by the South Australian Centre for Economic Studies.

#### **Key messages**

The research confirms that there have been no negative impacts by the APOD on health services, schools, property prices, local services and facilities, and only a minimal effect on police workload. It found that most local residents enjoy normal neighbourly relations with APOD residents.

The study found that, in general, people in the community and health services and those in the schooling sector working directly with the asylum seekers from the APOD had positive experiences due to the personal satisfaction of working with asylum seekers and the rewarding relationships gained with families whose children attended school from the APOD.

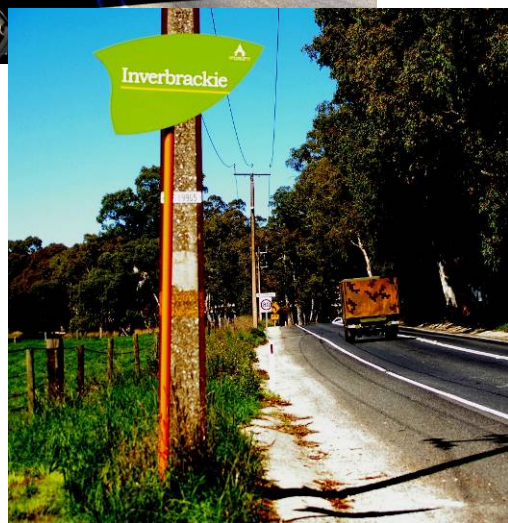
The research report provides advice on building positive community engagement in the context of facilities such as the APOD, which is informing departmental policy development and communication strategies. The social impact assessment methodology developed by the researchers is also feeding into departmental understanding about the social impact of migration more generally.

Policy Innovation, Research and Evaluation Unit

April 2012



# Social Impacts of the Inverbrackie Alternative Place of Detention on Woodside and surrounds



Prepared for the Department of  
Immigration and Citizenship

By

Dr Danielle Every  
Dr Sophia Rainbird  
Prof Nicholas Procter  
Ms Bianca Sebben  
Dr Kirrilly Thompson

3 April 2012



UniSA

UNISA

Dr Danielle Every

Contact details for first author (from 9/1/2012): Appleton Institute, CQUniversity, 44 Greenhill Road, Wayville, SA, 5034; Telephone: 08 83784521; Mobile 0434 217883; Email: d.every@cqu.edu.au

Dr Sophia Rainbird

Prof Nicholas Procter

Ms Bianca Sebben

Dr Kirrilly Thompson

Prepared for the Department of Immigration and Citizenship (DIAC), Australian Government

# Acknowledgements

---

The research presented in this report was funded by the Department of Immigration and Citizenship.

The researchers would like to thank:

- All the reviewers of this report who ensured that is up to date and accurate.
- The Steering Committee members who helped guide the research and report with their honest and timely feedback.
- The PIREU team in Canberra, particularly Anita Davis, William McClure, Richard Manderson and Emanuela Diaz for their support and feedback.
- The DIAC team at Inverbrackie, particularly Steve Johnson and Sarah Williams, who so helpfully facilitated access to meetings and stakeholders, and who gave up their own time on a number of occasions to answer many questions.
- The Adelaide Hills Council, particularly Stuart Boyd, who was also integral to gaining access to Council reports, minutes and councillors.
- The South Australian Department of Education and Children's Services who facilitated access to the schools.
- Professor Drew Dawson for his mentorship and support.
- Steve Whetton and Suraya Abdul Halim for their collaboration and advice on economic issues.

And most importantly, a big thank you to the all the participants in this study for generously sharing their stories and time. We were truly inspired by many of the people we spoke with whilst undertaking this research. Many of the ideas in this report are not ours but are those of insightful, committed, thinking community members who were kind enough to share their knowledge and ideas.

# Table of Contents

---

- Acknowledgements .....3
- Executive Summary ..... 10
  - Background and rationale ..... 10
  - Scope of the research..... 12
  - Who we are ..... 13
  - Research goals..... 13
  - Method ..... 14
  - Social Impacts..... 14
  - Recommended options ..... 16
- Introduction ..... 19
  - Background and rationale ..... 19
  - Scope of the research..... 21
  - Method ..... 22
    - Our Approach ..... 22
    - Data Collection ..... 24
    - Data Analysis, Writing up the Report and Beyond..... 27
    - Structure of this report ..... 28
- Part 1: The Australian Immigration System and the Inverbrackie APOD 29
  - Who are asylum seekers and refugees?..... 29
  - How many asylum seekers are arriving in Australia and how?..... 30
  - Why do asylum seekers come to Australia and how?..... 33
  - Australian asylum seeking policy and legislation ..... 33
    - Excised areas and offshore processing..... 34

Mandatory detention .....	34
Background to the Inverbrackie APOD.....	37
Geography and history .....	37
The Inverbrackie APOD .....	38
Why Inverbrackie .....	38
Management of the Inverbrackie APOD .....	39
<b>Part 2: Thinking About Host Communities.....</b>	<b>41</b>
Host community characteristics mediating the social impact of immigration detention centres....	41
Socio-economic conditions .....	41
The lived experience of diversity.....	43
Political participation.....	44
National and international changes .....	44
<b>Part 3: The Woodside Community .....</b>	<b>46</b>
Characteristics of the Woodside Community mediating social impacts.....	46
Socio-economic conditions .....	46
Experience of diversity .....	49
Political participation.....	52
National and international events.....	53
Conclusion .....	54
<b>Part 4: Social Impacts .....</b>	<b>55</b>
Health, welfare and wellbeing .....	56
Community concerns about health and the APOD .....	56
Health services in Woodside .....	57
Health services for immigration detention, low security facilities and the Inverbrackie APOD ...	60
Impacts on offsite contracted local health providers .....	64
Conclusion .....	66
Education.....	69
Community concerns about education .....	69

Education services in Woodside.....	70
Education services for the Inverbrackie APOD.....	71
Education for preschool, primary and secondary school-aged children.....	73
Education for children under 4.....	73
Education for adults .....	74
Impacts .....	74
School space .....	74
Staff .....	74
Local students.....	77
Inverbrackie students and parents.....	79
The school community .....	80
Finances.....	81
Conclusion .....	82
The Local Economy.....	85
Domestic Real Estate Market .....	85
Community concerns about the real estate market .....	85
Impact.....	86
Conclusion .....	86
Employment .....	87
Community concerns about employment.....	87
Employment in the APOD.....	87
Impacts .....	88
Conclusion .....	89
Business contracts and opportunities .....	89
Community concerns about business contracts and opportunities .....	89
Arrangements for business contracts and opportunities.....	90
Impacts .....	90
Conclusion .....	92
Direct expenditure .....	93
Community concerns about direct expenditure .....	93
Impacts .....	94
Conclusion .....	97



Indirect expenditure.....	97
Community concerns about indirect expenditure .....	97
Impacts .....	98
Conclusion .....	98
Services and facilities .....	99
Adelaide Hills Council .....	99
Library.....	99
The Woodside public swimming pool .....	101
Local roads.....	101
Concerns.....	101
Impacts .....	101
The Country Fire Service .....	102
Woodside Barracks.....	103
Concerns.....	103
Impacts .....	103
Conclusion .....	105
Security.....	106
Community concerns about security and the APOD.....	107
Security in Woodside.....	111
Role of the local and state police in security at the APOD.....	111
Security in the Immigration Detention network and the Inverbrackie APOD .....	112
Length of time spent in detention.....	114
Concerns about the visa application process.....	117
Security staff levels and training .....	119
Impacts .....	120
Conclusion .....	123
Community relationships .....	126
Relationship between the community and DIAC/Serco.....	126
The first three months: The announcement and town meetings.....	126
Community concerns about the announcement and town meetings .....	126

Community consultation .....	126
Answering residents' questions .....	127
Alienating supporting voices .....	128
Provisions .....	128
Impacts .....	129
Conclusion .....	131
The first 11 months .....	134
Concerns .....	134
Provisions .....	135
Federal, State and local level groups and meetings.....	135
Community Reference Group and Community Consultative Group.....	136
Inverbrackie Good Neighbour Council (IGNC).....	138
Other communication: website, community liaison officers, community group talks, newspapers and newsletters.....	139
Website .....	139
Community Liaison Officers .....	140
Community group talks .....	141
Newspapers and newsletters .....	142
Impacts .....	142
Conclusion .....	145
Relationship between the community and the asylum seekers .....	145
Concerns.....	145
Provisions for interaction .....	146
Impacts .....	149
Conclusion .....	152
Relationships between residents .....	152
Concerns.....	152
Impacts .....	152
Conclusion .....	153
<b>Part 5 Social Impact Table.....</b>	<b>156</b>
Health.....	156
Education.....	158
The Local Economy.....	160

Services and Facilities.....	162
Security.....	163
Community Relationships .....	164
<b>Part 6: Recommended options for addressing social impacts .....</b>	<b>168</b>
Building and strengthening local relationships.....	168
Communication .....	171
Building social and economic foundations in Woodside.....	174
<b>Part 7: Conclusion.....</b>	<b>176</b>
<b>Further Reading.....</b>	<b>182</b>
<b>Appendices .....</b>	<b>183</b>
Appendix 1: Flier.....	184
Appendix 2: Library questionnaire.....	186
Appendix 3: Serco employees' questionnaire.....	186

# Executive Summary

---

## Background and rationale

---

After the 2005 *Palmer* and *Comrie* Reports on Australia's immigration detention network, the Department of Immigration and Citizenship (DIAC) began to reform the determination process for asylum seekers, guided by the *Immigration Detention Values* announced in 2008. Creating Alternative Places of Detention (APODs) for children and families are a key part of this reform. APODs include housing in the community and low security housing centres, such as the Inverbrackie APOD.

The Inverbrackie APOD is located in the former residential housing of the Woodside Barracks in the Adelaide Hills, 1.5 kilometres from Woodside, a small rural township of 2,270 residents. Immigration Minister Chris Bowen announced the Inverbrackie APOD on 18 October 2010. The subsequent public meetings held in Woodside on 21 October 2010 and Lobethal on 24 November 2010 were fiery and combative. Those attending raised concerns about the impacts of the facility on Woodside's:

1. Health services
2. Education services
3. Local economy
4. Services and facilities
5. Security
6. Community relationships

On the whole, many people at these meetings believed that the APOD would have a negative impact on the town.

However, not all residents were opposed to the facility. There are also a number of people in Woodside who, although not necessarily supportive of the policy of mandatory detention, are supportive of asylum seekers themselves. At the meetings, and also in letters to the editor, school newsletters and websites, these people asked questions about the impacts of the APOD on:

1. The health and wellbeing of the asylum seekers
2. Potential relationships between asylum seekers and residents through visiting, volunteering and donating

At the time of the town meetings, there was little readily available, comprehensive information to answer residents' questions. Although there is anecdotal evidence of the impact of similar facilities on, for example, the local economy, no one has yet undertaken any sustained research into this issue before. This is the case in Australia and internationally. There is substantial research on the wellbeing of asylum seekers in detention, much of which was the impetus behind the development of places

like Inverbrackie. It would be expected that wellbeing may be improved in these low security family-style facilities, however, there hasn't yet been research on this. However, whilst this is an important issue that requires further research, this report can only provide some initial evidence for informing such research as it falls outside the scope of this report (please see the section on Scope below).

Given the gap in our knowledge about the social impacts of immigration detention facilities on local communities, the Adelaide Hills Council, in their resolution passed on 19 October 2010, requested that DIAC fund social and economic impact assessments. These assessments were to identify affected groups and contain recommendations for how engage with these groups to minimise any negative impacts. The Minister committed funding to this impact assessment in December 2010.

The economic impacts are assessed in the economic report by the South Australian Centre for Economic Studies. The primary purpose of this research report is to provide an assessment of the social impact of the facility on the town of Woodside. This report analyses the social impacts of the Inverbrackie APOD in the six areas of concern raised by residents: health, education, the local economy, local services and facilities, security and community relationships. Included in the section on community relationships are considerations about interactions with people in the facility, donating, volunteering and visiting raised by those supportive of asylum seekers.

The secondary purpose of the analysis of social impacts is identifying best practice collaborative processes that already have been, and in the future could be, implemented in Woodside to enhance positive and minimize negative impacts.

There is also the potential for these findings to be used in other detention facility contexts. During the project we received calls from people in Western Australia and the Northern Territory who were interested in whether the findings might be applicable in their towns.

In thinking about the wider application of the research findings presented in this report on Woodside, we note that the social impacts arising from the opening of an immigration detention facility are mediated by:

1. The type of facility, it's location, population and the higher-level immigration processes and policies which influence these
2. The characteristics of the host community
3. Interventions undertaken to mediate impacts

This means that there is likely to be both common experiences and also considerable variability between different sites hosting immigration detention facilities. Because of this variability, there isn't a one-size fits all solution. Different communities and different facilities will require different solutions.

This doesn't mean that this research isn't useful in other places. Rather, this complexity and diversity requires a flexible and resilience-focussed policy. In our conclusion, we outline a tool kit that may guide policy and planning in others towns with detention facilities. This tool kit includes options for:

1. identifying the significant factors which will influence the impact on host communities;

2. developing best practice interventions to mitigate impacts; and
3. how to evaluate whether or not these interventions are working.

This analysis of impacts and a focus on developing collaborative partnerships contributes to the ongoing reform of Australia's response to asylum seekers by ensuring that impacts on host communities are considered in policy which aims to meet Australia's humanitarian goals.

## Scope of the research

---

The contractual obligation between the Department of Immigration and Citizenship (DIAC), Commonwealth of Australia, the University of South Australia and Central Queensland University required the researchers to:

*...conduct an independent assessment of the social impacts of the Inverbrackie Alternative Place of Detention (the APOD) on the local Woodside community and its social environment.*

Thus, the key objective of the research is to provide an assessment of the impacts of the APOD on the social aspects of Woodside and surrounds.

The supplementary objective is to recommend options as to how negative impacts can be mitigated and the positive impacts enhanced. Based on our impact assessment, our recommended options are directed towards contributing to the operating framework for the APOD, so that it continues to:

1. Be informed by local voices and takes into account the key relevant social issues; and
2. Incorporates a capacity building or community resilience strategy that involves a wide range of stakeholders.

On the basis of this social impact analysis, we were then asked to make:

1. Recommended options to mitigate or enhance social impacts
2. Recommended options for implementation.

The report is also a community document, and the people with whom we spoke were keen to read it. A number of people wanted to know more about the immigration system, where the Inverbrackie APOD fits within this system, and also details about the operation of the APOD. We have thus included this in our report. The aim of including this information is to place our findings and recommended options into context, so that it becomes a resource for greater understanding of the APOD. This report will be useful for informing community debates, decisions and activities.

Finally, whilst the research remit did not include a focus on the asylum seekers in the facility there are many people in Woodside who are either advocates for asylum seekers or quiet supporters. Advocates and supporters are concerned about the asylum seekers' health, wellbeing and education and their opportunities for interaction and integration. It was not within the scope of this project to speak with people detained in the facility or to evaluate the services provided in the facility. However, where possible, we have endeavoured to provide information that may be useful in answering these questions as well. For example, much of the information included about provisions in the APOD for health, education and security may be useful.

## Who we are

---

Together the research team has more than a decade of combined experience in working with refugees in South Australia, Australia and internationally. Professor Procter is Chair of the Inverbrackie CCG, sits on the Membership of Minister's Council on Asylum Seekers and Detention (formerly known as CISSR), and is a member of the Mental Health Subgroup of the Detention Health Advisory Group. Dr Danielle Every, Dr Sophia Rainbird and Professor Procter are from the University of South Australia's Refugee Research Group, part of the Human Rights and Security Research and Innovation Cluster. This Group specialises in research on human rights, civil society, immigration, employment, education and social inclusion. However, the ideas and views expressed in this report are those of the report's authors and do not represent the views of the three groups with which Professor Procter is associated, nor of the Refugee Research Group. Ms Bianca Sebben is an honours student at the University of South Australia working as a research assistant on this project. Dr Kirrilly Thompson is an expert in conducting qualitative research in a variety of organisational and community settings.

The researchers have been present at the unfolding events in Woodside since the announcement in October 2010. Dr Rainbird and Professor Procter attended the Woodside meeting on October 21<sup>st</sup> and the Lobethal meeting on November 24<sup>th</sup>. We began monitoring the media on the facility since this time. Dr Rainbird has lived in the Adelaide Hills for the past 20 years, Dr Every is a former Adelaide hills resident and Dr Thompson has been engaged with the Adelaide Hills area for the past 10 years through her horses that she agists there.

Together, the research team has both specialist research knowledge and valuable local networks and knowledge of the Hills area.

## Research goals

---

To identify:

1. The concerns of residents, service providers and stakeholders and suggest ways of successfully addressing them
2. Positive and negative impacts, their scale, geographic boundaries and duration
3. Factors unique to the region which might affect the level or type of impacts of the APOD
4. The links between pre-existing local social and economic issues and the impact of the APOD
5. Changes in residents', service providers' and stakeholders' position on the APOD and what influenced these changes

To provide, develop and build:

6. An evidence-base for developing practical interventions
7. Measures and interventions to enhance or mitigate impacts
8. An assessment of the effectiveness of already implemented mitigation measures
9. Knowledge about host community development and diverse populations
10. Replicable research methods for assessing social impacts in communities experiencing change

11. Best practice methods for facilitating positive community change and capacity building of an enduring nature
12. Templates and examples of positive attitudinal change in relation to asylum seekers

## Method

---

There are two commissioned reports into the impact of the APOD on Woodside: a quantitative economic report which analyses numerical quantities measuring key economic indicators<sup>1</sup>, and this current qualitative report on social impacts, which uses interviews, ethnographic observation and documents such as community reports, media and inquiry findings.

The quantitative and qualitative approaches complement each other. Together, they provide a more comprehensive understanding of the impact of the APOD.

The Social Impact Study consisted of discussions with 124 people (approximately 5% of the local population) either in person, over the phone, via email or in writing. We spoke with key stakeholders and service providers in health, education, local businesses, public facility managers, the Council, the Barracks, the Country Fire Service (CFS), and local community groups, including church leaders. We also spoke with residents including: parents, workers, carers, new home owners, and agriculturalists.

We also drew upon key documents like statistics from the Australian Bureau of Statistics, media, campaign documents (e.g. websites, fliers), and reports on health, defence and the local economy.

Using all these data sources, we were able to gain a comprehensive picture of the impact of the APOD on each key area from the perspective of both service providers and people in the community.

## Social Impacts

---

Following the announcement of the APOD in Woodside, there was much uncertainty in the community about what it would mean for the town. Understandably, in such a new and unknown situation its predicted impacts were often dire - hospitals and schools under pressure from asylum seekers whilst locals were turned away, riots and terrorist attempts, citizens turning on each other. However, these feared outcomes have not eventuated.

There have been no reductions in local health services for local residents as a result of the APOD. All offsite health services for Inverbrackie clients are adequately funded and have not resulted in an unmanageable or uncompensated workload for providers. Local health providers have benefited from the facility through funding for new positions and equipment, new employment opportunities, new supply contracts, increased skills in working with diverse clientele, and personal satisfaction through working with asylum seekers. There is no difference between the amount and type of services available in the local area and in the APOD, except for the residents of the APOD having access to specialised mental health care.

---

<sup>1</sup> South Australian Centre for Economic Studies, 2011, *Economic impact of the Inverbrackie Alternative Place of Detention*.



There have been no negative impacts on local schools' space, teacher time and resources, or the wellbeing and achievements of local children. There have been no instances of conflict between local and Inverbrackie children. Local schools also report the benefits the Inverbrackie students have brought: regular funding for schools that can be used for whole school benefits; new knowledge; and new and rewarding relationships.

Property prices have not fallen, nor has property demand, except that which is attributable to the current flat market.

Those local businesses who supply food, building and maintenance, and health services needed by the APOD and who are able to meet supply demands have benefited. The Economic Report found that the APOD has contributed to a \$40 million increase in the regional gross value. There has been between \$2 and 2.5 million dollars flowing to local suppliers from the APOD. The Economic Report also found that of the 463 full time equivalent (FTE) positions created across the region by the APOD, 14 of these will be filled by Woodside residents and 297 by residents of the Adelaide Hills. As there are only 30 unemployed persons in Woodside, this is a significant contribution. Of the 163 Serco employees, 62 or 37.8% live in the Adelaide Hills. However, in our interviews we found that on an individual level, many residents reported that the economic impacts had been less than they had expected, and that they and their friends and family had experienced no direct benefits. Where these expectations haven't been met, people expressed disappointment and anger. This thinking about economic benefits may, however, change through the information from the economic study and this social impact report circulating in the community and providing a new perspective on benefits which was not previously available.

The local CFS has not been affected, and fire safety procedures and evacuation plans are in place.

The operation of the Woodside Barracks has not been affected. A new crèche and hall were built for the army families who previously used the facility which became part of the APOD.

Local access to the pool has not been affected. Asylum seekers from the APOD use the pool outside of the public opening hours.

In terms of security incidents which affect the Woodside community, there have no non-peaceful protests or escapes resulting in criminal activity from the APOD. However, concerns and predictions that security incidents may or will happen do continue to affect some residents' sense of personal and property security. The police workload has increased slightly, mostly through inquiries; police attendance at the APOD accounts for approximately 2 percent of the workload in the Woodside Police Area. At the time of writing this report, a national Memorandum of Understanding between DIAC, the AFP and state police services was being developed.

The relationship between DIAC/Serco and the local residents got off to a shaky start. A tight deadline meant that a pressured and not yet fully staffed team weren't always able to provide the information local residents wanted or needed. However, after the initial conflict the recovery skills employed in the following twelve months have been commendable. Good communication and relationship-building strategies include: the Community Consultative Group, the Inverbrackie Good Neighbour Council, DIAC staff guest speakers at local clubs and events, and a column in the local newspaper.

Both the Inverbrackie Good Neighbour Council and the local Circle of Friends have facilitated interactions between locals and the people detained in the APOD. These interactions have been positive for asylum seekers and residents.

Existing differences between local residents on the issue of asylum seeking – and on many other political issues – were exposed by the arrival of the facility. The way this was handled wasn't always conducive to open dialogue and communication, and many personal stereotypes were invoked that alienated others in the town. However, for most people this has subsided, returning to normal neighbourly relations.

DIAC's communication and community engagement, together with the passage of time, the leadership roles of the schools, health service providers, churches and Adelaide Hills Council, and the presence and activities of the Inverbrackie Good Neighbour Council, has on the whole reduced uncertainty and anxiety and resolved conflict for the majority of residents.

## Recommended options

---

The research in this report demonstrates that the most successful interventions for minimising negative impacts:

1. a sustained focus on building enduring local relationships,
2. communication strategies that are personalised and also those which widely disseminate factual information which addresses residents' primary questions,
3. interventions (not necessarily financial) that contribute to building the social and economic foundations in the town

A number of these interventions have already been successfully implemented in Woodside, for example:

1. Building enduring local relationships
  - a. Working with schools to develop and implement a comprehensive education program for students that benefits the whole school
  - b. Working with local health care providers to develop health care services for people in the APOD whilst avoiding any impact on local health service users
  - c. Speaking at local clubs and schools
  - d. Meetings with the Woodside Commerce Association about getting business with the facility
  - e. Establishing the Community Consultative Group and the Inverbrackie Good Neighbour Council which bring together residents, service providers and asylum seekers
2. Building enduring and flexible communication

- a. A newspaper column in the *Woodside Informa*
  - b. A local newsletter
3. Building economic and social foundations
- a. Funding for schools and local health services
  - b. New facilities for the ADF crèche and hall
  - c. 35 business contracts across the Adelaide Hills
  - d. 14 employment opportunities in Woodside, 297 in the region
  - e. \$40 million increase to regional gross value
  - f. Social and economic impact studies
  - g. A community liaison officer position

This success is the result of the work of both DIAC and other members of the community:

1. The staff at DIAC are enthusiastic, engaged and personable with a lot of experience in the field of immigration.
2. Principals and teachers in the schools and health service providers have pursued ‘whole of institution’ benefits and provided information and opportunities to interact with the wider community.
3. Local councillors and council staff have also sought ‘whole of community’ benefits, maintaining a politically neutral position to best represent its community
4. Local residents (e.g. business owners, community group members, churches, individuals, members of committees) have facilitated relationships the APOD, the asylum seekers and the community.

Where to from here?

We suggest a number of recommended options based on the analysis of social impacts that are included throughout the report and in the Recommended Options Table at the end of this report.

In this executive summary, we highlight our top three recommended options:

*Building enduring local relationships:*

One consistently raised issue was the disparity between the facilities for asylum seekers in the APOD and those accessible by the local Indigenous people, people with disabilities and those who are homeless or on low incomes. As a top priority for continuing to build relationships, we would recommend engaging with these groups in the local area populations to identify key areas of need and how the APOD may contribute to meeting these – for example through sponsorship, employment opportunities, and volunteering.

*Building enduring and flexible communication:*

Local residents, particularly those living near the facility, remain concerned about escapes and non-peaceful protests. They report that there is no official contact person to whom to liaise about suspected security breaches. As a top priority for communication, we would recommend identifying a contact person in the APOD for potential security breaches, and advertising their contact details widely, particularly to those people living in the vicinity of the facility.

*Building social and economic foundations:*

Youth unemployment was raised in a number of documents on Woodside as a concern for people in the area. As a top priority for continuing to support the social and economic development of Woodside, we would recommend developing pathways for employment of young people at the facility. One possible avenue is to liaise with the Regional Development Authority to include a stall for the APOD as a local employer at the annual Youth Week Expo.

# Introduction

---

## Background and rationale

---

After the 2005 *Palmer* and *Comrie* Reports on Australia's immigration detention network the Department of Immigration and Citizenship (DIAC) began to reform the determination process for asylum seekers, guided by the *Immigration Detention Values* announced in 2008. Creating Alternative Places of Detention (APODs) for children and families are a key part of this reform. APODs include housing in the community and low security housing centres, such as the Inverbrackie APOD.

The Inverbrackie APOD is located in the former residential housing of the Woodside Barracks in the Adelaide Hills, 1.5 kilometres from Woodside, a small rural township of 2,270 residents. Immigration Minister Chris Bowen announced the Inverbrackie APOD on 18 October 2010. The subsequent public meetings held in Woodside on 21 October 2010 and Lobethal on 24 November 2010 were fiery and combative. Those attending raised concerns about the impacts of the facility on Woodside's:

1. Health services
2. Education services
3. Local economy
4. Services and facilities
5. Security
6. Community relationships

On the whole, many people at these meetings believed that the APOD would have a negative impact on the town.

However, not all residents were opposed to the facility. There are also a number of people in Woodside who, although not necessarily supportive of the policy of mandatory detention, are supportive of asylum seekers themselves. At the meetings, and also in letters to the editor, school newsletters and websites, these people asked questions about the impacts of the APOD on:

1. The health and wellbeing of the asylum seekers
2. Potential relationships between asylum seekers and residents through visiting, volunteering and donating

At the time of the town meetings, there was little readily available, comprehensive information to answer residents' questions. Although there is anecdotal evidence of the impact of similar facilities on, for example, the local economy, no one has yet undertaken any sustained research into this issue before. This is the case in Australia and internationally. There is substantial research on the wellbeing of asylum seekers in detention, much of which was the impetus behind the development of places

like Inverbrackie. It would be expected that wellbeing may be improved in these low security family-style facilities, however, there hasn't yet been research on this. However, whilst this is an important issue that requires further research, this report can only provide some initial evidence for informing such research as it falls outside the scope of this report (please see the section on Scope below).

Given the gap in our knowledge about the social impacts of immigration detention facilities on local communities, the Adelaide Hills Council, in their resolution passed on 19 October 2010, requested that DIAC fund social and economic impact assessments. These assessments were to identify affected groups and contain recommendations for how engage with these groups to minimise any negative impacts. The Minister committed funding to this impact assessment in December 2010.

The economic impacts are assessed in the economic report by the South Australian Centre for Economic Studies. The primary purpose of this research report is to provide an assessment of the social impact of the facility on the town of Woodside. This report analyses the social impacts of the Inverbrackie APOD in the six areas of concern raised by residents: health, education, the local economy, local services and facilities, security and community relationships. Included in the section on community relationships are considerations about interactions with people in the facility, donating, volunteering and visiting raised by those supportive of asylum seekers.

The secondary purpose of the analysis of social impacts is identifying best practice collaborative processes that already have been, and in the future could be, implemented in Woodside to enhance positive and minimize negative impacts.

There is also the potential for these findings to be used in other detention facility contexts. During the project we received calls from people in Western Australia and the Northern Territory who were interested in whether the findings might be applicable in their towns.

In thinking about the wider application of the research findings presented in this report on Woodside, we note that the social impacts arising from the opening of an immigration detention facility are mediated by:

1. The type of facility, it's location, population and the higher-level immigration processes and policies which influence these
2. The characteristics of the host community
3. Interventions undertaken to mediate impacts

This means that there is likely to be both common experiences and also considerable variability between different sites hosting immigration detention facilities. Because of this variability, there isn't a one-size fits all solution. Different communities and different facilities will require different solutions.

This doesn't mean that this research isn't useful in other places. Rather, this complexity and diversity requires a flexible and resilience-focussed policy. In our conclusion we outline a tool kit that may guide policy and planning in others towns with detention facilities. This tool kit includes options for:

1. identifying the significant factors which will influence the impact on host communities;

2. developing best practice interventions to mitigate impacts; and
3. how to evaluate whether these interventions are working.

This analysis of impacts and a focus on developing collaborative partnerships contributes to the ongoing reform of Australia's response to asylum seekers by ensuring that impacts on host communities are considered in policy which aims to meet Australia's humanitarian goals.

## Scope of the research

---

The contractual obligation between the Department of Immigration and Citizenship (DIAC), Commonwealth of Australia and the University of South Australia and Central Queensland University required the researchers to:

*...conduct an independent assessment of the social impacts of the Inverbrackie Alternative Place of Detention (the APOD) on the local Woodside community and its social environment.*

Thus the key objective of the research is to provide an assessment of the impacts of the APOD on the social aspects of Woodside and surrounds.

The supplementary objective is to provide recommended options as to how negative impacts can be mitigated and the positive impacts enhanced. Based on our impact assessment, our recommended options are directed towards contributing to the operating framework for the APOD, so that it continues to:

1. Be informed by local voices and takes into account the key relevant social issues; and
2. Incorporates a capacity building or community resilience strategy that involves a wide range of stakeholders.

On the basis of this social impact analysis, we were then asked to make:

1. Recommended options to mitigate or enhance social impacts
2. Recommended options for implementation.

The report is also a community document, and the people we spoke with were keen to read it. A number of people wanted to know more about the immigration system, where the Inverbrackie APOD fits within this system, and also details about the operation of the APOD. We have thus included this in our report. The aim of including this information is to place our findings and recommended options into context, so that it becomes a resource for greater understanding of the APOD. This report will be useful for informing community debates, decisions and activities.

Finally, whilst the research remit did not include a focus on the asylum seekers in the facility there are many people in Woodside who are either advocates for asylum seekers or quiet supporters. Advocates and supporters are concerned about the asylum seekers' health, wellbeing and education and their opportunities for interaction and integration. It was not within the scope of this project to speak with people detained in the facility or to evaluate the services provided in the facility. However, where possible, we have endeavoured to provide information that may be useful in answering these questions as well. For example, much of the information included about provisions in the APOD for health, education and security may be useful.

## Method

---

### Our Approach

There are two commissioned reports into the impact of the APOD on Woodside: an economic report which analyses numerical quantities measuring key economic indicators, and this current report, the report on social impacts.

Social impact assessments are often undertaken prior to infrastructure projects, like building a dam. However, social impact assessments of changes arising from migration are new. So for this piece of research we are also developing research tools for assessing social impacts in this field.

We took as our starting point the concerns raised by residents and service providers about the potential impact of the facility. We began here because we think that ‘an important social impact is an impact that’s important to the community’. We identified the potential impacts that were important to residents through: the town meetings, the media, campaign materials, online social networking and lobby group websites, forums and community groups, conversations and our interviews.

Ours is a community-centred approach to determining the parameters of a social impact analysis.<sup>2</sup> The structure of the report also reflects this community focus. Each section begins by listing the community concerns, then evaluates whether these concerns were realised, and the impacts the APOD had in these areas.

What we’ve called a ‘community-centred approach’ lies somewhere in the middle of a continuum of potential social impact analyses. On the one end is an analysis that begins with a pre-determined list of potential impacts to assess. Comprehensive lists of impacts have been developed by academic researchers and social impact practitioners, and less comprehensive lists by bodies commissioning social impact studies. The lists, particularly in the latter situation, often reflect the interests of the particular body, not the community. At the other end of the spectrum are participatory approaches, in which community members become part of the decision-making process.

Where does this research fit on this spectrum? The funders, the researchers and local residents were unanimous that the research was to be a vehicle for multiple local voices. Thus, using a pre-determined list wouldn’t be appropriate. However, we did refer to the comprehensive list of social impacts identified by a researcher called Frank Vanclay<sup>3</sup>. This was to ensure that we didn’t miss any important potential social impacts. Interestingly, all of the concerns raised by people in the community were already on Vanclay’s list of potential social impacts. However, a fully participatory approach requires that the social impact assessment occurs during the planning stage, and in an environment where it is possible for community members to be involved in the decision-making process. Given that the assessment is being conducted in the post-planning, but also still developmental stage, of the APOD, and is an area where there are constraints on community

---

<sup>2</sup> Marcus Lane, Helen Ross and Allen Dale, 1997, Social impact research: integrating the technical, political and planning paradigms, *Human Organisation*, 56(3), 302-310

<sup>3</sup> Frank Vanclay, 2002, Conceptualising social impacts, *Environmental Impact Assessment Review*, 22, 183-211



involvement in decision-making, a fully participatory approach wasn't possible. Given this, in order to still aspire to the goals of community engagement, we took what we have called a 'community-centred' approach which identifies and articulates community concerns but isn't fully participatory.

The next step was to assess and evaluate the social impacts. We used a qualitative approach to data collection. As with ways to establish the scope of the research by identifying areas of potential social impacts, there is also a spectrum of ways to analyse and evaluate impacts. At one end of the spectrum is to use quantitative (i.e. numerical) assessment of impacts that can be measured and expressed in numerical terms. A common example is the increase or decrease in employment. This is used in the economic report on the APOD, and is very useful for understanding the impact in terms of the number of new jobs available, but it can't tell us what this increase in employment may mean for a town like Woodside. These more personal meanings might include the impact on family budgets and aspirations and career development opportunities. A qualitative assessment of impacts, i.e. one which collects mostly non-numerical data through interviews and observations, can access what is meaningful to a community, and their particular experiences of the impacts. Because social impacts are by their nature less 'measurable' in number terms, we used qualitative methods in this piece of research.

There were three ways through which we gathered data to evaluate the social impacts of the APOD:

1. We asked people. Social impacts are the lived experience of social change processes – how people experience their community, their services, and their relationships.
2. We observed. In order to understand this lived experience, we wanted a 'resident's eye view' of the community, services and relationships that took in aspects of the lived experience not captured in interviews, like fliers on notice boards, traffic, who was using local shops and when.
3. We researched. People's assessments of impacts, both people in the community and the researchers, are not necessarily disinterested and apolitical. For example, a comment that the expenditure on the APOD is excessive is shaped by beliefs about how money should be spent and on whom. These beliefs reflect political sensibilities and philosophies. Those who view asylum seekers as economic migrants argue that expenditure is excessive, whilst those who view asylum seekers as people in need argue that expenditure is necessary. In the first instance, expenditure on health services for people in the APOD may be viewed as excessive, in the second, as essential. In order to assess these kinds of statements, it was necessary to examine both these positions and evaluate them against standards like legislation, previous research on needs both of the community and asylum seekers, current and planned expenditure on services, and existing and planned facilities. To do this we read reports and plans and statistics on Woodside and the Adelaide Hills and obtained a lot of information about the facility and the immigration detention system through interviews and documents like parliamentary inquiries.

By using three sources for evaluating social impacts, we could triangulate our findings, that is, check findings from each data source against those from other data sources. This ensures that what we heard in interviews, for example, was also borne out in our observations and community documents.

This is a valid and reliable way of obtaining knowledge of these complex matters that has been used in previous research on the social costs and benefits of immigration.<sup>4</sup>

Finally, these triangulated, qualitative data sources allowed us to more fully understand the Woodside community and thus develop workable interventions. Such an in-depth and comprehensive knowledge of a place and its people is vital for developing recommended options. This kind of knowledge of the social context is the first step for developing workable solutions to community issues that reflect community values and are therefore sustainable over the long term.<sup>5</sup>

A further step in the process of identifying and evaluating social impacts is to consider factors that mediate these impacts. There is no linear relationship between a process or event that engenders social change, like the opening of the APOD in Woodside, and its social impacts. Rather, there are a number of potential intervening variables that mediate the impacts of the APOD:

1. The characteristics of the facility – its location, purpose, and population (all of which are influenced by government policy on offshore visa applicants)
2. The characteristics of the host community (i.e. a community where asylum seekers are located) in this case Woodside. These may include existing infrastructure (e.g. health and education); socio-economic conditions (education, employment, income, housing); the existing levels of ethnic diversity and experiences with diversity; opportunities for political participation; and the influence of media and global events
3. Interventions undertaken by DIAC and also community members such as educators, lobby group leaders and business people to enhance positive and reduce negative impacts

Each section of the report identifies the community concerns, reviews potential mediating factors present in the town or in the facility and mitigation measures that have been implemented, and then uses this in an assessment of the social impacts by drawing together these mediating factors with the reports of the residents' and stakeholders' experiences of impacts.

## Data Collection

People's concerns about social impacts focussed on the six key areas of health, education, the local economy, services and facilities, security and community relationships. The methods of recruiting participants were thus targeted i.e. identifying relevant stakeholders in each area of concern and asking them to participate in the study either through personal contact, via phone or email. As part of this study, researchers spoke with:

---

<sup>4</sup> Marcus Lane, Helen Ross and Allen Dale, 1997, Social impact research: integrating the technical, political and planning paradigms, *Human Organisation*, 56(3), 302-310; Kerry Carrington, Alison McIntosh and Jim Walmsley (eds), 2007, *The Social Costs and Benefits of Migration into Australia*, Department of Immigration and Citizenship, Available online at: <http://www.immi.gov.au/media/publications/research/social-costs-benefits/> (Accessed 8 November 2011)

<sup>5</sup> Bernard Guerin, 2005, *Handbook of interventions for changing people and communities*. Reno, Nevada: Context Press

1. Health
  - a) Staff at Mt Barker hospital
  - b) Local GPs and their office staff
  - c) Disability carers
  - d) Other local healthcare providers
  - e) SA Ombudsman's Office
  - f) Health service providers and visiting staff in the APOD
2. Education
  - a) Principals and staff of pre, primary and high schools with children from Inverbrackie
  - b) Department of Education and Children's Services
  - c) Education staff in DIAC's Inverbrackie Team
3. The local economy
  - a) Local real estate agents
  - b) Local businesses in the main street and industrial estate
  - c) Local residents employed at the APOD
  - d) DIAC staff based at Inverbrackie
  - e) Serco staff at Inverbrackie
4. Services and facilities
  - a) Councillors and staff at the Adelaide Hills Council
  - b) Woodside Library
  - c) Woodside CFS
  - d) Personnel at Woodside Barracks
5. Security
  - a) Woodside and Mt Barker police
  - b) Security staff at the APOD
6. Community relationships
  - a) Church leaders
  - b) Advocacy and lobby groups – Woodside Community Action Group, Circle of Friends, Inverbrackie Good Neighbour Council
  - c) The Community Consultative Group
  - d) Community Liaison Officers

As well as this targeted approach, residents were also recruited through the following:

1. Large A4 colour fliers (see Appendix 1) on the Woodside notice boards at Foodland, the vet, the library and the laundromat, and in the windows of the Woodside Providore and the Woodside Takeaway
2. Small B5 colour fliers in the two doctor's surgeries, a local real estate agent and the library.
3. Advertisements on the Inverbrackie Good Neighbour Council website, the Lutheran Church newsletter, The Courier local newspaper, Along the Grapevine, the Carer Wellness Centre newsletter, the Woodside Informa, and the Woodside Primary School newsletter
4. Emails and telephone calls to local groups and businesses

5. Small B5 colour fliers in residents' and businesses' letterboxes
6. Talking to owners and employees local businesses along the main street and in the industrial estate
7. A box placed in the Woodside library which collected answers to a written version of our interview questions (see Appendix 2)
8. A written version of our interview questions was sent to Serco employees living in the local area (see Appendix 3)
9. Informing people about the project by attending Community Consultative Group meetings and other community forums

The people researchers spoke with included:

1. Long term residents and those who have recently moved to Woodside
2. People in government housing, renters, owners and new home buyers
3. Those in employment and not currently employed
4. Business owners
5. Parents with children in local schools
6. Those for and against the facility

The questions were individualised for each situation, however they were focused on three broad areas:

1. Views on the APOD:
  - a. at the announcement and at the time of the interview
  - b. if those views had changed, and why they changed
2. Impacts on health, education, the local economy, local services and facilities, security, and community relationships
3. Communication:
  - a. How DIAC and Serco communicated with them;
  - b. How they communicated with other people in the community about the APOD (i.e. were people talking about, how, and did this affect their relationships with others in the community)

Using both these targeted and randomised recruitment and data collection methods produced a comprehensive picture of the impact of the APOD on each key area from the perspective of both service providers and people in the community. The sample of 124 is approximately 5% of the local population. There were 62 women (50%) and 45 men (36%), with 17 undisclosed (i.e. on anonymous surveys collected in the feedback box located in the local library) for gender (14%). The age of interviewees ranged from 25 to 70.

To supplement the information gained through the interviews, other relevant data included:

1. Statistics from the ABS
2. Local, state and national print, television and audio media
3. Transcripts, minutes, notes and observations from meetings
  - a. the town meetings on 21 October 2010 and 24 November 2010
  - b. the Combined Circle of Friends Community Forum on 24 January 2011
  - c. the Community Forums held by the Community Liaison Officers on 27 January 2011, 24 February 2011 and 29 March 2011
  - d. the Community Reference and Community Consultative Group meetings
4. Submissions to the Joint Select Committee on Australia's Immigration Detention Network
5. Web pages and social networking sites
6. Information from DIAC
7. Reports from SA Health, Adelaide Hills Council and the Department of Defence

## **Data Analysis, Writing up the Report and Beyond**

How we develop the coherent picture of Woodside, what we focus on and how we interpret it, are guided by the research questions but also by previous research and existing theories about host communities. We have outlined this research and theory in Part 2 to illustrate what has shaped our report and our understanding of what people have shared with us. In essence, these theories encouraged us to focus on the issues as being part of a larger social, economic and political context, shaped by local, national and international factors.

Our analysis is also shaped by an ongoing consultation process. After interviews, a researcher either spoke with some interviewees again either face-to-face or via email to ensure the reporting was accurate.

The place of this report in providing another space for community concerns to be heard and addressed does not mean that there are not other opportunities for this dialogue to continue. This is just one vehicle by which community concerns become part of the development of the APOD in Woodside. There is also the Community Consultative Group, the Inverbrackie Good Neighbour Council, other lobby groups, the previous and proposed community forums, and having DIAC come to speak with you and your group. (These are all discussed more fully in the analysis of Community Relationships).

In the same vein, integrating these findings into community life is not just the function of government. As noted in the introduction, this social impact assessment itself can also be viewed as a contribution to the ongoing debate and decision-making processes in Woodside. The sociologist Stewart Lockie writes that the potential value of a social impact assessment by which it should be

assessed is its contribution to “communicatively rational deliberation”.<sup>6</sup> Thus this report is designed to stimulate discussion and community activities, as well as DIAC-initiated activities, that incorporate new or more comprehensive knowledge.

This in itself will also further change the landscape. The very presence of a report like this engenders further change, and thus shifts social impacts yet again. Ongoing monitoring remains important both in research terms and for the community and the APOD.

## Structure of this report

Part 1 provides overview of the immigration system and where the Inverbrackie APOD fits in this system.

Part 2 presents a theoretical overview of research on host communities, immigration and asylum seekers.

Part 3 is a Community Profile, which provides the situational context for the APOD and the research. It outlines the unique features of the area and its residents, the area’s unique geographical features, and the links between pre-existing social issues in the area and the issues raised by the APOD.

Part 4 is the Social Impact Analysis. The Social Impact Analysis highlights the concerns, the provisions and responses in relation to these concerns, and the impact of the APOD on this area.

Part 5 contains the Social Impact Table (SIT), which brings together all the research presented in the report in an easy to access format.

Part 6 lists all the Recommended Options made through the report. It expands on these to identify actions, practical steps and expected outcomes.

---

<sup>6</sup> Stewart Lockie, 2001, SIA in review: Setting the agenda for impact assessment in the 21st century, *Impact Assessment and Project Appraisal*, 19(4), 277-287

# Part 1: The Australian Immigration System and the Inverbrackie APOD

---

This section reviews the Australian immigration system as it relates to asylum seekers. It places the opening of the Inverbrackie APOD in the wider policy context. It also provides a background for later assessments that consider how the type of facility, its location and population, mediates the impacts of the APOD on Woodside.

## Who are asylum seekers and refugees?

---

A refugee is a person who has been recognised as needing protection under the 1951 Convention Relating to the Status of Refugees. The 1951 Convention defines a 'refugee' to be someone who:

owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it

An asylum seeker is someone who is seeking international protection under the 1951 Refugee Convention, but whose claim for refugee status has not yet been determined. Because asylum seekers often arrive without a valid visa or other documentation, they have been erroneously labelled 'illegal immigrants'. However, under Article 14 of the 1948 Universal Declaration of Human Rights, seeking asylum is not illegal. Everyone has the right to seek asylum. The 1951 Refugee Convention prohibits host countries receiving asylum seekers from imposing penalties on them. These conventions are written into the Australian *Migration Act 1958*.

Arriving in Australia without a valid visa in order to seek asylum is not a criminal offence. Asylum seekers, regardless whether they arrive in Australia by sea or air, are classified under Australian law to be 'unauthorised arrivals' also called 'irregular maritime arrivals' for those arriving by boat. People who arrive in Australia with a valid visa and then overstay are called 'unlawful non-citizens'.

In 2010, the top five countries of origin of asylum seekers to Australia were Afghanistan (1,262), China (1,180), Sri Lanka (585), Fiji (545) and the Islamic Republic of Iran (459). A majority of these asylum seekers originate from countries which are, or have recently, experienced conflict and violence.<sup>7</sup>

---

<sup>7</sup> United Nations High Commissioner for Refugees. (2011). *Asylum Levels and Trends in Industrialized Countries 2010*: United Nations High Commissioner for Refugees p. 38

Figure 1, below, highlights that between 70% and 97% of asylum seekers arriving by boat at different times have been found to be refugees and granted protection either in Australia or in another country.<sup>8</sup>

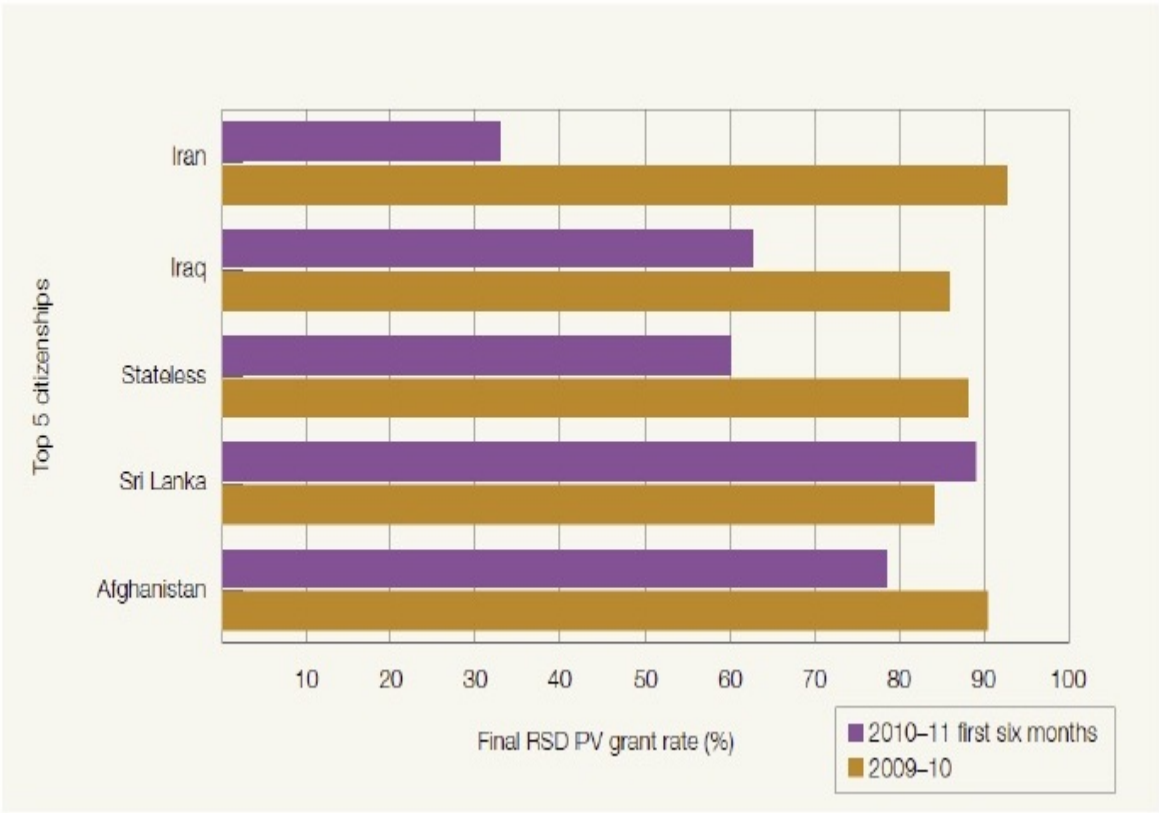


Figure 1: Final RSD Protection visa grant rates for Irregular Maritime Arrivals: Top 5 Citizenships (Source: Janet Phillips, 2011, *Asylum seekers and refugees: What are the facts?* Parliamentary Library, Department of Parliamentary Services, p. 9)

## How many asylum seekers are arriving in Australia and how?

Historically, most asylum seekers have arrived by air, not by boat. There has been an increase in the proportion of asylum seekers arriving by boat, but the numbers are less than those arriving by air, as the table below demonstrates.<sup>9</sup>

	2008-09	2009-10	2010-11 (first quarter)
Irregular Maritime Arrivals (IMA)	16 per cent	47 per cent	44 per cent
Non-IMA	84 per cent	53 per cent	56 per cent

<sup>8</sup> Janet Phillips, 2011, *Asylum seekers and refugees: What are the facts?* Parliamentary Library, Department of Parliamentary Services.

<sup>9</sup> Janet Phillips, 2011, *Asylum seekers and refugees: What are the facts?* Parliamentary Library, Department of Parliamentary Services.



Table 1. Onshore asylum applications (Source: Janet Phillips, 2011, *Asylum seekers and refugees: What are the facts?* Parliamentary Library, Department of Parliamentary Services, p. 6)

The graph below shows the number of irregular maritime arrivals in Australia and how these numbers have changed over time. There was a substantial increase in irregular maritime arrivals in 2009/10 but a large decrease for the 2010/11 period.<sup>10</sup>

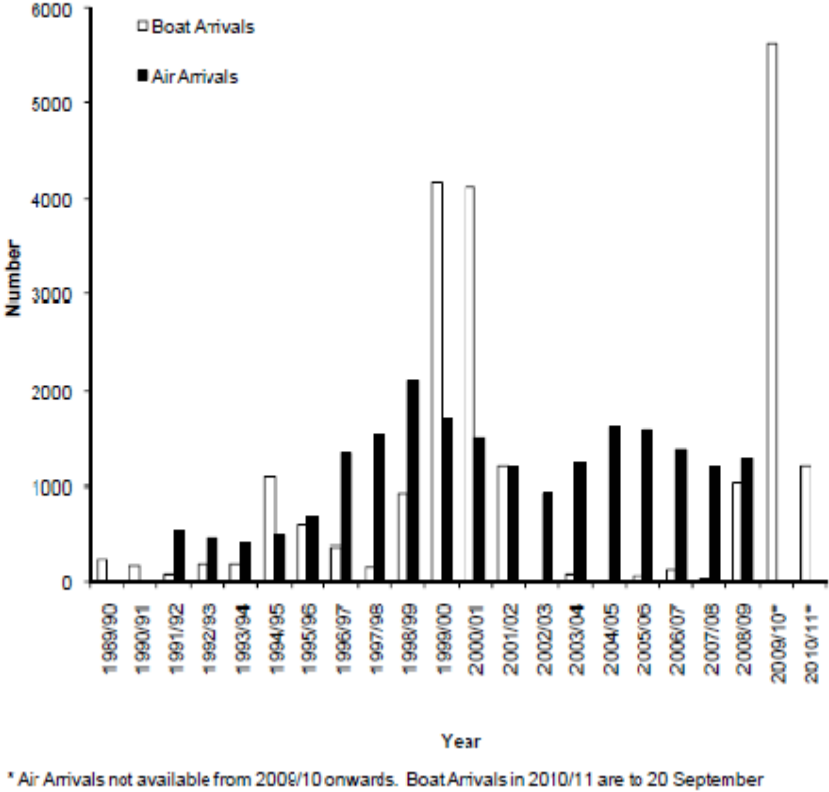


Figure 2: Australia: Unauthorised arrivals 1989-90 to 2010-11 Source: Graeme Hugo, 2011, *Economic, Social and Civic Contributions of First and Second Generation Humanitarian Entrants*, p. 9

In comparison to other industrialised countries, the number of asylum applications in Australia is small. In 2011, the United States, France, and Germany were the top three receiving countries. Together they account for four out of ten new asylum claims submitted in industrialized countries. Together with Sweden and the United Kingdom, the top five receiving countries accounted for 54% of all asylum claims. In 2009, asylum applications in Australia accounted for 0.5 percent of all asylum seekers worldwide.<sup>11</sup>

<sup>10</sup> Graeme Hugo, 2011, *Economic, Social and Civic Contributions of First and Second Generation Humanitarian Entrants*, p. 9

<sup>11</sup> United Nations High Commissioner for Refugees. (2011). *Asylum Levels and Trends in Industrialized Countries 2010*: United Nations High Commissioner for Refugees

Whilst the numbers of humanitarian entrants have remained relatively similar, the percentage of Australia’s migration intake that is made up of humanitarian entrants, including asylum seekers, has declined.<sup>12</sup>

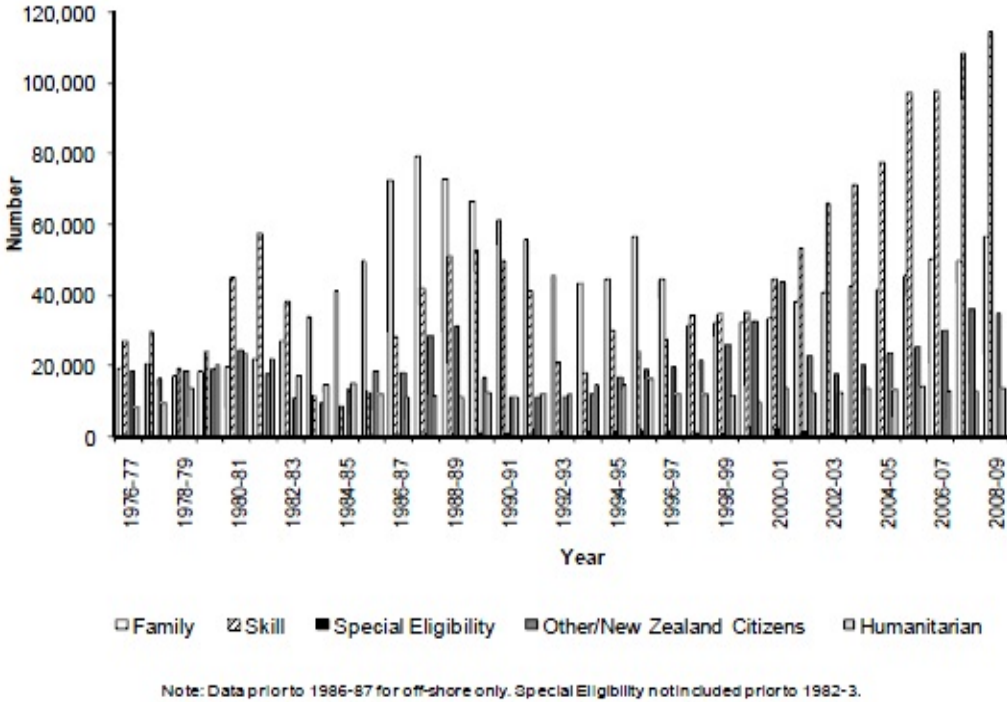


Figure 3: Australia: Migration Program Outcome by Stream and non-Program Migration, 1976-77 to 2008-09 Source Graeme Hugo, 2011, *Economic, Social and Civic Contributions of First and Second Generation Humanitarian Entrants*, p. 11

However, changes in the number of asylum seekers in Australia’s immigration processing system, whether through increases in the numbers arriving or increases in the number of people remaining in detention (see the section on Security in this report for a more detailed overview of this), do affect the capacity of the immigration detention system. The impacts of this on the immigration detention system have been reviewed in recent reports such as the Hawke and Williams 2011 review of the Christmas Island and Villawood incidents and in the final report of the Inquiry into Australia’s Immigration Detention system.<sup>13</sup>

<sup>12</sup> Graeme Hugo, 2011, *Economic, Social and Civic Contributions of First and Second Generation Humanitarian Entrants*, p. 11

<sup>13</sup> Allan Hawke and Helen Williams, 2011, *Independent Review of the Incidents at the Christmas Island Immigration Detention Centre and the Villawood Immigration Detention Centre*. Department of Immigration and Citizenship, <http://www.immi.gov.au/media/publications/independent-review-incident.htm>; Joint Select Committee on Australia’s Immigration Detention Network, 2011, Final Report, Available at: [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

## Why do asylum seekers come to Australia and how?

---

In the debates about asylum seeking, there are a lot of different ideas expressed about why asylum seekers come to Australia. Some people argue that asylum seeking is only influenced by 'pull' factors, that is conditions in the destination country such as its prosperity and its asylum seeking laws. Others suggest that asylum seeking is influenced by 'push' factors, that is they are compelled to leave their country of origin because of the conditions they experience there.<sup>14</sup>

As the graphs above show, in 2001, the number of asylum claims in Australia peaked. This was also the case globally, with a peak in 2001 of around 600,000 claims. Since 2001, the number of applications in Australia and globally has decreased. Some commentators have attributed this decrease to the new laws brought in during 2001 – i.e. to changes in 'pull' factors.

To test the theory that pull factors are the most significant influence on asylum flows, Timothy Hatton undertook a statistical analysis of source and destination country factors to determine the causes of the fall in asylum claims from 2001 to 2006. From this he concluded that:

1. The flow of asylum seekers is determined by oppression, terror and economic conditions in source countries, that is push factors.
2. Restricting access and increasing the difficulty of the visa application process does reduce asylum applications. However, it only accounts for approximately one third of the reduction in asylum applications from 2001 to 2006. For example during this time in Australia, reduced access and more difficult processes reduced applications by 2,654, but the total decline was 8,856. Hatton didn't analyse what factors accounted for the remainder of the decline.
3. Policies that affect the welfare of asylum seekers, such as restricting their right to welfare payments or to work, have little deterrent effect.<sup>15</sup>

This research finds that whilst some influence on where asylum seekers go can be created through changes in the host country's application process, push factors in the country of origin remain the primary cause of asylum seeking.

## Australian asylum seeking policy and legislation

---

The arrival of asylum seekers is a fact faced by many nations around the world. Australia, like other countries, has sought to meet the challenges posed by irregular people movements. There are two main elements of Australia's current policy and legislation relating to asylum seekers: excised zones and offshore processing and mandatory detention.

---

<sup>14</sup>Danielle Every and Martha Augoustinos, 2008, 'Taking advantage' or 'fleeing persecution'? Opposing accounts of asylum seeking. *Journal of Sociolinguistics*, 12(5), 648-667

<sup>15</sup> Timothy Hatton, 2009, The Rise and Fall of Asylum: What Happened and Why?, *The Economic Journal*, 119, 183-213

## Excised areas and offshore processing<sup>16</sup>

In 2001, offshore processing called the 'Pacific Solution' was established. The Pacific Solution was introduced in response to the arrival of Tampa vessel carrying 433 rescued asylum seekers who were subsequently transferred to the Pacific Island of Nauru.

As part of the Pacific Solution, Christmas, Ashmore, Cartier and the Cocos Islands were excised from the migration zones. Non-citizens who arrive here are considered an 'offshore entry person' (OEP). OEPs are prohibited from applying for a protection visa under S. 36 of the *Migration Act 1958*, which applies to people who are in Australia's unexcised zone. An OEP is unable to make an application for asylum unless the Minister for Immigration and Citizenship in Australia considers it to be in the public interest to allow them to do so. If this bar is lifted, an application for asylum made by an OEP is done under an administrative, rather than the legislative and judicial system.

Under the Pacific Solution, OEPs were transferred to Offshore Processing Centres on Nauru or Manus Island (Papua New Guinea) and some on Christmas Island where they were detained until their claims were processed.

Whilst the Pacific Solution reduced the number of people who would otherwise have been detained onshore, it was also criticised as being contrary to international refugee law, expensive, and psychologically damaging for detainees. Seventy percent of the people detained in the facilities were found to be refugees and resettled in Australia, New Zealand, Sweden, Canada and the USA.

The Pacific Solution was formally ended on 8 February 2008, and unauthorised boat arrivals since then have been processed on Christmas Island. Excised zones remain.

## Mandatory detention

Prior to 1992, detention for non-citizens without a valid visa was discretionary, though from 1989 to 1992 there was a policy of 'administrative detention' while a person's immigration status was resolved. In 1992, mandatory detention – the legal requirement to detain all non-citizens without a valid visa - was introduced.<sup>17</sup>

Currently, onshore unlawful non-citizens (generally visa overstayers) and asylum seekers who arrive by air with a valid visa and lodge an application for a protection visa are issued with a bridging visa which gives them temporary lawful status while their immigration status is being resolved. However, all asylum seekers who arrive without visas by boat are detained and usually transferred to Christmas

---

<sup>16</sup> This section summarises information from: Janet Phillips and Harriet Spinks, 2011, *Immigration Detention in Australia*, Parliamentary Library Background Note  
[http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/BN/2011-2012/Detention](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BN/2011-2012/Detention)

<sup>17</sup> Janet Phillips & Harriet Spinks, 2011, *Immigration Detention in Australia*, Parliamentary Library Background Note  
[http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/BN/2011-2012/Detention](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BN/2011-2012/Detention)

Island and remain in detention whilst their immigration status and health, security and identity checks are undertaken.<sup>18</sup>

There have been a number of criticisms of Australia's mandatory detention regime. Whilst some oppose mandatory detention in its entirety, most see detention, if not mandatory detention, as necessary, but express concerns about the length, conditions and circumstances of this detention. These concerns focus on: the effects of lengthy detention on mental and physical health particularly for vulnerable people like children; the financial costs of mandatory detention and lengthy detention in immigration detention facilities; and the decision-making process for asylum claims.<sup>19</sup> For example, in relation to the last concern, the Palmer and Comrie reports were released in 2005. These reports, into the detention of Cornelia Rau and the detention and deportation of Vivian Alvarez, found that these women had been wrongfully detained and, in the case of Alvarez, wrongfully deported. The reports also identified a number of systemic problems in Australia's immigration detention network and within the Department of Immigration and Citizenship which had contributed to these cases, and other similar cases and issues.<sup>20</sup> For a review of the reports on Australia's immigration detention network see Janet Phillips and Harriet Spinks Parliamentary Library Background Note: Immigration Detention in Australia available at: [http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/BN/2011-2012/Detention](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BN/2011-2012/Detention)

These criticisms have prompted a number of reform processes.

The Department of Immigration and Citizenship has undertaken reform its culture and processes.<sup>21</sup>

Extending this agenda of reform, in 2008, Chris Evans as Minister of Immigration also announced the *New Directions in Detention* policy. As part of this, the Government developed a set of *Immigration Detention Values*:

1. Mandatory detention is an essential component of strong border control.

---

<sup>18</sup> Janet Phillips and Harriet Spinks, 2011, *Immigration Detention in Australia*, Parliamentary Library Background Note [http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/BN/2011-2012/Detention](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BN/2011-2012/Detention)

<sup>19</sup> Janet Phillips and Harriet Spinks, 2011, *Immigration Detention in Australia*, Parliamentary Library Background Note [http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/BN/2011-2012/Detention](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BN/2011-2012/Detention)

<sup>20</sup> Palmer, M. (2005). Inquiry into the Circumstances of the Immigration Detention of Cornelia Rau (the Palmer Report) Available online: [www.immi.gov.au/media/publications/pdf/palmer-report.pdf](http://www.immi.gov.au/media/publications/pdf/palmer-report.pdf); Comrie, N. (2005). Inquiry into the Circumstances of the Vivian Alvarez Matter (the Comrie Report) Available online: [www.comb.gov.au/commonwealth/publish.nsf/AttachmentsByTitle/reports\\_2005\\_03\\_dimia.pdf/\\$FILE/alvarez\\_report03.pdf](http://www.comb.gov.au/commonwealth/publish.nsf/AttachmentsByTitle/reports_2005_03_dimia.pdf/$FILE/alvarez_report03.pdf)

<sup>21</sup> Elizabeth Proust, 2008, *Evaluation of the Palmer and Comrie Reform Agenda*, <http://www.immi.gov.au/about/department/perf-progress/evaluation-report/proust-report.pdf> (Accessed 15 November 2011).

2. To support the integrity of Australia's immigration program, three groups will be subject to mandatory detention:
  - a. all unauthorised arrivals, for management of health, identity and security risks to the community
  - b. unlawful non-citizens who present unacceptable risks to the community and
  - c. unlawful non-citizens who have repeatedly refused to comply with their visa conditions.
3. Children, including juvenile foreign fishers and, where possible, their families, will not be detained in an immigration detention centre (IDC).
4. Detention that is indefinite or otherwise arbitrary is not acceptable and the length and conditions of detention, including the appropriateness of both the accommodation and the services provided, would be subject to regular review.
5. Detention in immigration detention centres is only to be used as a last resort and for the shortest practicable time.
6. People in detention will be treated fairly and reasonably within the law.
7. Conditions of detention will ensure the inherent dignity of the human person.

While not all of these directions and values have been consistently implemented,<sup>22</sup> for example, long-term mandatory detention has continued with 39% of the detention population having been in detention for more than 12 months as at 31 October 2011,<sup>23</sup> they have supported a number of changes in the processing of asylum seekers. These include: granting asylum seekers access to publicly funded advice and representations, and to a review process for negative decisions scrutinised by the Immigration Ombudsman. They also removed the requirement that asylum seekers pay for the cost of their detention. As noted, the Pacific Solution was dismantled, and temporary protection visas were also abolished.<sup>24</sup>

The increase in arrivals during 2009 and 2010 prompted an expansion of the immigration detention network to increase its capacity and ease overcrowding. New facilities were announced: for families and unaccompanied minors in Melbourne, for single adult men in north Queensland and Western Australia, and for families and children at Wickham Point in Darwin, Pontville in Tasmania and

---

<sup>22</sup> Elibritt Karlsen, 2010, *Developments in Australian Refugee Law and Policy 2007-2010 Labor's first term in office*. Department of Parliamentary Services.

<sup>23</sup> Joint Select Committee on Australia's Immigration Detention Network, 2011, Final Report, Available at: [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

<sup>24</sup> Janet Phillips and Harriet Spinks, 2011, *Immigration Detention in Australia*, Parliamentary Library Background Note [http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/BN/2011-2012/Detention](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BN/2011-2012/Detention)

Inverbrackie in South Australia. Facilities for families and children were opened in order to move these vulnerable groups out of detention as proposed in the *New Directions in Immigration Detention*. Community detention and, since November 2011, bridging visas, are also being pursued as a solution to overcrowding.<sup>25</sup> Community detention (or residence determination) is for people to reside in the community without being formally monitored, with services provided by the Australian Red Cross.<sup>26</sup>

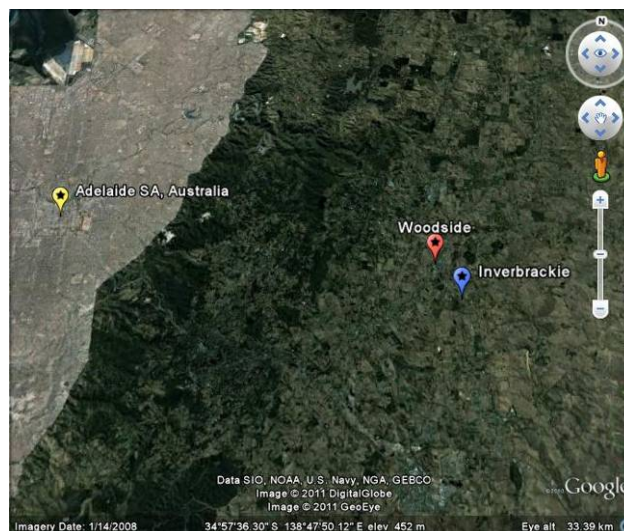
Several offshore processing programs have been proposed however the High Court ruling on the 'Malaysia solution' which transferred 800 unauthorised arrivals to Malaysia in exchange for 4000 refugees coming to Australia over 4 years cast doubt on the legality of all offshore processing.<sup>27</sup>

## Background to the Inverbrackie APOD

---

### Geography and history

The Alternative Place of Detention is located in the former married quarter of the Woodside Army Barracks on Nairne Road, Inverbrackie. The site is 37 kilometres from the Adelaide CBD and 1.5 kilometres from the town of Woodside.<sup>28</sup>



<sup>25</sup> Joint Select Committee on Australia's Immigration Detention Network, 2011, Final Report, Available at: [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate\\_Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate_Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

<sup>26</sup> Joint Select Committee on Australia's Immigration Detention Network, Final Report 2012, [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate\\_Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate_Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

<sup>27</sup> Janet Phillips and Harriet Spinks, 2011, *Immigration Detention in Australia*, Parliamentary Library Background Note [http://www.aph.gov.au/About\\_Parliament/Parliamentary\\_Departments/Parliamentary\\_Library/pubs/BN/2011-2012/Detention](http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/BN/2011-2012/Detention)

<sup>28</sup> Full details of the facility, include video footage, is available at: <http://www.newsroom.immi.gov.au/videos/97>

Figure 4: The location of Inverbrackie in relation to Woodside and Adelaide. Source: Google Maps, <http://www.maplandia.com/australia/south-australia/adelaide-hills/woodside/woodside-google-earth.html>

In 1949 the Woodside Army Barracks was used as the Woodside Migrant Centre when European refugees were housed there under the Government's Mass Resettlement Scheme for Displaced People.<sup>29</sup> Similar migration agreements continued into the 1970s whereby Croatian women and children were housed while the males of the household fulfilled two year work contracts in different parts of the state.<sup>30</sup>

## The Inverbrackie APOD

### *Why Inverbrackie*

In the initial town meetings and in our interviews a number of people asked 'why Inverbrackie' and not another site, such as Baxter or Nauru.

*I've been to Baxter, they've got nothing to complain about there, I was perfectly happy with the facilities.*

*Why can't you use Nauru? You spent all our taxpayers money over there, its sitting idle.*

Decisions about the location of detention facilities are based on a number of factors including: whether there is any available Commonwealth property, the availability of accommodation for the people in detention and also for staff, access to utilities or ability to quickly upgrade the facilities, as well as local, environmental and heritage issues.<sup>31</sup>

The Inverbrackie site was chosen because it had several key features necessary for opening a low security facility for families and children:

1. It isn't remote or isolated, but close to the Australian community, and to services and facilities, which both reduces costs and increases the detainees' access to legal, health and education services. The Inverbrackie site thus allows for better implementation of some of the core *Immigration Detention Values*, namely fair, reasonable and dignified treatment.
2. It provided housing stock and recreation areas suitable for families and children

---

<sup>29</sup> Footnote 10: Department of Environment and Water Resources (2007), 'AHC Final Assessment Report- Bonegilla Migrant Camp- Black 19,' Accessed online <http://www.environment.gov.au/heritage/ahc/national-assessments/bonegilla/index.html>

<sup>30</sup> Jupp, J (ed) 2001, *The Australian People: An Encyclopedia of the Nation, Its People and their Origins*, Cambridge University Press.

<sup>31</sup> Joint Select Committee on Australia's Immigration Detention Network, Final Report 2012, [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)



3. The housing stock was able to be quickly and relatively easily renovated to bring it up to liveable standards

The philosophy that guides Inverbrackie's development includes the importance of fostering:

1. responsibility
2. empowerment
3. self reliance
4. community involvement

This focus acknowledges that most of the people in the detention facility will be recognised as refugees and go on to become citizens. As one person put it, the rationale for this approach is that:

*They're going to be our neighbours.*

Bearing this bigger picture in mind, the management at Inverbrackie emphasises an environment that creates good citizens who can contribute socially and economically to Australia.

### *Management of the Inverbrackie APOD*

The Inverbrackie APOD, as with all detention facilities within the immigration detention network, is managed by the Department of Immigration and Citizenship (DIAC) who contract security services to Serco and health service provision to the International Health and Medical Services (IHMS). The Australian Federal Police, the Australian Security Intelligence Office (ASIO), the Red Cross and Life Without Barriers also have roles within the system. The Detention Health Advisory Group (DeHAG) and Council for Immigration Services and Status Resolution (CISSR) provide advice to DIAC and the Minister for Immigration and Citizenship. The system is externally monitored by the Commonwealth Ombudsman, as well as by the Australian Human Rights Commission, Comcare and the Australian National Audit Office (ANAO). A brief summary of their roles is provided below, taken from the Final Report of the Inquiry into Australia's Immigration Detention Network.<sup>32</sup> More details about the role of these bodies is also found throughout this social impact report in the relevant sections (e.g. more information on IHMS in the section on health).

**DIAC** administers the immigration detention network including resolving the status of people detained under the *Migration Action 1958* and managing the performance of its contracted service providers. It owes a duty of care to all people in detention and is ultimately responsible for people in detention. Its role includes: detention, case management, refugee status assessment interviews and decisions, removing detainees from Australia, contract management and auditing, negotiating with states and territories for the provision of services such as education and hospital care, authorising the use of force, granting visas.

**Serco** is contracted by DIAC since 2009 to provide detention, transport and escort services.

---

<sup>32</sup> Joint Select Committee on Australia's Immigration Detention Network, Final Report 2012, [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate/Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

**IHMS** is contracted by DIAC since 2009 to provide general and mental health services to people in detention to the same standard available in the general Australian community.

The **AFP** has a joint role with local police, Serco and DIAC in managing order in the detention facilities. **ASIO** provides security assessments for detainees. The **Australian Red Cross** is the lead service provider DIAC's community detention program. **Life Without Barriers** provides care and support to unaccompanied minors (who are under the guardianship of the Minister for Immigration and Citizenship) in APODs and community detention on mainland Australia, as well as independent observer status which provides support to minors during entry and intelligence interviews.

**DeHAG** is an independent group of health experts established in 2006 following the recommendations of the Palmer report (see above) to provide advice to DIAC on detention health care policy and procedure. **CISSR** is an independent advisory group who provide advice on policies, processes, services and programs necessary to achieve the timely, fair and effective resolution of immigration status for asylum seekers.

The **Commonwealth Ombudsman** conducts inspections of all immigration detention facilities, reports on the condition of detainees and investigates complaints. The **AHRC** conducts national inquiries and annual inspections focussing on the treatment of detainees in immigration detention and makes recommendations to the government on the basis of these inquiries and inspections. **Comcare** works with Commonwealth employers and employees to reduce workplace injury and disease. The **ANAO** supports the Auditor-General to audit government bodies and service providers.

# Part 2: Thinking About Host Communities

---

The previous section outlined the characteristics of the particular immigration detention facility opening in Woodside. The type of facility, the people in it, and also the broader policy changes that influence these, are one variable that mediates social impacts. The second is the characteristics of the host community.

Any social change process, including the opening of an immigration detention facility, does not occur in a vacuum. Social change processes happen in communities with pre-existing issues and concerns. The opening of an APOD may exacerbate or alleviate those pre-existing issues.

There is no previous research on host communities and the social impact of immigration detention facilities. However, in establishing what particular characteristics may mediate social impacts, previous research on related issues of attitudes towards asylum seekers, experiences of migration and on social impact studies generally suggest some potentially influential factors.

Drawing on this work, we begin the initial mapping out of a comprehensive model of factors influencing host community responses to detention facilities. This model is the first to draw together a wide range of factors, and offers a sound basis for guiding policy and process for locating detention facilities.

This initial exploration of host communities may potentially be extended to understanding social impacts of many aspects of migration including community detention, skilled migration, international students.

In this section, we outline the theoretical basis for these factors. In the next section we identify those operating and relevant in Woodside.

## Host community characteristics mediating the social impact of immigration detention centres

---

### Socio-economic conditions

Mapping existing resources in a community – health services, education services, employment opportunities, security services, governance mechanisms – is an important part of assessing social impact. The existing level of services will influence what measures need to be implemented to avoid potentially negative impacts.

Mapping socio-economic conditions – education, employment, income, housing and health - is also important to understanding social impacts as these conditions can mitigate or exacerbate positive and negative impacts. For example, access to employment is an important factor mediating social impacts. In a social impact assessment of a proposed mine on the local Indigenous community, those members who had outside employment were least likely to be impacted by the opening of a mine on their traditional land, whereas those who had only internal sources of income based on cultural

knowledge and connections were likely experience further economic marginalisation.<sup>33</sup> Similarly, in her Ashfield research, Amanda Wise identified social and economic disempowerment brought about through aging and decreased mobility as a significant factor increasing the impact of new migrants on this groups' social interactions.<sup>34</sup>

Christine Goodall's<sup>35</sup> research in Stoke-on-Trent in the UK examines socio-economic conditions and their relationship to community responses to asylum seekers. Asylum seekers were relocated to Stoke-on-Trent as part of the UK governments' dispersal scheme. The reaction of the local residents was very hostile and there were a number of altercations between asylum seekers and residents. Christine Goodall wanted to understand how this conflict came about. She found that Stoke-on-Trent has high unemployment and low levels of education. The residents there had little optimism for their future, little sense that they were treated fairly, and felt they had no control over their own lives. She argues that these conditions for residents made it impossible for them to see any positive effects from asylum seekers coming into their area, rather asylum seekers threatened the little socio-economic capital the residents did possess. In seeking to explain the response to asylum seekers in Stoke-on-Trent, Christine Goodall suggests that 'trust' – in government, in other people both familiar and strangers – is the key underlying variable.

She argues that trust is based on three factors:

1. Personal autonomy
2. Optimism
3. Equality and fairness

She suggests that these three experiences or feelings can only arise when:

1. Residents and their families have access to education and employment opportunities
2. People are able to participate in civic culture like decision-making
3. There is low crime
4. There is a clean environment
5. There are clear commitments to social and economic equality

---

<sup>33</sup> Marcus Lane, Helen Ross and Allen Dale, 1997, Social impact research: integrating the technical, political and planning paradigms, *Human Organisation*, 56(3), 302-310

<sup>34</sup> Wise, A. (2004), 'Contact Zones- Experiences of cultural diversity and rapid neighbourhood change among Anglo-Celtic and long term elderly residents in Ashfield.' Centre for Research on Social Inclusion, Macquarie University. Accessed online [http://www.stepone.org.au/media/3154/contact\\_zones\\_report.pdf](http://www.stepone.org.au/media/3154/contact_zones_report.pdf)

<sup>35</sup> Christine Goodall, 2010, The coming of the stranger: asylum seekers, trust and hospitality in a British city, New Issues in Refugee Research, UNHCR Policy Development and Evaluation Service

Based on this research of Lane, Wise and Goodall, we might expect that the absence or presence of these social and economic conditions will mediate the types and levels of social impacts experienced by local communities. For a community where there is low employment, for example, the arrival of an immigration detention facility may potentially reduce employment opportunities and increase the lack of optimism for the future, however it may also be an opportunity boost employment and economic prosperity for some or all community members. In relation to a new immigration detention facility, paying attention to the existing resources and conditions in the host community is key to mediating any potentially negative impacts and using the advent of the new facility to boost local opportunities.

## **The lived experience of diversity**

A second factor that is likely to mediate responses to asylum seekers and immigration detention facilities is the existing ethnic diversity in a community. The potential of existing diversity to enhance positive benefits from immigration facilities is suggested by the example of the Melbourne Immigration Transit Accommodation. This facility is located in Broadmeadows, a suburb which has a 60 year history as a settlement area for migrants and refugees. In response to a proposal to open a high security facility in the area, Federal MP Maria Vamvakinou, together with ethnic and Anglo community members mounted the Links Without Locks Campaign. This campaign was the driving force behind the reformulation of the proposed centre to become a low security facility. Since the opening of the low security facility in Broadmeadows, there have been numerous interactions between the people in the facility and the local ethnic and Anglo population. People in Broadmeadows with similar ethnic or religious backgrounds are frequent visitors to the facility. These existing community links have been the foundation for developing a number of activities and programs. These include: visits with local community groups as part of keeping the community informed, Ramadan festivities, and soccer matches with local schools. Groups involved in these activities include the Baptist Church, local schools, local universities, gardening groups, and the local Turkish community.

The experience in Broadmeadows suggests that existing diversity may influence the readiness of the population to make links with people in the facility. However, levels of existing diversity may be a rather blunt measure of the potential for positive social impacts. Rather, it may be that the lived experience of diversity is a more important factor.

The importance of the lived experience of diversity is identified by Amanda Wise. She researched an established Sydney suburb which was home to both the original Anglo residents and also newly arrived Chinese Australians. Wise is interested in the “lived experience of multiculturalism” i.e. what does multiculturalism look and feel like in everyday situations. To research this she spent considerable time in different community spaces and spoke with many residents to gain a residents’ eye view of cultural change, particularly that of the elderly residents who experience significant social and economic disempowerment. She found that the elderly residents felt alienated by the changing streetscape and population. Whereas the main street had once been a source both of goods and services, and also social interactions in shops and public spaces, the elderly residents no longer felt the streets offered the goods they wanted and felt marginalized by the new languages and

customs. Based on this, she made recommendations for changes that emphasised that multiculturalism is ultimately about place-sharing, where all members of a society feel welcome.<sup>36</sup>

Based on Wise's research, we might expect that a lived experience of diversity that is open and sharing may be more likely to facilitate positive relationships rather than just the presence of diversity, or negative experiences. We might also theorise that places where all people – residents and newcomers – feel included will be most important to developing social cohesion, and that efforts to mediate negative impacts must focus on creating 'shared places'.

## Political participation

Communities are not passive recipients of change. They are active agents. Different groups may respond to and re-shape the potential impacts arising from social change through campaigns, lobby groups, the media and local politicians.

However, not all members of a community necessarily have equal access to methods of political participation. Which potentially means that some members of the community have the ability to shape change processes positively, while others have less opportunity to do so.

For example, in relation to the political participation potential of two different groups within an Indigenous community faced with a mining proposal, both those for and against were able to successfully mobilise methods to have their cause heard and taken note of in the political decision-making process. Those opposed were able to defeat the proposal.<sup>37</sup>

Based on this research on political participation, we would expect that community campaigns and actions will shape potential and actual social impacts. We might also expect that some groups have louder voices and more resources to have their positions taken into account. In addressing social impacts then, it will be important to ensure that all groups are heard.

## National and international changes

The social impacts of an immigration detention facility, or other migration processes, are also mediated by national and international events. For example, given the importance of economic conditions as an influence on social impacts, global changes such as the Global Financial Crisis affect social impacts as well.

National and international changes not only influence social impacts directly, through changes to social and economic conditions, but also through changing people's perceptions of their world, their future and their community.

---

<sup>36</sup> Wise, A. (2004), 'Contact Zones- Experiences of cultural diversity and rapid neighbourhood change among Anglo-Celtic and long term elderly residents in Ashfield.' Centre for Research on Social Inclusion, Macquarie University. Accessed online [http://www.stepone.org.au/media/3154/contact\\_zones\\_report.pdf](http://www.stepone.org.au/media/3154/contact_zones_report.pdf)

<sup>37</sup> Marcus Lane, Helen Ross and Allen Dale, 1997, Social impact research: integrating the technical, political and planning paradigms, *Human Organisation*, 56(3), 302-310

Based on this we would expect that national and international events that affect economic or national security will shape the social impacts of an immigration detention facility, either directly through changing socio-economic conditions, or indirectly, through changing thought processes and concerns.

# Part 3: The Woodside Community

---

In the previous section, we identified characteristics of the host community that play an important role in mediating social impacts. In this section, we outline key local conditions of Woodside and Inverbrackie that we suggest have influenced the social impact of the APOD in this area.

## Characteristics of the Woodside Community mediating social impacts

---

### Socio-economic conditions

The socioeconomic status (measured by individual, family and household incomes) of all residents in the Hills area is equivalent too, or higher than, the state average except for some groups in Strathalbyn and Mt Pleasant, and the Indigenous population.<sup>38</sup> However, the Adelaide Hills Council *State of the District Report 2011* suggests that within the Hills, Woodside has a lower weekly family income than other Hills townships.

Employment in Woodside is higher than the metropolitan average, and also the Hills average. The 2006 census data indicated that 97.9% of the labour force in Woodside was employed, and 2.1% unemployed. Between 2001 and 2006, employment increased and unemployment decreased for Woodside residents. The unemployment rate for Woodside is slightly lower than that for the Adelaide Hills Council area as a whole, which is 3%.<sup>39</sup> It is also lower than the rate for the Adelaide Metropolitan Area for statistics, which is 5.3%.<sup>40</sup>

The three most popular industry sectors in which Woodside residents were employed are technicians and trades workers (17.1%), professionals (13.7%) and community and personal services workers (13.1%). In comparison, Adelaide Hills Council overall shows that 13.5% are employed as Technicians and Trades Workers, 26.9% as Professionals and 8.7% as Community and Personal Services Workers.

Housing availability and affordability is an issue for the Adelaide Hills area as a whole. Only 1.5% of sales in this area are affordable for those with low incomes, compared with 15.9% for the State, and only 37% of rental properties are considered affordable, compared with 61% at State level.<sup>41</sup>

Housing availability is an issue in Woodside, with new subdivisions and housing developments not viable due to the restrictions on building on primary production land and in a watershed area, and the need to upgrade the Community Waste Water System, which is currently at capacity.<sup>42</sup>

---

<sup>38</sup> SA Health, 2010, *Adelaide Hills 10 Year Local Health Service Plan* Available online: <http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=vQfuTm1LPVQ%3d&tabid=612>

<sup>39</sup> Adelaide Hills Council, 2008, *Woodside Community Profile*

<sup>40</sup> Adelaide Hills Council, 2011, *State of the District Report*

<sup>41</sup> Adelaide Hills Council, 2011, *State of the District Report*



However, housing affordability is less an issue in Woodside. This is indicated by difference in mortgage payments, with 9.8% paying a high mortgage of \$2,000 or more, and 41.7% paying a low mortgage of less than \$950 per month. This is compared with 16.7% paying high mortgages in the wider Hills, and 32.9% paying lower. Woodside also has a larger number of homes with low rental payments (less than \$140 a week): 47.1% compared to 29.1% in the Adelaide Hills Council respectively.<sup>43</sup>

Woodside's current socio-economic conditions are likely to shift with the predicted increase in population for the nearby towns of Mount Barker, Nairne and Littlehampton. It is predicted that for this area, including Woodside, these population increases bring new challenges for the area such as:

1. Costs associated with new infrastructure needs
2. Increasing land use pressure for housing
3. Water catchment and 'right to farm' constraints on urban development

The predicted increase in population also heralds changes in the types of business opportunities and areas of growth. The Regional Development Authority report for the area suggests these changes may include:

1. The development of service industries in response to new population needs
2. Further development of tourism
3. Value-adding to primary industries
4. Development of comparative advantage industries such as art and culture<sup>44</sup>

For Woodside businesses, it may also mean that the development of Mount Barker as a regional centre may increase the existing trend for people to prefer shopping at larger centres rather than in local shops.<sup>45</sup>

Whilst the statistics and development reports reviewed here suggest that Woodside is not economically disadvantaged, some residents have less optimistic views of the town's current and future economic viability. In the interviews, some people said:

*we're doing it tough here*

*people are struggling in Woodside*

---

<sup>42</sup> Adelaide Hills Council (2009) *Adelaide Hills Council Townships & Urban Areas Development Plan Amendment Directions Report*.

<sup>43</sup> Adelaide Hills Council, 2008, *Woodside Community Profile*.

<sup>44</sup> Regional Development Authority, 2010, *Annual Report*.

<sup>45</sup> Adelaide Hills Council (2009) *Adelaide Hills Council Townships & Urban Areas Development Plan Amendment Directions Report*.

*it's looking pretty bleak, it might be time to pack up and move on*

*there's just not enough money here to keep my business going*

In support of these views, many people pointed out that the local fruit and vegetable shop had recently closed. This closure occurred during the time we were collecting data for this report. However, since that time an apparently thriving bakery has opened in the shop space.

What might explain the discrepancy between the statistical evidence for what was happening in Woodside and residents' perceptions and interpretations of what was happening?

One possibility is political, i.e. that these assessments of the local economy were made in order to argue that the APOD would have or did have a negative impact on the town. We noted that these comments about the local economy were made in the context of explanations about the potential negative impact of the APOD and of the arrival of asylum seekers in Australia.

However, the second possibility is the influence of broader factors. As noted in the previous section, Christine Goodall argued that a sense of optimism, autonomy and equality were important factors underlying the development of trust. Both optimism and trust have been declining in Australia in recent years. The most recent report on social cohesion in Australia noted that whilst social cohesion remains high, there was a significant reduction in people's feelings of trust both in government and in other people. There was also a significant increase in pessimism about the future. In response to the question, 'In three or four years, do you think that your life in Australia will be improved, remain the same or be worse?', the proportion of people answering 'a little worse' or 'much worse' has steadily increased. In 2007 the proportion was 11%, in 2009 to 13%, in 2010 and in 2011 it rose to 17%.<sup>46</sup>

In the previous section, we noted the influence of national and international events not only on tangible conditions like economic productivity, but also on people's perceptions and emotions. Thus, whilst trust and optimism are likely to be affected by actual economic and social disadvantage, it is also possible they are affected by these broader factors as well. In Woodside, it is possible that some of the feelings of pessimism reflect media reporting about asylum seekers. Media reports about this issue often emphasise discourses of catastrophe, greatly enhancing the public perception that boat arrivals are overwhelming and threatening. It is clear from the statistics (some of which are presented in Part 1 of this report) that this is not the case. Other global trends may also foster a sense of pessimism, particularly the Global Financial Crisis. Although Australia has not yet been affected by the GFC, its widespread and ongoing effects are likely to have heightened concerns about employment and financial futures and increased feelings of uncertainty and vulnerability.<sup>47</sup> The Adelaide Hills State of the District Report suggests that the implications of the GFC for the Hills may

---

<sup>46</sup> Andrew Markus, 2011, *Mapping Social Cohesion: The Scanlon Foundation's Surveys Summary Report*.

<sup>47</sup> Elliott, A.M. & Lemert, C.C., 2005. *The new individualism: the emotional costs of globalization*, London, UK: Rowman and Littlefield Publishers.

be: “vulnerabil[ity] to high unemployment, reduced local or international demand for food products, and declines in tourism, as discretionary expenditure declines.”<sup>48</sup>

Based on the statistics for Woodside’s socio-economic status, it seems that there are sufficient resources for both residents and asylum seekers, which may potentially circumvent feelings of inequity and disadvantage which were so prevalent in an economically disadvantaged town like Stoke-on-Trent. However perceptions of disadvantage based on concerns about wider economic downturns also played a role in people’s experiences of social impacts. In particular, these views mediated economic impacts, both positively, in a concerted campaign for the town to benefit from business contracts and employment, and negatively, in the ongoing feelings that expectations around economic impacts have not been met (please see the section on economic impacts for more details on this).

## Experience of diversity

Woodside has had some experience of diversity throughout its history.

The original custodians of the Adelaide Hills, including Woodside, are the Paramangk Indigenous Australians.<sup>49</sup> Today, there are only 20 Indigenous people residing in Woodside.<sup>50</sup> Despite their status as the original custodians of the land, there is little symbolic or actual inclusion of the Indigenous people within the area. For example, the Adelaide Hills Council conducted a survey in 2011 assessing community support for the permanent flying of the Indigenous flag at Council sites. Fifty five percent of people were against flying the flag permanently, and the Council recommended flying the flag only on special occasions.<sup>51</sup>

European settlement of the area was primarily by people from Germany.<sup>52</sup> The Woodside community today consists of 2,270 residents of which 83.4% are Australian born. 9.6% of residents (217 people) were born overseas with only 1.9% of residents (43 people) from Non-English Speaking Backgrounds. The majority of those born overseas came from the United Kingdom (5.7%) and New Zealand (1.1%). This is less than the 5.8% for the Hills area as a whole. Those with Australian citizenship comprise 89.9% of the Woodside population.<sup>53</sup>

A number of people in Woodside identify as migrants. However, the meaning given to this status and how it is seen to relate to the issue of asylum seeking differs. On the one hand, the migration history of Woodside was seen as demonstrating the potential for Woodside to be a welcoming home for

---

<sup>48</sup> Adelaide Hills Council, 2011, *State of the District Report*, p. 71.

<sup>49</sup> <http://www.adelaidehills.org.au/about-the-adelaide-hills/our-indigenous-history>

<sup>50</sup> Profile ID (2008) Adelaide Hills Council Community Profile 2006 and 2001 Enumerated Census Information for Woodside, id Consulting. <http://profile.id.com.au/templates/profile/Clients/136Adel/PDF/210.pdf>

<sup>51</sup> Adelaide Hills Council Meeting, 28 June 2011.

<sup>52</sup> [http://en.wikipedia.org/wiki/Adelaide\\_Hills](http://en.wikipedia.org/wiki/Adelaide_Hills)

<sup>53</sup> Profile ID (2008) Adelaide Hills Council Community Profile 2006 and 2001 Enumerated Census Information for Woodside, id Consulting. <http://profile.id.com.au/templates/profile/Clients/136Adel/PDF/210.pdf>

refugees and asylum seekers, as in this extract from the Inverbrackie Good Neighbour Council website:

*In 1949 South Australia was the first state to establish a Good Neighbour Council to assist refugees and migrants who were looking to Australia for a new life after the second World War. Now, looking forward the Good Neighbour Council has a role to play again in South Australia.*<sup>54</sup>

However, on the other hand, 'legal' migrants, referring to those who had settled in Woodside, were differentiated from 'illegal immigrants' – the asylum seekers in the detention facility. The first was seen as entitled to be here, the latter without such entitlements. This position is illustrated in this statement about the differences in immigration processing procedures:

*I'd like to say I am an immigrant here myself. I came here 20 years ago. I went through due process, fair process.*

Thus, Woodside's history of diversity and what it means in terms of the opening of the APOD is always a matter of interpretation, and is drawn upon to support both sides of the argument.

There has been some previous experience with refugees in Woodside. As noted earlier, in 1949 the Woodside Army Barracks became the Woodside Migrant Centre when European refugees were housed under the Government's Mass Resettlement Scheme for Displaced People.<sup>55</sup> Similar migration agreements continued into the 1970s whereby Croatian women and children were housed while the males of the household fulfilled two year work contracts in different parts of the state.<sup>56</sup>



---

<sup>54</sup> Inverbrackie Good Neighbour Council, 2011, <http://www.inverbrackiegnc.org.au/>

<sup>55</sup> Footnote 10: Department of Environment and Water Resources (2007), 'AHC Final Assessment Report- Bonegilla Migrant Camp- Black 19,' Accessed online <http://www.environment.gov.au/heritage/ahc/national-assessments/bonegilla/index.html>

<sup>56</sup> Jupp, J (ed) 2001, The Australian People: An Encyclopedia of the Nation, Its People and their Origins, Cambridge University Press.

Figure 6. The Pindrals at the Woodside Migrant Hostel 1950s (Source [http://www.history.sa.gov.au/migration/collections/pictorial\\_collection.htm](http://www.history.sa.gov.au/migration/collections/pictorial_collection.htm))<sup>57</sup>

Woodside also has some experience with skilled migration. The adjoining town of Lobethal became home to Vietnamese workers at the local abattoir through the 457 visa migration process. When the Vietnamese workers first came to the area, Australia First posted fliers in Lobethal and Woodside claiming they were taking Australian and would not integrate. However, now most people feel this has not been the case. The Adelaide Hills Council ran English classes and provided a support officer to assist people to find housing for the workers. The new Vietnamese community began the annual Lantern Festival in the Hills. A Vietnamese store was opened in Lobethal. The store has since closed as the community gradually connected with other Vietnamese people in the city and moved their shopping there. There are also seasonal workers in the local vineyards from CALD backgrounds, primarily from the Middle East, Vietnam and Cambodia. These workers do not live in the area but are located in Port Adelaide and Enfield.

In relation to religious diversity, there are four Christian denomination churches in Woodside: Anglican, Lutheran, Community, and Uniting. The 2006 census data shows that a larger proportion of residents in Woodside (58.7%) nominated a religious affiliation compared to the Adelaide Hills Council (56.7%). Anglican was the dominant denomination (14.3%), while 14.1% of Woodside residents identifying with the Uniting Church. The Catholic and Lutheran churches each have 11.5% of Woodside residents' affiliation which has increased over the past 5 years in comparison to the Anglican and Uniting Churches who have seen a decrease in population. Only 1% of the Woodside population identified as being affiliated with a non-Christian religion, whilst 27.7% of Woodside residents stated that they had no affiliation to religion.

This overview suggests that there is some historical experience of diversity through settlement and through the migrant centre at the barracks, but these are interpreted to support both positive and negative views of asylum seekers. The present experience of cultural and ethnic diversity in Woodside has been limited to small populations of Vietnamese skilled migrants and CALD workers who do not reside in the area. Whilst there have been no negative outcomes from this, apart from initial political mobilisation against the Vietnamese residents in Lobethal, there have also been no significant changes to the ethnic make-up of Woodside's population.

Based on this, we might expect that there is as yet in Woodside limited experience of living in a diverse community. Thus potential ways of meeting both the challenges and opportunities this brings are in the process of being developed. This picture of a town in the throes of figuring out a community response to newcomers is supported by our interviews. Many people commented on the monocultural nature of Woodside. This was often put forward as an explanation for why some people felt negatively towards asylum seekers and migrants in general. We found that people referred to their experiences of ethnic diversity in other places in Australia and overseas. For example, some interviewees drew on their own personal experiences of diversity gained through travelling or living for some time overseas. These references to external experiences, in the absence of experiences internal to the community, were used to both highlight the potential dangers and

---

<sup>57</sup> [http://www.history.sa.gov.au/migration/collections/pictorial\\_collection.htm](http://www.history.sa.gov.au/migration/collections/pictorial_collection.htm)

effects of ethnic diversity such as a reduction in social cohesion, and also the potential positives that may arise from it including social rejuvenation.

In terms of how this experience mediates social impacts in Woodside, we suggest two influences. Firstly, there are many in the town who are excited by the opportunity for learning and forming new relationships that have and will continue to prompt a number of events and activities designed to foster these links. This is exemplified by the health service providers, educators and community groups. Their actions have enhanced positive social impacts arising from the APOD. Secondly, in the absence of any previous positive lived experiences of diversity – particularly in relation to asylum seekers - community conversations, and thus potential approaches to people in the facility, can be combative and dominated by negative images and concerns. Again, this is understandable in the context reviewed here. It means there is an important opportunity for engaging with these concerns in a respectful way that doesn't necessarily focus on changing opinions or attitudes but instead emphasises mutual understanding and that improves any community relationships which have been detrimentally affected by differences of opinion.

## Political participation

As noted in the previous chapter, communities are not passive recipients of change. As well as existing conditions that influence social impacts, social changes engendered by the development of a new immigration detention facility are also mediated by the actions undertaken by local people.

The media was one prominently used tool for community action. For residents on both sides of the debate, the media is a place in which to continue to advocate their position. There is an ongoing relationship between media and some local residents. For example, when a smoke alarm went off in one of the houses, before the CFS had a chance to respond, the DIAC staff had already received two calls from the media, alerted by nearby residents, about the alarm.

Community members also became active in shaping the potential social impacts arising from the facility through creating community and/or lobby groups. In Woodside, the two main groups formed were the Woodside Community Action Group (WCAG) – later renamed Fair Go For Our Communities – and the Inverbrackie Good Neighbour Council. Although initially popular and vocal, support and activity has decreased over time.

The leader of the WCAG organized the first town meeting in Woodside. The WCAG was active on the Community Reference Group, appeared in the local and national media (including The Courier and The 7.30 report), developed a website and a petition, lobbied local politicians to oppose the facility in parliament, and also traveled to Canberra to speak with the Minister. This group has been steadily increasing its contribution to community knowledge about the APOD and asylum seekers.

The Inverbrackie Good Neighbour Council has been less high profile in the media, though they have been in several articles in local papers. Their influence on the potential social impacts of the facility has mainly been through organizing volunteering and donations, and organizing interactive events between community members and asylum seekers in the APOD.

The leadership and activities of other community members has also been critical in mediating the potential impacts of the APOD by enhancing positive impacts and minimizing negative. These include:

1. Principals and teachers in the schools and health service providers. They have focussed on whole of institution benefits, providing information and opportunities to interact with the wider community, and creating a positive experience for asylum seekers and the community.
2. Local councillors and council staff who have remained politically neutral focussing on benefits for the community.
3. The Community Liaison Officers who provided information to the community, and voiced community concerns to the facility staff, during the initial months before opening.

On the whole, political participation has increased the positive social impacts arising from the APOD, particularly through creating more volunteer opportunities, forging new relationships and creating new possibilities for interacting with people from diverse cultural backgrounds.

## National and international events

In the section on socio-economic conditions, we noted the effects of the GFC on perceptions of the current and future opportunities for growth in Woodside. Another important influence on social impacts, particularly neighbourly relations, is the media. When asked where they get their information about the APOD, each person we spoke with said 'the media'. The two main concerns expressed about the media were:

1. bias
2. being the focus of too much media attention

A number of people thought the media were biased. Whilst some local media was reported as useful, in relation to other media sources, as noted by a participant

*the media only report on the bad stuff*

Another said

*my mum spoke with the media and said positive things about Inverbrackie but her story wasn't run, they only wanted negative stories*

Interviewees told us that the media's portrayal of their town wasn't correct:

*We were portrayed as a bunch of rednecks with no hearts*

*Woodside is a caring community and it was portrayed otherwise*

*The headline 'Woodside at War' was total overkill, most people thought 'we'll just wait and see'*

Feedback on the 7.30 report on Inverbrackie was that it didn't show any of the positives, especially in the schools.

We asked residents what effect the media reports had on the town. People identified biased and inaccurate reporting as affecting the quality of the conversations people had with each other. For example:

*people say they are against the APOD, and handing out petitions and fliers, but they don't know what they are talking about or why they are against it.*

Another said:

*people here aren't media savvy, they were portrayed in ways they didn't expect, and now they don't talk to the media or to other people about how they feel*

Given that the media is the main source of information for most people we spoke with, countering this bias was felt to be very important for improving the overall quality of information available to residents.

The SBS program *Go Back to Where You Came From*, which featured a local Woodside resident, was suggested as a useful source of information. It was reported that this documentary probably changed people's minds by

*putting a human face on the issue and showing the people as human beings, and not only reporting bad things about them.*

The *Woodside Informa* was also considered useful by residents. One resident said that the article in the *Informa* about education was helpful because prior to that article about the children going to schools across the Hills it was widely thought that all the children were going to Woodside Primary School. This new knowledge was important for families making decisions about education. For example, one interviewee is considering having children and thought she wouldn't be able to send them to Woodside because of the increased demand from Inverbrackie.

Media reports have strongly influenced the social impact of the APOD, particularly on community relationships, including those between residents, between residents and the APOD staff, and residents and the asylum seekers. Whilst there have been some positive views of asylum seekers, the APOD and the town of Woodside portrayed in some sections of the media, there has been a predominance of more negative perspectives. Those in particular which represented the town and its people in a negative light impacted on how people viewed themselves and others in the town. Many people were prompted by such reports to take a more active role in support and lobby groups. The more negative media focus has meant that in general those groups whose views were aligned with this had more opportunities to put their views to a wider audience.

## Conclusion

Each of the four factors described above – socio-economic conditions, experience of diversity, political participation, national and international events - have shaped the social impacts of the Inverbrackie APOD on the town of Woodside. The rest of this report draws on this information presented here, together with reports of existing services and facilities in the town (e.g. health), to identify the particular social impacts on health, education, the economy, security, services and facilities, and community relationships.



# Part 4: Social Impacts

---

As noted, the social changes brought about by the opening of the Inverbrackie APOD do not necessarily guarantee particular social impacts. Rather, their effects are mediated by (at least):

1. The type of facility
2. The characteristics of the community
3. Mitigation measures

Local residents identified six areas they were concerned would be impacted by the APOD: health, education, local economy, security, services and facilities, community relationships.

For each of these six areas we have identified:

- a) The social change process initiated by the opening of the facility
- b) Community predictions and concerns about impacts
- c) Features of the local community mediating this impact
- d) The characteristics of the policy and facility that relate to these impacts
- e) The measures and provisions which have already been put in place to minimise or enhance impacts

On the basis of this information, we then identify impacts and draw a conclusion about what these impacts have been, whether mitigations have been successful, and whether there is room for further interventions that may be useful.

## Health, welfare and wellbeing

---

### Community concerns about health and the APOD

Residents expressed three concerns about potential negative impacts of the APOD in relation to health services and the health of the existing local population:

1. The facility will increase pressure on inadequate local services reducing local's access to health care.
2. The expenditure on, type of, and access to health and wellbeing services in the APOD is greater than that available to Woodside residents.
3. The clients have communicable diseases that will spread to the local population.

Approximately a third of people we spoke with said that health service provision in their local area was inadequate. One example was the lack of accessible mental health services, not only after hours but during business hours as well. One resident reported being unable to access support for her son during a mental health crisis. Another told us about the Mt Barker Hospital emergency room now having reduced hours. Another said that he had been on a waiting list for surgery for a long time.

The pre-existing level of healthcare in Woodside and the Hills is also at the heart of the issue of equity and fairness of expenditure. Whilst some local residents argued that the APOD should not use local services because this would put these services under pressure thereby reducing local access, the alternative of providing health care services to asylum seekers in-house, was also criticised. In-house health care within the APOD was reported as exclusionary, expensive and inequitable. Some local residents saw a disparity in local versus APOD health services, and felt this was unfair. They compared their services with those they believed were being given to people in the APOD – 24 hour mental and medical care. People commented that “*we should be looking after our own people first*” and cited experiences like those above, of lack of services and long waiting lists. One person at the Woodside meeting had this example:

*You stated that they will be getting 24 hour emergency services in that so called detention centre. I have two young children that I have to drive down to the Women's and Children's Hospital at midnight if there's something wrong with them to wait in there for eight hours but they've got it at their doorstep, they don't even have to get out of their house.*

However, these views were not universal in Woodside. Not all the people we interviewed were concerned that the APOD would affect health services. There were also those who did not think the APOD health service provision was exclusionary or too expensive.

There were also residents who were concerned that the health services for the asylum seekers were inadequate. Their concerns included:

1. Mental and physical health needs not being appropriately treated
2. Not enough interpreters

3. No access to religious support for some denominations in the facility
4. Insufficient access to activities or interaction with the community
5. Insufficient clothing

For example, these concerns were raised by a regular visitor to the Inverbrackie APOD and submitted to the Joint Select Committee on Australia's Immigration Detention Network:

*At Inverbrackie (SA) many families with children have been in detention since arriving by boat in 2010 – some up to 19 months. In the past 7 months I have seen the strain on the faces of the children & young adults as they have changed from being composed & seemingly controlled while waiting in detention, to being perpetually sad people who state that they are anxious & depressed & have headaches.*

Some other examples of concerns raised in interviews include:

*I've heard that the dentists are pulling teeth out rather than fixing them.*

*They're given medication, but that's not proper treatment for post-traumatic stress disorder.*

The issue of communicable diseases was raised by parents of school children inquiring of school staff whether Inverbrackie children were immunised, and by the Woodside Community Action Group in relation to pool use and general public interaction. It wasn't often raised as a concern in the general interviews we conducted, but we have included it here as it reflects a widely held concern about asylum seekers and health.<sup>58</sup> We felt whilst it may not be raised often in our interviews, it is a perception circulating in the community that needs to be addressed.

## Health services in Woodside

Health care in South Australia is delivered through SA Health, with rural areas such as Woodside serviced by Country Health SA. The *Health Care Act 2008* establishes standards and guidelines for health care provision. The policy document *South Australian Health Care Plan 2007 – 2016* incorporates guidelines for health care.<sup>59</sup> Based on this health care plan, health reform, development and investment in country areas like Woodside are focussed on providing preventative health care and an integrated health care system with most needs met locally.

Currently, there are four hospitals in the Adelaide Hills: Mt Barker District Soldiers' Memorial Hospital, Strathalbyn and District Health Service, Gumeracha District Soldiers' Memorial Hospital and Mt Pleasant District Hospital. The nearest hospital to Woodside is Mt Barker Hospital, approximately 15 kilometres away. The Mt Barker Hospital is a 34 bed acute facility which offers inpatient services including obstetrics, acute medical, palliative care, surgical procedures, day surgery and post-

---

<sup>58</sup> See for example Sharon Pickering, 2001, Common sense and original deviancy: news discourses and asylum seekers in Australia. *Journal of Refugee Studies*, 14, 169-186.

<sup>59</sup> *South Australia's Health Care Plan 2007 – 2016*, Available online: <http://www.publications.health.sa.gov.au/cgi/viewcontent.cgi?article=1002&context=spp> (Accessed 7/10/2011)

operative recovery. It has 24 hour nursing services.<sup>60</sup> It's maternity ward currently has capacity for 150 births per year.<sup>61</sup>

Mt Barker and the wider Hills area including Woodside have experienced, and are projected to continue to experience, an increase in population generally, as well as fluctuating population increases from tourism. Based on these population projections, the Adelaide Hills Local Health Service Plan (LHSP) identified that future development of the Mt Barker hospital should include:

- a) Increasing the capacity of the Emergency Department, both infrastructure and staffing for events like emergency surgery
- b) Increasing the capacity the maternity ward – the number of births per year has grown to 350; the ward also needs ultrasound equipment
- c) More local access to local medical specialists: Psychiatry, Paediatrics, Surgery, Oncology, Physicians, Obstetrics
- d) More local access to local oncology, chemotherapy and palliative care
- e) More local access to local after-hours services
- f) The creation of a linked system of public transport between health care facilities, and in the Hills area in general<sup>62</sup>

These changes are expected to address the recent increase in the number of patients from the Adelaide Hills accessing metropolitan hospital services. In the last three years, this has increased by 14 percent for medical events and 11 percent for surgical events.<sup>63</sup>

Primary health care in Woodside is provided by two GP clinics: Woodside Medical Centre on Onkaparinga Valley Road and Woodside Doctors Surgery on Nairne Road. The Woodside Medical Centre has five GPs with two to three consulting per day over a five day roster. The Centre provides general care as well as obstetrics, acupuncture, podiatry and physiotherapy. The Woodside Doctors Surgery has one GP, and offers additional services on lifestyle counselling and diet/nutrition. The Mount Barker hospital includes GP Care, which is an after hours GP service until 10 pm weekdays,

---

<sup>60</sup> SA Country Health, *Mount Barker and District Health Service*:

<http://www.countryhealthsa.sa.gov.au/Services/LocalCountryHealthServices/MountBarker.aspx>

<sup>61</sup> SA Health, 2010, *Adelaide Hills 10 Year Local Health Service Plan* Available online:

<http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=vQfuTm1LPVQ%3d&tabid=612>

<sup>62</sup> SA Health, 2010, *Adelaide Hills 10 Year Local Health Service Plan* Available online:

<http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=vQfuTm1LPVQ%3d&tabid=612>; Adelaide Hills Division of General Practice, 2007, *Mt Barker Integrated Health Care Centre*, Available online: <http://www.ahdgp.org.au/LinkClick.aspx?fileticket=qRHxpTmoSds%3D&tabid=74&mid=763>

<sup>63</sup> SA Health, 2010, *Adelaide Hills 10 Year Local Health Service Plan* Available online:

<http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=vQfuTm1LPVQ%3d&tabid=612>; Adelaide Hills Division of General Practice, 2007, *Mt Barker Integrated Health Care Centre*, Available online: <http://www.ahdgp.org.au/LinkClick.aspx?fileticket=qRHxpTmoSds%3D&tabid=74&mid=763>

and 6pm on weekends.<sup>64</sup> The estimated capacity of the two Woodside clinics would be approximately 500 people per week, or about a quarter of the population.<sup>65</sup> The ratio of GPs to people in the Adelaide Hills (there are no figures available for Woodside itself) is 1:640. If the ratio is calculated by fulltime working equivalent rather than the actual number of GPs (which means a number work part time), then the ratio is 1: 1169. This ratio is comparable to that in other rural/semi-rural areas of South Australia, and significantly better than those in the Limestone Coast Division or the Riverland, though there are fewer GPs per person in all of these areas than there are in the metro area.<sup>66</sup>

For mental health, there is a Community Mental Health Team at Mt Barker Hospital. Emergency mental health services are available via the phone through the Royal Adelaide Hospital and are serviced by the non-metro team (there is also a metro team). There are also organisations like Lifeline who provide 24 hour crisis support over the phone.

However, access to mental health care, including specialists such as psychiatrists, is identified by the LHSP as a gap in current services. In the Adelaide Hills 10 Year Plan, it was noted that young people in the Hills identify mental illness as a major issue. There are at present no comprehensive local services able to work with people with substance abuse issues, or those with substance abuse and a mental illness. The LHSP reported that there is a need to increase the capacity of local GPs, emergency and ongoing support facilities in the area of mental health.<sup>67</sup>

For aged care, there is a retirement village located in Woodside with 16 units, and a privately owned retirement village run by the Lutheran Church<sup>68</sup>. Whilst the current aged population in the area is smaller than South Australia as a whole, it is projected, given the general ageing population, that this will increase. Thus the *Health Service Framework for Older People 2009-16* has outlined a model of care for this group that includes greater primary care capacity and more community care options.<sup>69</sup>

In response to these identified needs, under the *Health Care Act 2008*, thirty three Health Advisory Councils were established throughout South Australia. These Councils have twelve members: ten community representatives, one parliamentarian and one medical practitioner. These Councils

---

<sup>64</sup> SA Health, *Mt Barker and District Health Service*.

<http://www.countryhealthsa.sa.gov.au/Services/LocalCountryHealthServices/MountBarker.aspx>

<sup>65</sup> This is based on one full time GP being able to see approximately 125 people per week and there being 4 GPs available each day for five days per week. Rural Doctors Association of Australia (2003). *Viable Models of Rural and Remote Practice*.

<sup>66</sup> Primary Health Care Research and Information Service, 2010, *Key Division of General Practice Characteristics*, Available online: <http://www.phcris.org.au/products/asd/keycharacteristic/KeyDGPstatistics.xls> (Accessed 20 October 2011)

<sup>67</sup> Country Health SA, 2010, *Adelaide Hills 10 Year Local Health Service Plan 2010 – 2019*. Available online: <http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=vQfuTm1LPVQ%3d&tabid=612>

<sup>68</sup> Adelaide Hills Council, 2011, *State of the District Report*.

<sup>69</sup> Country Health SA, 2010, *Adelaide Hills 10 Year Local Health Service Plan 2010 – 2019*. Available online: <http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=vQfuTm1LPVQ%3d&tabid=612>

advise on health needs which advice provides the basis for formulating health care plans for their area. The Adelaide Hills Plan (see footnote 30), aims to have 80 percent of all health care needs provided in the Hills, with only highly specialised or complex care requiring metropolitan services. It is proposed that Mt Barker Hospital will become a Country General Hospital with a GP Plus Clinic. Funding for this clinic has been committed, as has funding to upgrade the Emergency Department and the maternity clinic to 600 births per year. Other recommendations are the development of an Integrated Health Care Clinic at Mt Barker which will include oncology, aged and palliative care, mental health care, and paediatrics, as well as increased capacity for elective surgery. This facility will increase the number of available GPs in Mount Barker, to be utilised by those in surrounding areas including Woodside.<sup>70</sup>

## Health services for immigration detention, low security facilities and the Inverbrackie APOD

The DIAC *Detention Health Branch* oversees health services in immigration detention facilities. The *Detention Health Framework 2007* governs the delivery of these health services.<sup>71</sup>

Health policies such as the *Framework* are an important part of establishing health care standards for particular populations and are already used for the mainstream population. As noted above, in South Australia health standards are set in the *South Australian Health Care Plan 2007 – 2016*. Vulnerable groups have specific health needs, so there are also state and national health frameworks for children and young people, the elderly and Indigenous Australians. Similarly, there are health standards and provisions for people in other detention systems, such as correctional services, or people who work in specific workplaces, like the Australian Defence Force. These context-specific frameworks are designed to meet the particular requirements of certain groups and establish a standard of care that meets these needs.

Asylum seekers who are in detention are considered a vulnerable group with complex health needs. These needs arise from their experiences in their host country and their asylum journey. Asylum seekers often have physical and mental illnesses arising from previous torture and trauma experiences, poor nutrition and disrupted health care. Detention, particularly closed detention (as opposed to community detention) has also been identified as a cause of physical and mental illnesses. The prevalence of risk factors together with few mental health protective factors in detention are greater for people in detention than in the general population. For example, whilst

---

<sup>70</sup> Country Health SA, 2010, *Adelaide Hills 10 Year Local Health Service Plan 2010 – 2019*. Available online: <http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=vQfuTm1LPVQ%3d&tabid=612>

<sup>71</sup> Palmer, M. (2005). Inquiry into the Circumstances of the Immigration Detention of Cornelia Rau (the Palmer Report) Available online: [www.immi.gov.au/media/publications/pdf/palmer-report.pdf](http://www.immi.gov.au/media/publications/pdf/palmer-report.pdf); Comrie, N. (2005). Inquiry into the Circumstances of the Vivian Alvarez Matter (the Comrie Report) Available online: [www.comb.gov.au/commonwealth/publish.nsf/AttachmentsByTitle/reports\\_2005\\_03\\_dimia.pdf/\\$FILE/alvarez\\_report03.pdf](http://www.comb.gov.au/commonwealth/publish.nsf/AttachmentsByTitle/reports_2005_03_dimia.pdf/$FILE/alvarez_report03.pdf)

Post Traumatic Stress Disorder rates are approximately 5 percent in the general Australian population, they are as high as 30 percent for those in immigration detention.<sup>72</sup>

Given these risks and health needs, the *Detention Health Framework* was developed to establish guidelines for health services in detention. This standard was introduced as a way to measure what is required in immigration detention facilities in response to the Palmer and Comrie reports. Prior to those reports, there had been a number of instances where health care for people in detention facilities considered inadequate.

The *Framework's* core principle is to provide timely, appropriate health care consistent with Australia's international obligations and also with the standards of health care provided for the Australian community.<sup>73</sup>

As is the case in relation to education (see the section on 'Education' in this report) 'community standard' is also a comparison with the 'standards of care that are provided to groups with similar needs'. This comparison to establish community standards is not necessarily the local community as a whole. For example, there is little need in the Adelaide Hills for physical and mental therapy to treat trauma and torture but it is necessarily a core part of service provision for asylum seekers. Thus, the comparative group for measuring what are 'community standards' would be other groups similar to asylum seekers in detention – such as asylum seekers living in the community or people in prisons.

To meet the health needs of asylum seekers in detention, the International Health and Medical Services (IHMS) is contracted to provide the onsite health services at the Inverbrackie APOD. IHMS has provided health services for all Australia's immigration facilities since 2009.

IHMS has established a medical clinic on the Inverbrackie site. It is not a 24/7 clinic. During business hours only, asylum seekers in Inverbrackie have access to:

1. A General Practitioner (1)
2. A Registered Nurse (5)
3. Visiting midwife (once per week)
4. Optometrical and dental treatment (visiting once per week)
5. Counsellors (2), mental health nurses (3) and psychologists (2)<sup>74</sup>

---

<sup>72</sup> DIAC, 2007, *Detention Health Framework*, <http://www.immi.gov.au/managing-australias-borders/detention/services/health-framework.htm> (Accessed 9/10/2011)

<sup>73</sup> DIAC, 2007, *Detention Health Framework* <http://www.immi.gov.au/managing-australias-borders/detention/services/health-framework.htm> (Accessed 9/10/2011)

<sup>74</sup> Department of Immigration and Citizenship, 2011, *Answer to Question 10 Questions on Notice to the Joint Select Committee on Australia's Immigration Detention Network*

There is a first aid service run by Serco for after hours medical incident including an active Triage line run by IHMS where Serco staff can escalate medical issues.<sup>75</sup>

Other IHMS staff at Inverbrackie APOD include: a Health Service Manager, Clinical Team Leader, Mental Health Team Leader (all registered nurses) and two administrative staff.<sup>76</sup>

The majority of health services are provided onsite. This decision reflects several factors:

1. the limits of local health services
2. the desire not to impact negatively the local area; and
3. the special health needs of asylum seekers

These factors lend themselves to the conclusion that the provision of onsite health services is essential. The APOD is not alone in providing specialised onsite health services. For example, the Woodside Barracks also has onsite facilities provided by the Joint Health Command of the Australian Defence Force that are provided for the use of people on Barracks and are not accessible by the local community.<sup>77</sup>

There are, however, also some services for the facility that are, or have been, provided locally. For these services, there is a Memorandum of Understanding with Country Health SA. When the APOD was announced, and since then, there have been numerous meetings between SA Health, Country Health SA, and DIAC, such as the Regional Managers Meeting in November 2010 and the State Coordination Group meetings starting in November 2010 (see Section on Community Relationships for more details of these meetings). At these meetings, service providers discuss their current health care capacity, the capacity they have for Inverbrackie clients, and any gaps between these two that can be addressed through funding and increased staffing. SA Health, Country Health SA and the Mount Barker Hospital also each attend the Community Consultative Group meetings (see Section on Community Relationships for more details on this group).

Country Health SA, through the Mt Barker Hospital and the Adelaide Hills Community Health Services, provide accident and emergency, outpatient and inpatient services, birthing, ante and postnatal care and community health services such as dietetics for people in Inverbrackie. These services have been provided in the hospital, at the community health site and on site at Inverbrackie.<sup>78</sup>

There is an existing agreement with the Commonwealth to fund these services provided by Country Health SA. This funding is on an activity basis as well as funding to increase services at the local site. Funding has been used for: a 0.8 midwife position, to establish an allied health resource and related

---

<sup>75</sup> DIAC, *Inverbrackie APOD Fact Sheet*, January 2011

<sup>76</sup> Department of Immigration and Citizenship, 2011, Answer to Question 10 Questions on Notice to the Joint Select Committee on Australia's Immigration Detention Network

<sup>77</sup> Australian Defence Force, *Joint Health Command website*, <http://www.defence.gov.au/health/> (Accessed 9/10/2011)

<sup>78</sup> Joint Select Committee on Australia's Immigration Detention Network, 15 November 2011, Adelaide, [www.aph.gov.au/hansard](http://www.aph.gov.au/hansard)



allied health services, a six month project officer position to coordinate the services, and equipment for the birthing unit at Mt Barker.<sup>79</sup>

Individual agreements have been made with a local Woodside pharmacist, physiotherapist and midwife to provide their services. Radiological services are sourced from Mt Barker. Please see the section below on 'Impact' for information about how this has affected the supply of services to the local community.

As well as these health services, there are also welfare and wellbeing services provided in the APOD. The *Detention Health Framework 2007* states that health is influenced not only by physical and mental conditions, but also by a sense of purpose in life, achievements, spiritual beliefs and recreation. Just as citizens who are not in detention find meaning through their work, their family, their spiritual and recreational activities, so too do those inside the immigration detention system. Where there is restriction of movement during administrative detention, activities which support health and wellbeing are not available through the same means as for citizens who are not detained, so these need to be provided.

As noted in the previous section, this perspective of holistic wellbeing is also embodied in new directions in thinking about health care for the mainstream community that focus more on prevention and the role of social and environmental factors. For the mainstream community, this focus is incorporated into health care policies such as in the *National Health Performance Framework*<sup>80</sup> and South Australia's *Health Care Plan*. The *Detention Health Framework* also embodies this thinking. It states that "a high-quality health service does not of itself guarantee good health outcomes; wellbeing is critically dependent on a humane and well-managed detention environment."<sup>81</sup> Thus, a core part of health and wellbeing for asylum seekers whilst they are in detention is to ensure as far as possible that this is a humane environment.'

Health and wellbeing services are also very important in terms of social impacts because they are linked to security. Providing a humane environment reduces the risk factors for security incidents (please see the Section on Security for further details on this.)<sup>82</sup> Thus the health and wellbeing of asylum seekers in immigration detention potentially also impacts the community. These impacts may occur either during the detention stage of the asylum process because health and wellbeing influences behaviour, including protests. It may also impact the community when asylum seekers become members of the community. Without health and wellbeing services seek to ensure that asylum seekers are mentally and physical healthy and that they have good life skills, they are less able to become full citizens who are can reach their personal goals and contribute to their communities.

---

<sup>79</sup> Joint Select Committee on Australia's Immigration Detention Network, 15 November 2011, Adelaide, [www.aph.gov.au/hansard](http://www.aph.gov.au/hansard)

<sup>80</sup> For details of this *Framework*, see <http://meteor.aihw.gov.au/content/index.phtml/itemId/392569>

<sup>81</sup> DIAC, 2007, *Detention Health Framework*, p. 9, <http://meteor.aihw.gov.au/content/index.phtml/itemId/392569>

<sup>82</sup> DIAC, 2007, *Detention Health Framework*, <http://meteor.aihw.gov.au/content/index.phtml/itemId/392569>

On the basis of these considerations about the importance of health and wellbeing, the provisions for wellbeing in the APOD include:

1. sport: volleyball, soccer, running (some of the clients are training for a Fun Run), Zumba,
2. arts and crafts: including painting, sewing, knitting and crocheting, cooking
3. leisure activities: including reading, music (music nights each Friday night), television, internet, the community hub
4. religious and spiritual support: provided by local church and religious group leaders (Hindu, Muslim, Catholic, Protestant), there is also a Religious Liaison Officer; includes celebrations of all religious events from Christmas to the Iranian New Year
5. excursions: for example to Mt Lofty Botanic Gardens, the Mount Barker Cinema, Warrawong Sanctuary, the Rocking Horse

The contract with Serco requires them to provide two activities each day, as well as providing excursions, with no specified target number for these. However, we understand that most clients are able to attend at least one excursion per week, and some one per fortnight, depending on staffing levels and security clearances.

### **Impacts on offsite contracted local health providers <sup>83</sup>**

The offsite local contracted health service providers report that they have not experienced any unmanageable pressure on their services that has resulted in the services to local residents being compromised.

Similarly, we did not receive any reports of people waiting longer for appointments or not being able to access health care facilities available in the town since the APOD opened.

Inverbrackie clients do not receive priority treatment over other patients. All patients, including those from Inverbrackie, are treated on the basis of their urgency and need.<sup>84</sup>

That there have been no negative impacts is due to:

1. The agreement between offsite health providers and DIAC for supplementary funding and staffing to fill predicted needs
2. The offsite local contracted health providers have been proactive in responding to both existing clients and new Inverbrackie clients to allay any concerns about local people being unable to access health services.

---

<sup>83</sup> The impacts on services utilised for wellbeing and excursions are looked at in the Section on Services and Facilities, and the impacts of access and interactions are addressed in the Section on Community Relationships

<sup>84</sup> Joint Select Committee on Australia's Immigration Detention Network, 15 November 2011, Adelaide, [www.aph.gov.au/hansard](http://www.aph.gov.au/hansard)

We give three examples here in relation to a local health care provider, birthing support services and accident and emergency services to demonstrate how potential negative impacts have been avoided and positive impacts enhanced.

One local health care provider takes appointments from Inverbrackie clients in the lunch hour when no other patients are booked in, in order to address local clients' concerns about parking, waiting room space and cultural clashes. However, despite the appointment times, there were frustrations around seating and people from Inverbrackie coming to the provider all at once. There were reports of some locals having to give up their seats. There were also issues around parking. After several months, despite the best efforts of the local offsite health care provider and staff, continuing issues meant that these services were moved on-site to the APOD. Fortunately, this solution also means that the provider is able to retain the benefits to his practice of an increased and regular client base.

In relation to birthing support services, as noted above, there is a midwife position and new equipment funded by the Commonwealth for the Mt Barker Hospital birthing clinic. There have been four babies born in the Mount Barker Hospital from women at Inverbrackie. This comprises approximately one percent of all the births at Mt Barker. The small number means that the birthing services provided to women from Inverbrackie have not increased pressure on these services.<sup>85</sup>

In relation to accident and emergency services, there have been approximately 18 visits by people at Inverbrackie to the Mt Barker Hospital Accident and Emergency services. Most of these were in the first six months of the centre opening, and have decreased since that time.<sup>86</sup> There were initially complaints from other patients in Accident and Emergency when Inverbrackie clients were brought in, however when it became apparent that they were not receiving preferential treatment, but were seen, as with everyone else, in order of the severity of the case, there were no further complaints.

As not only the client, but also security staff and interpreters, must attend appointments, in each of the above examples the local health service providers have liaised with Serco to make this presence unobtrusive so that where there is more than one patient the non-Inverbrackie patients do not feel intruded upon. For example, it was agreed that security staff wear civilian clothing, and they sit in the hall rather than in the room when in the hospital.

There have been discussions between local health service providers and Serco about timelines for providing goods and services. We understand these discussions have resulted in Serco becoming more familiar with the timing needs of local service providers and accommodating these in requests for goods and services.

Those offsite local health service providers who work with Inverbrackie clients also reported on the positive benefits. These included:

1. learning new, or reviving previous, skills working with a diverse client population;

---

<sup>85</sup> Joint Select Committee on Australia's Immigration Detention Network, 15 November 2011, Adelaide, [www.aph.gov.au/hansard](http://www.aph.gov.au/hansard)

<sup>86</sup> Joint Select Committee on Australia's Immigration Detention Network, 15 November 2011, Adelaide, [www.aph.gov.au/hansard](http://www.aph.gov.au/hansard)

2. challenging existing work practices and thinking in different ways; and
3. the personal satisfaction from working with people “who are just so grateful”.

One health service provider stated that the

*cultural learning has been huge, we learn more from them than they do from us*

Although there was initial apprehension about asylum seekers expressed by some staff of offsite local health service providers, they report that their personal interaction with the asylum seekers has resulted in a more positive perspective on Inverbrackie clients.

Health service providers are also positive about the opportunities for interaction that the presence of the Inverbrackie clients allows. One person commented on the waiting room being a good place for everyone to sit together, and that they encourage this kind of interaction when it occurs.

## Conclusion

There has been little negative impact on Woodside’s health services from the APOD.

In summary, in relation to each of the three community concerns:

*Community concern 1: The facility will increase pressure on inadequate local services.*

There were no reported incidents of local residents not being able to access health care because of the facility. The majority of the health services for the facility are provided onsite.

Where offsite services are used potential impacts have been mitigated through: moving an offsite service to on site, providing funding for equipment and staffing, and seating plainly dressed security personnel outside of the waiting room. The solutions were reached through negotiations between the local providers, DIAC and Serco. These interventions are summarised below.

### **Effective interventions already in place**

All health services provided onsite using local health service providers where possible so that they may benefit from the business.

Where offsite health services are utilised:

- a) Providing extra staff and equipment where needed
- b) The provider, DIAC and Serco liaise to develop an agreement around appointment times, the number of people at each appointment (i.e. clients plus security, plus interpreters), where and how they may sit and interact with others to ensure they are unobtrusive.

To enhance the benefits gained from the facility, we spoke with health service providers and people undertaking study in health service provision in the area about what would be of benefit to them. Knowledge exchange was considered very important. It was felt that the area needed more knowledge about working with diverse client groups, given the relatively monocultural client base.

Indeed, one of the identified goals for the development of the new hospital and GP facilities in the Adelaide Hills is to develop staffing skills in working with diverse populations. The APOD offers an excellent opportunity for health specialists working in the APOD to share their knowledge of working with asylum seekers from many different ethnic backgrounds with local health care service providers.

**Recommended Option:** Health service providers in the APOD share their knowledge and expertise of working with diverse populations with local health service providers as part of achieving cultural safety in health organisations.

*Community concern 2: The expenditure on, type of, and access to health and wellbeing services in the APOD is greater than that available to Woodside (and wider Hills) residents.*

A comparison of expenditure on health care for residents and those in the APOD is beyond the scope of this report. However, in the table below we compare the types of services available for each.

**Table 2: A comparison of the health services and health needs of Woodside and the APOD**

Service	Woodside General Population	Clients of the APOD
General Practitioner	5 GPs during business hours with an estimated capacity of 500 patients per week.  After hours GP clinic in Mt Barker.	1 GP during business hours for 350 to 400 patients per week.  After hours first aid and triage service run by Serco.
Obstetrics	GP obstetrician  Mt Barker Hospital obstetrics ward	On site visiting midwife once a week  Mt Barker Hospital obstetrics ward
Hospital	Mt Barker Hospital	Mt Barker Hospital
Nurses	24 hour nursing care available at MBH	Nursing care available during business hours
Mental health	Community Mental Health Team at MBH  Emergency services through RAH  GP lifestyle counselling	2 counsellors  3 mental health nurses  2 psychologists

As Summary Table 2 demonstrates, asylum seekers in the APOD do not receive more health care services than the general population of Woodside and the Adelaide Hills. There are no differences between the type of and access to health care available to the general population of Woodside and

the clients of the APOD, except in the area of mental health. As noted, asylum seekers have particular needs for specialised mental health services, and the treatment of mental health is linked not only to international and national legislation and guidelines, as well as to security and safety.

Residents also raised concerns about the health and wellbeing of the asylum seekers in the Inverbrackie APOD. Answering this comprehensively is beyond the scope of this research project. We did not speak to or observe asylum seekers in the facility. However, we have described the health and wellbeing support and programs available for asylum seekers at Inverbrackie based on our interviews and publicly available information such as that from the *Joint Select Committee on Australia's Immigration Detention Network*. We would recommend to people interested in the implementation of the Detention Health Framework in Australia's Immigration Detention Network to read the Detention Health Advisory Group's submission to the Joint Select Committee on Australia's Immigration Detention Network, which can be accessed online at:

<http://www.aph.gov.au/house/committee/mig/detention/subs/sub101.pdf>

*Community concern 3: The clients have communicable diseases which will spread to the local population.*

As noted, all clients receive a comprehensive health check upon arriving in Australia, and no person with an untreated illness is transferred to the mainland, including Inverbrackie.

**Recommended option:** Information about health checks is widely circulated in the community.

## Education

---

### Community concerns about education

There are five concerns about potential negative impacts of the APOD in relation to education services:

1. Woodside Primary School is at capacity enrolment and does not have the room for the Inverbrackie students
2. The presence of the Inverbrackie students will take teachers' time and school resources away from local children, decreasing local children's educational opportunities and competitiveness with students from other schools
3. There will be conflict between Inverbrackie and local children, particularly between Inverbrackie students and students from Defence families
4. The Inverbrackie children are receiving expensive special services that constitute a waste of money and resources which should be given to local children
5. The Inverbrackie students are only temporary students, and the turnover will be damaging for local students when friendships are formed and broken

The concerns about space and resources arose at the initial announcement, when it was thought that all the children from Inverbrackie would attend the local Woodside Primary School:

*...can someone give us a guarantee that our kids' education and valuable starts to life won't suffer. Can somebody give us a guarantee that they won't be pushed out of programs, that they won't, in any shape, way or form, have their education level dropped and suffer?*

Parents and staff told us that when it was clear that children from the APOD would be going to a number of schools, not just one, many of their concerns about space and resources were allayed. However, we have included these concerns about space and resources and our assessment of the impact on these areas in the report as further answer to these issues.

The concerns about relationships, special treatment and benefits were raised at both public meetings, in places like the Community Reference Group (see section on Community Relationships) and during our interviews.

For example, the relationship between Defence children and Inverbrackie children was raised at the Woodside meeting:

*My question is how can the safety of our children, especially Defence children, be assured in schools when some of their parents are in their country's side with the war. I've heard that in countries where similar situations have happened there has been devastating consequences for Defence children.*

In relation to equity and fairness, this person at the Lobethal town meeting said:

*I guess what we see from the outside looking in, is a free education...my child has a \$10 excursion and they get theirs for free. It's a concern for me that my children can see that they're getting favouritism, the assistance, they're going to get the special ed teachers...I don't want my children to see, why community outsiders coming in, getting a free ride and getting favouritism over us who pay taxes, the residents, they don't know any different, but yeah, these kids are getting everything given to them on a silver platter.*

However, other parents and the majority of local teaching staff reported being excited about the opportunities for their children and the schools provided by the presence of the Inverbrackie program and were actively supportive.

*We as a teaching staff at ... welcome the opportunity to share the best Australia has to offer in its educational values with any children from the asylum seeker group to be housed at nearby Inverbrackie.*

*We feel that this will be an enormous benefit for our kids, and my children at school obviously.*

*We think that supportive environment in a range of schools across the hills will not only advantage children attending our schools, but provide a fantastic way for the asylum seeker children to learn to speak English in a really fantastic family orientated environment.*

## Education services in Woodside

Woodside Primary School is located within the Woodside township while the closest secondary school facility for Woodside students is the Oakbank Area School in the next town. Woodside Preschool Play Centre is located next to Woodside primary school and provides Kindergarten, Early Skills program, Playgroup and occasional care.

Pre, primary and high schools are situated throughout the Hills. Those closest to Woodside (and which are hosting children from Inverbrackie) are in Oakbank, Heathfield, Bridgewater and Uraidla.

Woodside Primary School was re-developed in 2008 with new classrooms, hall and playgrounds. In 2009-2010, using funding from the Building Education Revolution, part of the Nation Building Economic Stimulus Plan, the school built a new library and toilet block, refurbished the admin block and staff area, and installed interactive white boards. The School's enrolments have been increasing in the last three years, with 230 students enrolled in 2010. As a result of this increase, in 2010 the school decided to only accept new enrolments from families residing in the local area. Woodside Primary School has 13 teaching staff and 5 administrative and support staff.<sup>87</sup>

Prior to becoming a host school for children from the Inverbrackie facility, Woodside Primary School did not have any children from non-English speaking backgrounds, but has previously included Indigenous children as students (in 2010 there were 2 Indigenous students at the school), and has

---

<sup>87</sup> Woodside Primary School, 2010, *Annual Report 2010*, Available online: <http://www.woodsideps.sa.edu.au/docs/2010%20Annual%20report%204.pdf>



several students with disabilities. The mainstream school curriculum includes a unit of Languages Other Than English (LOTE) and the school hosts Multicultural Nights as part of learning about other cultures<sup>88</sup>

11.3% of the Woodside population is attending primary schools and 6.1% attend Secondary schools.<sup>89</sup>

## Education services for the Inverbrackie APOD

As for health services outlined in the previous section, the provision of education for children in detention is governed by legislation and guidelines. These are the *Convention on the Rights of the Child (CRC)*, which applies to all children in Australia including children in detention, and the *United Nations Rules for the Protection of Juveniles Deprived of their Liberty (JDL Rules)*, which applies to children in detention. The CRC requires that:

1. Primary education is compulsory and freely available to all children
2. Secondary education is available and accessible to all children
3. Educational and vocational information and guidance is available and accessible to all children
4. Regular attendance at schools is encouraged

The *JDL Rules* outline education for children in detention:

1. Education for detained children should be provided in schools external to the detention facilities through programs integrated with the education system of the host country
2. Juveniles who are illiterate or who have learning difficulties have the right to special education
3. Education for children in detention must be similar to that for children with similar learning needs attending schools (e.g. children from culturally and linguistically diverse (CALD) backgrounds who are in community detention or have a permanent visa) within the Australian community

The *Convention* and *Rules* are incorporated into DIAC's Immigration Detention Values and in Serco's operational guidelines for working with minors. These require that all children in detention have access to education.<sup>90</sup>

The *JDL Rules* state that the education for children in detention must be similar to that provided for non-detained children with similar learning needs. In the case of the children from Inverbrackie, the

---

<sup>88</sup> Woodside Primary School, 2010, *Site Context Statement*, Available online: <http://www.woodsideps.sa.edu.au/docs/School%20context%202011.pdf>

<sup>89</sup> Adelaide Hills Council, 2008, *Woodside Community Profile*

<sup>90</sup> Serco (2011) *Submission to the Joint Select Committee on Australia's Immigration Detention Network*

closest comparison is the education provided to all new arrivals in Australia who come from culturally and linguistically diverse backgrounds, including children with refugee backgrounds. In South Australia this is the New Arrivals Program.

The New Arrivals Program (NAP) provides for up to 24 months of intensive English schooling. In NAP, classes are small, organised by age, and students are taught the full range of subjects with intensive language training as well. The NAP also provides a supportive environment for children to learn about Australia and develop language skills for participation in Australian society. This learning is done formally in the classroom, and also informally through play and activities, excursions and social events. Bilingual School Service Officers (BSSOs), interpreters and community liaison officers support the NAP teachers, as well as students and parents. For those children who are geographically isolated, travel assistance is available.<sup>91</sup>

The rationale for the NAP is to ensure that children from non-English speaking backgrounds receive intensive instruction so that they aren't disadvantaged socially or academically by language barriers. This is also the rationale for the education for the children from Inverbrackie. However, because of the sometimes short stay in local schools before moving into community detention or receiving a visa, unlike NAP, the Inverbrackie program emphasises short term goals of English language acquisition and wellbeing. Wellbeing is a focus because the children in Inverbrackie have come from refugee producing countries. There are significant correlates with having directly experienced or witnessed violence, trauma and disruption in their country of origin. They can, as a consequence suffer emotional distress, and may exhibit signs of trauma, such as difficult with concentration, memory impairment, physical ill health and difficulties forming relationships.<sup>92</sup> Without intensive English instruction, and its associated supports, children who have experienced trauma and disrupted schooling such as the children from Inverbrackie would be unable to compete with their peers in mainstream schooling.

There are two foci of the educational program for Inverbrackie children:

1. English language acquisition
  - a. In the classroom
  - b. Through school activities both formal, e.g. presenting an assembly, and informal, e.g. through playground interactions

---

<sup>91</sup> Department of Education and Children's Services. (2008). *South Australia's Curriculum Portal: New Arrivals Program, South Australia*. Available online: [www.decs.sa.gov.au/curric/pages/ESL/nap/](http://www.decs.sa.gov.au/curric/pages/ESL/nap/) (Accessed 21 March 2008)

<sup>92</sup> Gunton, A. (2007). Refugees in our schools. *Teacher*, 187, 16.; Kirk, J. & Cassity, E. (2007). Minimum standards for quality education for refugee youth. *Youth Studies Australia*, 23(1), 50-56.; Matthews, J. (2008). Schooling and settlement: refugee education in Australia. *International Studies in the Sociology of Education* 18(1): 31-45.; McEachron, G. & Bhatti, G. (2005). Language support for immigrant children: a study of state schools in the UK and US. *Language, Culture and Curriculum*, 18(2),164-180.; Rousseau, C., Drapeau, A. & Corin, E. (1996). School performance and emotional problems in refugee children. *American Journal of Orthopsychiatry*, 66(2), 239-251.

- c. In everyday situations and interactions for functional/participatory English and social skills, e.g. through excursions to go shopping
2. Developing resilience to face whatever comes their way

These are the focal points because:

1. They are essential for educational success
2. Resilience is an important part of coping with traumatic experiences
3. They are useful for either pathway that the children are on, as future community members or as unsuccessful visa applicants

Even though some children in the facilities will not be granted a visa and will be returned to their country of origin, education remains a vital part of their experience in Australia. The language and other skills will potentially become a foundation for education and employment in their country of origin. However, as noted in Part 1, between 70 to 90 percent of asylum seekers arriving by boat will receive a protection visa.

### *Education for preschool, primary and secondary school-aged children*

The children from Inverbrackie are hosted by five local primary schools, 2 local high schools, and three local kindergartens/preschools: Nairne, Oakbank and Bridgewater Preschools; Woodside, Oakbank, Uraidla, Heathfield and Bridgewater Primary Schools; and Heathfield and Oakbank High Schools.

The primary and high school Inverbrackie students are taught by specialist English as a Second Language (ESL) teachers. In the kindergartens/pre-schools the teaching staff are supported by an extra Early Childhood Worker. The Federal Government funds these teaching positions through the Department of Education and Children's Services (DECS). Bilingual School Services Officers (BSSO) provide language, translation and cultural support. There is a pool of BSSOs who are available on a rostering system to each school. DECS manages the Inverbrackie education program. The DECS Inverbrackie Program manager liaises between schools, DECS and DIAC. There is also an Education Manager in the DIAC team at Inverbrackie.

The children from Inverbrackie have separate classrooms for lessons. The classroom teaching is modelled on the New Arrivals Program, with small classroom sizes and children grouped by age, and, where possible, language. The children from the local school and the Inverbrackie students come together for art classes, PE and fitness, library lessons and assemblies.

### *Education for children under 4*

For children under 4 years of age, there is an Inverbrackie playgroup with 3 sessions per week, which is run by early childhood teachers. This playgroup is well attended, with many fathers coming with their children.

There are four early childhood teachers on the Inverbrackie site.

Based on observations of Inverbrackie on 24 June 2011 and interviews with the Human Rights Commission and the Red Cross, the witness statement of Australian Children's Commissioners and Guardians at the Adelaide Hearing for the Joint Select Committee on Australia's Immigration Detention Network suggested that the playground facilities for young children could be improved.<sup>93</sup>

### *Education for adults*

There are twice daily English language classes, from basic to advanced. These classes are a high priority for clients, and are well attended. There are also maths lessons.

As well as English and maths, an important part of adult education in Inverbrackie is life skills such as cooking and parenting. The parenting education is linked with the children's education in the schools, with parents becoming involved in encouraging children's education, preparing lunches and understanding the school system. There are complementary adult education seminars on social customs, multiculturalism, community groups, volunteering and the history of Australia which have been well received.

Finally, there are also excursions and recreation (see previous section on health for a list of these). These are an important part of cultural learning in context. They are important for developing functional English, as well as improving mental and physical health.

## **Impacts**

### *School space*

In each of the schools, the classrooms being used for Inverbrackie students were already vacant, and were not taken from existing classes. All the schools reported that there was no negative impact on the school's available physical space. Indeed, one of school representatives said

*we could triple the number, there is an excess of space*

One school previously experiencing a decline in student numbers reported how pleased they were to boost their student numbers with students from Inverbrackie.

All the school representatives said that their schools provide an excellent space for learning for the Inverbrackie children. They have lots of facilities and lots of benefits the children from Inverbrackie have not experienced before, like bush settings.

### *Staff*

Specialised ESL teachers teach Inverbrackie students. They are supported by BSSOs. Mainstream PE and art/creative expression teachers have Inverbrackie students in their classes. In a few instances, where English and social competence levels are sufficient, Inverbrackie students have been included in mainstream curriculum classes, particularly maths classes.

---

<sup>93</sup> Joint Select Committee on Australia's Immigration Detention Network, 2011, *Proof Committee Hansard*, Adelaide Hearing 15 November 2011. Available online:

<http://www.aph.gov.au/hansard/joint/commttee/j448.pdf> (Accessed 25 November 2011)

However, in relation to mainstream curriculum teaching there is minimal impact on mainstream teaching staff's time and resources. Much of this is due to the presence of the new teachers and BSSOs for the Inverbrackie students. As one teacher said:

*the BSSOs are invaluable*

One preschool teacher, in relation to a child who needed a lot of security and contact, said

*we couldn't do it without the Early Childhood Worker*

Having extra staff members as part of their team was also welcomed, particularly for their contribution to daily tasks such as yard duty.

All the staff at all the schools were supportive, enthusiastic and honoured to have the Inverbrackie children in their school and their classes.

For mainstream staff, the goal is to ensure that the children

*don't have another segregated experience with superficial interaction*

They aim to ensure that the school experience is a positive part of healing and social development. For example, one principal explained that they want to provide

*as normal a day as possible, so that students can experience what it's like being in an environment that's not sad or stressful*

As part of providing this supportive environment, mainstream staff contribute to thinking through teaching challenges, supporting the new staff members, and supporting Inverbrackie and mainstream students in the play areas. Staff meet regularly both formally and informally to share their teaching knowledge with each other, including in relation to Inverbrackie students. All of the schools have experience in working with learning challenges, and they draw upon these skills in working with the Inverbrackie students. Staff report that they enjoy having the Inverbrackie children at their school particularly as it encourages critical thinking and looking beyond taken-for-granted assumptions and practices surrounding teaching methods for all children in their care.

As well as the funded support teacher positions, ensuring that there are no impacts on staff has also been achieved through ongoing negotiations between staff, DIAC and Serco in response to any issues that arise. For example, at each of the schools, staff did raise one issue which periodically increased the workload for both mainstream and Inverbrackie teaching staff, and this was the very short notice given when children exit the school. The notice for children and their parents being granted a visa or moving into community detention is very short.

This issue was resolved. Report cards, as well as other information, are now able to be sent on to the child's next school. This has the advantage both of relieving the previously short time lines and also ensuring that the children experience some continuity in their education, with staff able to communicate with the next school about achievements and challenges. We understand that, where possible, pending decisions are now communicated to the Program Coordinator, who informs the Inverbrackie teaching staff and mainstream staff in advance. As well as being able to forward report cards and other paperwork, this also gives staff more time to prepare.

In regards to issues such as this one about school exit decisions and timing, the schools we spoke with reported that while there were initial set up difficulties, they have been well supported by the Program Coordinator, and they have found DECS and DIAC are very responsive to school and student needs and feedback.

Staff reported how impressed they are by all parties getting a complex program up and running in just 6 weeks, with all stakeholders – schools, DECS, DIAC and Serco – working together well.

To support leaders, there was an initial administration/leaders grant. The schools we spoke with reported that this was used for whole school benefits: see the section on Finances below.

However, although there hasn't been an unmanageable increase in workload for mainstream teaching staff, there was a reported increase in workload for principals, School Support Officers, administrative and finance staff.

For principals, this is a result of working through initially unfamiliar processes with DIAC and Serco (similar to those experienced during the setting up phase for health practitioners, see the previous section). Such processes include the need to plan well in advance for Inverbrackie students to attend excursions or extracurricular activities, because security officers attend these with students. This extra workload also derives from having a centrally administered Inverbrackie program. Melding the existing school program with that of the Inverbrackie program can be challenging. As one principal noted

*it takes a lot of energy to organise complicated timetables*

For support officers and admin staff, the increase in workload is due to entry and exit procedures, particularly relating to uniforms. When the students are enrolled, uniforms must be sourced, when they leave, they need to be laundered and the books returned. This means that:

*when kids leave, the school gets a shopping bag full of stuff from all over Australia – uniforms and library books*

As for the certificates and report cards mentioned earlier, these entry and exit processes have since been streamlined which has reduced this workload. Though it was reported that this could be further refined if they could know prior to enrolment what size of uniform is needed, as small sites can't carry a lot of uniforms on hand.

For the finance staff, new accounting procedures required for the new sources of funding have increased their workload. This has engendered extra work like the need for extra journal transfers, for example. Admin and finance staff are often paid by the hour, which means this extra work, if it requires extra time, needs to be funded.

However, all the principals and the support staff report that whilst the workload is higher, the Inverbrackie program is *"highly satisfying"*, and this personal satisfaction far outweighs any extra work required. The staff take on the work *"because they want to"*.

## *Local students*

There were no reports of conflict between ADF and Inverbrackie students. At Woodside, there are currently 12 enrolled children from ADF families. The school has continued its ongoing relationship with the Woodside Barracks, for example the Woodside Barracks Chief Officer presented the Sports Day Shield, and a member of the Barracks spoke about leadership at the leader's training day in 2010.<sup>94</sup>

The response of local students has been extremely positive.

Children from Inverbrackie have presented their work at assemblies as do local students. The assemblies led by Inverbrackie students are well received by the wider student body, who are respectful and encouraging.

One parent told us that their six year old was "really excited" about the new arrivals. Parents report that children show no animosity towards the new students, but rather see it "as a good thing".

Staff report that local children are very interested in the different cultures, food and language of Inverbrackie students. Playground interaction in games at lunch is regular and authentic. Many of the Inverbrackie students are keen and very skilful soccer players.

There have been close friendships develop between Inverbrackie and local children where time, language and social skills allow. There is also a lot of movement, mainly due to positive visa grants, with Inverbrackie students staying for sometimes only a short period of time. The local students are sad to see students go, but also happy for them and their families. A lot of the local students requested that they be able to remain in contact with their Inverbrackie friends. In response, DIAC now liaise with the client's new case manager in their new residence to set up email contact. Students also create these links themselves through Facebook and email. Students are familiar with more temporary members of the student body through the schools' student exchange program. Forming friendships which might then stop, or which become long distance friendships carried out in other forums, is something which is both familiar and also

*a good real life growth experience for the students about friendships.*

As part of their pre-existing culture of caring and welcome, one school established a buddy system between local and Inverbrackie students. Previously developed between older and new students, this is now implemented for the Inverbrackie students, and has been taken up at other schools. The student buddies meet the Inverbrackie students at the bus each morning.

Also as part of embodying this caring culture, the Woodside Primary School coordinated Christmas gifts 'shoeboxes' for the Inverbrackie children when they first arrived. This was a way to show the children they were welcome in the community of Woodside. There was symbolic handover of one of the shoeboxes to DIAC, then the day before Christmas the local and Inverbrackie children were able to meet, with interpreters, to personally exchange the gifts. There was

*warmth and nerves on both sides.*

---

<sup>94</sup> Woodside Primary School, 2010, *Annual Report 2010*

However, one parent reported that they and their daughter felt that the shoebox Christmas gifts were imposed on the school and the children. They felt that there wasn't room for different opinions or for them to opt out of the event if they wished. There was felt to be significant pressure from staff to have a particular view on the asylum seekers, without opening this up to debate and discussion. There was reported an instance of children calling other children and their parents "racists". We address this in our recommended options at the end of this section.

As well as interpersonal relationships, the schools report that new learning arising from being a host school is also a positive. Children are learning new languages, even in the preschools, where, for example, they now have signs with 'hello' and 'goodbye' written in Arabic. The preschool staff showed me a picture drawn by one of their resident students, who had proudly written about the picture in 'Arabic'.

Staff report that interacting with Inverbrackie students increases respect and knowledge of how others live. The feedback from the kids themselves is that through knowing the children from Inverbrackie they've reflected more on the difference between their lives in Australia and those of the asylum seekers, and they say

*we're so lucky in Australia.*

At one school, two students submitted a short film on asylum seekers and their school to the new media awards. The short film demonstrates some of the many benefits to learning that have been created through engaging with students from Inverbrackie. These include: engagement with global issues; applied learning and research on an issue not previously familiar to the students; opening up new ways of thinking; and curiosity. The short film is powerful and professional. It focuses on increase people's knowledge of asylum seekers as well as optimism and the possibility of growth and change. It is very moving and a credit to the students and their school.

The issue of the local students' continued ability to compete with other school students in terms of academic achievements can not be assessed in this report. The data for NAPLAN Literacy and Numeracy Testing for the schools is available for 2010. However, in order to examine this issue more closely, a comparison with the results for 2011 would need to be made, as the Inverbrackie students began at the schools this year. This would, however, be quite a blunt analysis, as there are many factors that may affect literacy and numeracy. To isolate the effects of Inverbrackie students would be impossible. There are also many ways to measure and evaluate academic learning, test scores being only one instrument. It would certainly seem from the interviews conducted for this report that it is unlikely there is any negative impact on academic learning, but certainly a lot of positive outcomes including, as noted, critical thinking, engagement with diversity, and new language learning.

However, there may be a need to revise the requirements for NAPLAN testing and recording in schools with Inverbrackie students. One school was dismayed to find that the NAPLAN results reporting how many students met the national benchmark was only 80 percent, rather than the actuality of 100 percent, because students from Inverbrackie were required to be included in NAPLAN tests, despite their recognised constraints in terms of English literacy and curriculum learning. They were unable to complete the tests and thus were shown as not meeting the



benchmark. The school suggests that this procedure be reviewed to ensure their overall NAPLAN benchmark is not lowered.

### *Inverbrackie students and parents*

Although the asylum seekers at Inverbrackie are not the primary focus of this report, the impact of the education program on them was a large part of what was shared with us when we went to the schools.

Teachers report in relation to assemblies that those led by Inverbrackie students demonstrate their progress in language skills and knowledge of how Australian schools work. The assemblies are also seen as a timely experience in leadership which increases their confidence.

The presence of BSSOs is important. Where children have been in school without them and then a BBSO comes who speaks their language, they are met with relief at being able to communicate. The BSSOs are not always available, and not all languages are covered by BSSOs, so this can sometimes make communication difficult, particularly for staff needing to find out about any problems the students are having. On the other hand, not having BSSOs all the time means that the children are thrust into a situation where they must interact and speak in English which is a good learning experience too.

An Inverbrackie student won the junior sports award, and all the families, including the Inverbrackie parents, were present at the award.

One Inverbrackie student was able to attend an Aquatic Camp at Victor Harbor. For security reasons he wasn't allowed to stay overnight, so the school principal and deputy principal met half way between Woodside and Victor Harbor each morning and evening to drop him off and pick up him. He had never played at the beach before, never surfed. Each day coming home, before falling into an exhausted sleep, he would say with pleasure and almost disbelief

*that was so much fun*

The staff were also really happy to provide the experience, no matter how much extra time it required of them.

For the local kids, seeing his responses was

*a huge eye opener for what we take for granted.*

The Inverbrackie students are also part of the Stephanie Alexander garden and cooking classes.

There is a new Inverbrackie choir in which all the children sing and play.

Each of the schools we spoke with had hosted a School Acquaintance function for parents from Inverbrackie to visit the school grounds and teachers. There are also individual meetings with Inverbrackie parents to discuss report cards and progress, as occurs for parents of local children. One way the schools feed back to the parents the experiences of their children in school is through video and photographs. One school screened a DVD of the Inverbrackie children in school as part of

parent/teacher meetings which gave parents a good insight into the daily working of the classroom, and they could see how much their children were enjoying school.

### *The school community*

The schools we spoke with said that they volunteered to be one of the host schools, and in some cases actively pursued the opportunity to have students from Inverbrackie at their school. Many other schools than those chosen to host children had asked to be involved, including private schools, demonstrating the support of the broader school community for the children in the APOD.

For those schools who became a host school, parents were consulted about the decision. One school asked parents to complete a survey. Another school invited parents to an information and discussion evening. All the schools discussed the decision at the governing council meetings. The majority of members and parents were supportive.

Being a host school was viewed as a way of putting school ethos of care and inclusivity into practice. The Inverbrackie students are seen by staff and students as an important component of the whole school environment. Staff describe being a host school as:

*energising*

*exciting*

*interesting*

*ethical*

Indeed, as for the school staff, for the parents we spoke with, the presence of children from Inverbrackie was important to them. For parents for whom exposure to new cultures is important, they seek out schools with Inverbrackie children. One new parent to the area spoke with said:

*I met with the principal of the school before enrolling my daughter. He was so positive about the experience, and so supportive of inclusion. That's what made me enrol my daughter there. I knew it would be a good place for her.*

Two parents we spoke with said that being a host school was an important part of learning values and understanding more about how other people in the world live. For one parent, they described the experience of having Inverbrackie children in their school as

*...really humbling, such an eye-opener*

One parent told us that the Inverbrackie students aren't seen as 'outside of the norm' at their school because there was pre-existing diversity, not ethnically, but a diversity of learning needs which the school was pro-active in addressing. For him, his daughter's school was already a supportive environment that encouraged children to help others, and for his daughter she didn't find anything unusual in the children coming there. There were also already established programs for learning other languages –Indonesian and German – and about other religions.

At one preschool, a very shy little girl from the APOD, when first asked if she had any friends at preschool, said 'no'. After she had been there for a few weeks she told the teachers that she did

'have friends now' and pointed to them. The parents of the children she pointed to reported being very proud because it showed their children had taken on the values and behaviours that they had been teaching them.

Only two schools reported adverse reactions from some parents of local children. Two families removed their children from a school because of the presence of the Inverbrackie students. There were two incidents at one school where a parent yelled abuse at the children in the Inverbrackie bus, and another had a confrontation in the school car park with school staff. The first person later apologised. One school was papered with anti-immigration fliers from Australia First.

For one school, some parents have protested against the presence of the Inverbrackie students by refusing to pay their fees on the grounds that Inverbrackie students are receiving free education and they should as well. This protest has adversely affected the school's already tight finances.

There were some incidents of people acting on misinformation. For example, one school was asked by two prospective student's parents whether the Inverbrackie students were immunised. The staff member responded by saying that not all local students are immunised, and that this was a question that wasn't ever asked of local students. Both those children were subsequently enrolled.

However, overall most parents are supportive. For example, when an Inverbrackie student won the Junior Sports Award, it was noted that the 400 families present applauded.

More broadly in the wider community, staff noticed positive changes in attitudes when they shared their new experience and knowledge of asylum seekers with others. When approached by friends and family, they countered prevailing myths about asylum seekers by drawing on their own experience.

An example of one event which changed attitudes was the open cultural night for local and Inverbrackie parents and children, which included Kurdistan dancers and art displays. This was warmly received by the parents locally and from Inverbrackie. It also provided an insight into the experience of being in the APOD, when the parents arrived with security guards who accompanied them throughout the school grounds.

The wider school network is also supportive, for example the inclusion of the Inverbrackie students in the multi-school sports day mentioned above was made possible by the collegial support of all schools involved.

## *Finances*

The schools receive a lump sum grant for being a host school, which can be spent across the whole school. They are also recompensed for costs in setting up classrooms, teacher salaries, uniforms, educational resources (again, for the whole school) and BSSOs. As one principal noted "the funding is generous" and also that the school is "frugal in its spending". This frugality and careful management of finances is part of managing school budgets, and expenditure across all school programs is always carefully considered.

The funding has been used to benefit the schools as a whole, for example through:

1. Re-painting and restoring the front school entrance
2. Purchasing a 'boardmaker' which is a tool for visual learning; this was reported as being particularly useful for preschool age children to help them establish school routines

Some of the preschools and schools rely on term fees for their funding, which means that ongoing funding can be sporadic and their budget is tight. The funding from the federal government is provided across the school year, and has thus removed schools' funding and expenditure pressures. Spreading the students across the schools has also meant that this funding is also spread across Hills schools as well.

However, there are some costs that are not included in the original agreement on what expenditure can be reimbursed, and principals and staff have noted that it would be helpful to have these covered as well:

1. Support for the Finance Officers, School Support Officers and Principals
2. Photocopying, cleaning, lighting, heating and cooling

## Conclusion

As was the case with health, there have been minimal negative impacts on local education from the APOD. In summary, in relation to each of the five community concerns:

*Community concern 1: Woodside Primary School is at capacity enrolment and does not have the for the Inverbrackie students*

It was announced soon after the initial announcement of the APOD that the children would go to several schools in the Adelaide Hills, not only to the Woodside Primary School. Most parents of children at the local school were informed about this through the School's newsletter.

Each of the schools report that they have plenty of room for the students from Inverbrackie.

*Community concern 2: The presence of the Inverbrackie students will take teachers' time and school resources away from local children decreasing local children's educational opportunities and competitiveness with students from other schools.*

The children from Inverbrackie are taught by specialist ESL teachers, who are supported by BSSOs. There has been no negative impact on the time of mainstream teachers, nor has there been any reduction in the availability of resources for local children.

On the contrary, extra staff contribute much needed support in small schools, and the funding for the host schools has been used to benefit all the students.

This has not impacted negatively on local children's academic learning, but rather in many ways has enhanced this through, as noted, the development of new avenues for learning critical thinking, engaging with diversity, and new language learning.

There has been some increase in workload for principals and administrative staff not covered by the funding support for school leaders. Some of this has been alleviated through changing exit and entry procedures.

*Community concern 3: There will be conflict between Inverbrackie and local children, particularly between Inverbrackie students and students from Defence families*

There have been no conflicts between Inverbrackie and local children. The relationship between Woodside Primary School and the Woodside Barracks remains positive and supportive.

*Community concern 4: The Inverbrackie children are receiving expensive special services that constitute a waste of money and resources which should be given to local children*

The Convention on the Rights of the Child and the Juvenile Detention Convention Rules require that all children, and all children in detention, receive the appropriate level of education. For students from Inverbrackie, this level of education is modelled on the New Arrivals Program which provides intensive English language instruction as well as other curriculum subjects and teaching around Australian culture and values. This education plays an important role in their mental health, as well as establishing a good foundation for further schooling, allowing them to attain their educational goals and become productive members of Australian society.

There have been no reductions in the financial or other resources available to local children. On the contrary, these have been boosted by the presence of the Inverbrackie children.

*Community concern 5: The Inverbrackie students are only temporary students, and the turnover will be damaging for local students when friendships are formed and broken*

Friendships have been formed between local and Inverbrackie students. Local children are familiar with temporary students through the student exchange program. As with exchange students, the friendships are often continued long distance through the benefits of social media. Local students are sad to the Inverbrackie children go, but are also happy for them because they understand how meaningful their release is to them. Students and staff have seen the relationships as a great opportunity for growth.

The education program is working well. The way the education program for Inverbrackie has been established provides an example of good practice in this area, and we have included the key components of this as a template that may be adopted in other communities hosting asylum seekers in detention.

The first recommended option was suggested by a person in the community as a good way to increase the visibility of the APOD through visual rather than only textual means. The second is to address the issue raised earlier that one pupil was called a racist by the other children because her parents were opposed to the APOD.

### **Effective interventions already in place**

1. A centrally managed program through the state school system that is modeled on the state's new arrivals program. It may include more than one host school in order to spread the benefit more widely and minimize impacts on any one school.
2. Teaching and support staff are funded by the federal government, with funding allocated for whole-school benefits as well as for the children from detention centers. Funding should include admin and finance staff and money for incidentals.
3. There is continuity in entry and exit processes between host schools and the school which the children attend when they enter the community.
4. The local children are supported to develop relationships with the children from detention centers through including them in assemblies, some shared lessons, and buddy systems.
5. The school community is part of the decision-making process around becoming a host school, and is part of multicultural nights, sports days and other events that bring local and detained children together.
6. School leadership is very important, and this is best demonstrated by an approach that 'all of the school benefits'. Communicating with staff, students and parents about the school's host program, and reporting on successes, has played a very important role in informing the wider community about the issue of asylum seekers and the benefits and other outcomes for the school.
7. Existing learning about global issues is enhanced, and new learning is added to the curriculum about different cultures and different life experiences.

### **Recommended options:**

1. Local children and children from the detention centre could display art work and other projects in the local community to give a wider audience the opportunity to see the outcomes of having Inverbrackie children in the local school system.
2. Particularly for older children, a discussion on asylum seeking might be a good way of having an open dialogue on the issue. This kind of dialogue, which might draw upon the guidelines presented in the section on Community Relationships has more potential for everyone to feel heard, and for assumptions and habitual thinking to be challenged, and for children to develop good communication skills in times of conflict, encouraging children to avoid name-calling or personalizing an issue, to listen to others with different views, and to identify good evidence-based arguments.

## The Local Economy

---

There are three areas of the local economy in Woodside that residents were concerned would be impacted by the APOD:

1. The real estate market
2. Employment
3. Business contracts and opportunities

Concerns were also raised about:

4. Direct expenditure by the federal government to offset any negative impacts
5. The benefits of indirect expenditure from the greater disposable income available in the town through new employment and contracts

In seeking to understand the economic impact, we have approached the issue from a number of angles. The economic impact report, which is separate to this report, uses aggregated data from DIAC, Serco, IMHS and other sources such as the ABS. In this social impact report we complement this statistical data with interviews with real estate agents, employees at the APOD, business owners and local residents as well as our observations of activity in the town centre in, for example, the bakery, petrol station, local eateries and the supermarket. The two reports combined provide a comprehensive picture of the impact on the town's economy, both economically in dollar terms, and socially, in its effects on people's lives.

### Domestic Real Estate Market

#### *Community concerns about the real estate market*

When the APOD was first announced, residents were concerned that the facility would:

- a) reduce property market prices and
- b) reduce the number of people willing to live in the area.

At the Woodside and Lobethal town meetings on 21 October and 24 November 2010, people raised the issue of property prices and property demand:

*...when people say to me "Where do you live?" and I say "Inverbrackie" "Oh right, I bet you're sorry you live there". Now how do you think we feel when our properties that we have maintained and built up over the years to be really proud of are basically worthless, no one wants to move up here, in a few more year's time my husband and I might want to downsize, who's going to want to buy our property, nobody...*

*...you're putting it set up next to a million dollar properties. You're putting an asylum seekers that's they're dropping the value of the property in half.*

*Hear, Hear. Applause.*

*I'm trying to sell the land of a million dollar house and they are not gonna nearly get anything for that now.*

A first home buyer we spoke with told us they were “devastated” by the news of the APOD. They thought that their new property would decrease in value, and that financially “they were stuffed”. They had plans to demolish and rebuild, but put these plans on hold until they knew whether extra investment would be financially viable.

## *Impact*

Following the announcement of the APOD, the two real estate agents based in Woodside found that:

1. Some people who had their house on the market withdrew it, or, if they had been planning to sell, decided to wait
2. About a dozen people asked for property valuations, so that when their property price dropped they could use the valuation to sue for the difference

However, after these initial reactions from some vendors, there were no further incidents of people withdrawing their property, not listing their property or requesting valuations.

There was one reported incident of someone selling their property because of the APOD. However this was not the only consideration in their decision.

Initially, there were inquiries from potential buyers about the facility during open inspections. However, these inquiries weren't negative, but interested. There are no reports of people not buying property in the area because of the facility. Buyer inquiries about the facility no longer occur.

No one participating in the study reported any discernible impact on property values, property prices or on the popularity of Woodside as a place to live in the 14 months since the announcement. For example, one vendor who had listed their house the day before the announcement sold at the expected price 8 weeks later. We were advised that the property market has flattened nationally, and any slowing of sales is attributable to that wider shift. The Economic Report also found no impact on local house prices.

There has been a small increase in demand for rental properties, both residential and commercial, with the opening of the APOD. This was welcomed as an economic boost in a slower market. The demand for rentals was expected to increase in the future with continuing employment at the facility, and extend to a demand from new employees for buying in the area. However, establishing whether this is the case would require more long-term research over the next 2 to 5 years.

## *Conclusion*

There is no negative impact on property prices or the attractiveness of Woodside as a place to live. There has been a small increase in demand for residential and commercial rental properties.

**Recommended Option** Information about property prices and the property market would be helpful for property owners. One way of doing this is to sponsor information sessions/workshops run by a local real estate agent. The workshops on buying, selling and renovating property in Woodside is to provide advice on how to make property decisions in a flat market. This would be a community information service that contributes to the town as a whole.



## Employment

### *Community concerns about employment*

There were two main concerns about impacts on employment:

1. That employment in Woodside is low, and the facility has not contributed sufficiently to addressing this
2. The facility supports full time work, but not part time, and only in particular areas

As noted in Part 3, Woodside has a high rate of employment and a low rate of unemployment. However, comments from residents suggest that the employment rate is an issue in the community. For those living in Woodside who are unemployed, they report having difficulty finding suitable work in the local area. One single mother we spoke with noted:

*there's lots of voluntary work, but little paid work because most of the businesses are small and employ young casual workers*

It was noted at the town meetings and later in media and our interviews that the APOD was expected to increase local employment opportunities. However, not all residents we spoke with felt there had been enough local employment generated. There is no accurate knowledge about employment at the APOD, and estimates about its impact on employment were often quite low as a result. As one person said

*There's lots of people working out there, but they're not local cars, you can bet most of them aren't locals.*

Whilst there have been a number of positions advertised in the local newspapers, for some residents there were constraints on their ability to undertake the work. For example, one resident reported that she was hoping to apply for a position in the facility, but all the advertised positions were full time, and as a working mother she needed part time work. Another noted that the positions were for security and cleaning work, and that wasn't an area she wanted to work in.

### *Employment in the APOD*

Serco employee roles include:

1. Security and escort
2. Client support and welfare (Client Service Officers and Client Support Workers)
3. Cleaning and kitchen staff

Client support and welfare officers are responsible for the day to day interaction and care of asylum seekers in detention. They monitor detainee well-being, escort detainees on medical visits and supervise excursions and activities.<sup>95</sup>

---

<sup>95</sup> United Voice, 2011, Submission to the Joint Select Committee on Australia's Immigration Detention Network

As well as Serco, DIAC and IHMS are also potential employers of local residents. These roles include health administration, health care provision (e.g. counselling, nursing), immigration administration (e.g. education, case work) and general administration (e.g. finance).

*Impacts*

The Economic Report also found that of the 463 full time equivalent (FTE) positions created across the region by the APOD, 14 of these will be filled by Woodside residents and 297 by residents of the Adelaide Hills. As there are only 30 unemployed person in Woodside, this is a significant contribution.

The employment figures for Serco are set out in the table below. Of the 163 Serco employees, 62 or 37.8% live in the Adelaide Hills. These figures only apply to people directly employed by Serco, and do not include contracted security staff from other organisations.

**Table 3. Staff employed by Serco by Statistical local area.**

SLA of residence	Sum of Pop	% of total
Adelaide Hills (DC) – Central	6	3.6
Adelaide Hills (DC) – North	3	1.6
Adelaide Hills (DC) – Ranges	4	2.2
Adelaide Hills (DC) Bal	9	5.4
Mount Barker (DC) – Central	32	19.8
Mount Barker (DC) Bal	8	5.2
<b>Total living in Adelaide Hills</b>	<b>62</b>	<b>37.8</b>
<b>Total Serco employees</b>	<b>163</b>	

We understand that there has been no specific targeting of employment for young people in the area. In order to facilitate employment pathways into their organizations, particularly for young people, we understand that Serco has recently developed an apprenticeship program, but this hasn't yet been implemented at Inverbrackie. DIAC has a graduate program for new university graduates in their department. A graduate employee was undertaking work experience at DIAC in Inverbrackie while we were doing our interviews.

## Conclusion

There has been local employment generated by the APOD. Further employment potential for young people requires dedicated pathways which include education and skills training, such as that provided by apprenticeship and graduate programs.

### Recommended options:

1. A stall at the Hills Youth Expo could be arranged for young people to access information about working in the APOD including education and training requirements.
2. A specialised extension of the Graduate Program to create places for local university graduates to work with DIAC and IHMS.
3. Creating job sharing and part time work opportunities.

## Business contracts and opportunities

### *Community concerns about business contracts and opportunities*

Conversations about the impacts on businesses were of two types:

1. Only a few have benefited, and more should have benefited
2. Some have benefited, and this is a good thing

Of the first, most people identified the local supermarket as having a contract with the APOD, while a few also thought that the pharmacy may also have a contract. Three people mentioned the bus outside the local medical service, and from this they assumed that the local doctor was getting business. Three people also thought that there must have been contract work during the construction of the houses.

They also identified businesses which didn't get a contract and 'should have', particularly the local butcher and the local fruit and vegetable market. Another resident said that the local bus company isn't being used, and should be. They thought that the local businesses hadn't been given contracts because they didn't have a large enough supply to meet the APOD's needs. However, because they were local, and sourced their produce locally, people felt they should have been preferred contractors, and suggested that given more time they could have filled the supply demand. Two people blamed the closure of the fruit and vegetable store on the fact that they didn't get a contract with the APOD. However, it is important to note that the shop had been open for over a year prior to the APOD being commissioned.

Much of the information about contracts is commercial-in-confidence, and it is thus difficult to inform people about this aspect of the facility, hence the high number of word of mouth rumours about contracts, and speculation about why some businesses didn't receive contracts.

That local businesses should benefit was important to the people we spoke with. For one resident, buying and employing locally is an important part of being a community member, and was something she herself always tried to do.

### *Arrangements for business contracts and opportunities*

The facility has two stages:

1. Start up – overseen by DIAC
2. Ongoing – overseen by Serco

The first phase is mainly about establishing infrastructure, it requires goods and services to be supplied quickly, and often in large quantities. During this stage DIAC were able to use, for example, a local locksmith, however for large goods like demountables, there is no local company who could supply these.

Ongoing maintenance work is easier to source locally as the capacity is smaller and the timeframes less pressured. Thus there is the potential for more regular business opportunities, particularly for those in building and maintenance, during this phase. While I was at the facility, I saw local rubbish collectors, and local tradesmen fixing the roof and the air conditioning system of the DIAC offices.

The Woodside Commerce Association held two information sessions for local businesses wishing to develop business opportunities with the facility. These information sessions introduced DIAC to local business owners and showcased their goods and services, and were also used to inform local businesses about the goods and services required for the facility's current and future needs. This kind of information exchange is particularly important, because local businesses need to understand the APOD system and process to know what the facility needs, and how their business can be attractive to the facility.

### *Impacts*

The economic benefits from business contracts and opportunities are located in specific businesses who supply goods and services relevant to the APOD. These are mainly in the areas of health and medical services and supplies; building construction and maintenance; and food.

The economic report found that between \$2 to 2.5 million has flowed from the APOD into local businesses. We understand that there are approximately 35 local and Hills-wide contractors who have business contracts. The contracts include waste removal, building and repairs, fencing, labouring, fire wood and cleaning.

Negotiations are ongoing for the local bus service to be used.

People we spoke with who had business contracts with the facility said that the business provided a welcome boost in a slower economy. They report good relationships with DIAC and Serco. The only issue, as for health service and education providers, was the differing supply timelines. For example, one business owner told us that large orders arrive with little notice, but with an expectation of them being quickly filled, which isn't always possible. We understand, as with health and education, that this has been accommodated through dialogue with DIAC and Serco.

Most businesses reported that the facility hadn't had any impact on them, either negatively or positively. For many, this was expected – their business wasn't of the type that would be of use to the APOD.

However, for others, there were expectations of more contracts in the local area, particularly for supplying food. Frank Vanclay<sup>96</sup> suggests that where expectations are raised and then not, or perceived not to be, fulfilled, a significant local impact are feelings of disappointment, resentment and dissatisfaction. That this is an issue in Woodside is reflected in, for example, the following comments from our interviews:

*I've been represented at the Woodside Commerce Association meetings with DIAC, but they've never approached me for a business contract.*

*I heard he didn't get the contract because he couldn't supply what they wanted, but if they had given him a bit more time, he could have done that.*

This has also been reported in the media, for example:

*... [I] was also disappointed the centre had created minimal benefits for local businesses. "The supermarket does very well out there ... but I did have hopes there would be a few like the local butcher and local fruit and veg store that would have more input," he said.<sup>97</sup>*

However, there are some constraints on local business opportunities from the APOD that influence business opportunities that may not have been taken into account in either the promises initially made about benefits or the expectations set up by these promises. These include:

1. Availability - not all goods and services are available in Woodside itself. Although in many instances the businesses in the wider Hills area have benefited.
2. Supply size and capacity – not all local contractors are able to fill larger contracts.
3. Cost – not all local contractors were able to supply goods and services at a competitive price.
4. Hostility from some local residents.
  - a. There have been complaints from local residents who do not wish to share a local business with people from the APOD despite there being little negative impact on their own use of the service. As noted in the section on health, this hostility resulted in one local health service provider now conducting their business with the APOD onsite. There was the potential for that local business owner to lose the extra business gained through the APOD, but fortunately this was avoided.

---

<sup>96</sup> Frank Vanclay, 2002, Conceptualising social impacts, *Environmental Impact Assessment Review*, 22, 183-211

<sup>97</sup> Alice Monfries, Inside the secret world of the Inverbrackie Detention Centre, *Sunday Mail*, 9/7/2011. Available online: <http://www.adelaidenow.com.au/inside-the-secret-world-of-inverbrackie-detention-centre/story-e6frea6u-1226091448715>

- b. There is ongoing concern in the business community that there will be a backlash against those who are known to have contracts with the APOD. For example, soon after the announcement residents were told to boycott local businesses who dealt with the APOD, both by the political party Australia First, and also by other local residents. Although this overt hostility seems to have diminished, businesses we spoke with still expressed caution about being known to work with the APOD.

## *Conclusion*

Local businesses have benefited from the opening of the APOD in their area in instances where:

1. They supply needed goods and services e.g. waste removal, building and repairs, fencing, labouring, fire wood and cleaning, food, health services
2. They have supply capacity.
3. They are price competitive.

Those who have benefited report positive relationships with DIAC and Serco, and report that the new business has been an important boost in a slower market economy.

Examples of good practice in engaging local business are DIAC's commitment to creating local business opportunities through engaging with the local Commerce Association to exchange information and ideas to generate business acumen and local relationships.

However, there are ongoing feelings of disappointment about unmet expectations.

There are two potential ways to address this concern about unmet expectations. Firstly DIAC at Inverbrackie could support business development by assisting existing or proposed local businesses to take up opportunities for expansion where these supply relevant goods and services. We include a recommended option below that was suggested to us by a local business person that addresses this. Secondly, is communication about business benefits. This has occurred through the CCG and the Woodside Informa column (see the chapter on Community Relationships for more detail on these) and will also be supported by this social impact report and the economic report. Ongoing communication on this issue is important to counter negative perceptions about impacts on local business.

### Recommended option

Together with the Regional Development Authority and other stakeholder groups such as the Woodside Commerce Association, develop a Woodside-specific Strategic Plan for business development. The plan should encompass all local businesses in a development plan, which builds on changes in the area's population as outlined in Part 3 including the opening of the APOD. The plan should be the foundation for local businesses to take up emerging business opportunities from the APOD and other changes in the area.

## Direct expenditure

### *Community concerns about direct expenditure*

Direct expenditure refers to funding for the APOD and for town facilities and infrastructure from the Federal Government. We have included here concerns about direct expenditure on the APOD as well as in the town as the people we spoken with generally compared the two.

Concerns about direct expenditure in the APOD and in the town include:

1. The Government is wasting money and resources at the APOD
2. The benefits the asylum seekers are receiving are excessive and unfair
3. There has not been enough compensatory expenditure on Woodside as promised by the Government when the APOD was announced
4. The APOD is using local infrastructure, but because it is on Federal land it doesn't pay Council rates to contribute to the upkeep of this infrastructure

Approximately half of people we spoke with felt that the APOD was wasting money. Many said that they "*see the number of cars and calculate the costs of staffing the facility*" and also that they calculate expenditure on the housing based on estimates of the previous state of the dwellings.

There were also reports of large buses from the facility with only one or a few people on them. Another person reported: "*lights are on in the houses all night*".

Some residents also spoke about the types of facilities available to the asylum seekers and felt these were excessive and unfair. There were rumours of big screen televisions and garden settings being provided for all the families. One person described the facility as a "*holiday camp*". This is a representative comment from the Woodside town meeting:

*...what's happening for us, what's happening to me and people like me, students, what's being done to ensure our future's gonna be okay...what about us?*

At the meetings, in forums and other group talks, and in our interviews, people also raised the issue of the town of Woodside being financially compensated for the arrival of the APOD. A number of people said that "*there was a promise that the pool and sporting facilities would receive money*" and wanted to know if this had occurred, or when it would occur.

## Impacts

A breakdown of the set up and operating costs for all detention facilities in Australia including Inverbrackie is available in DIAC's Response to Questions on Notice No. 1 and No. 13

([http://www.aph.gov.au/Senate/committee/immigration\\_detention\\_ctte/immigration\\_detention/submissions.htm](http://www.aph.gov.au/Senate/committee/immigration_detention_ctte/immigration_detention/submissions.htm))

For Inverbrackie, as set out in the answer to the question on notice, the operating costs for the 2010/2011 financial year were \$26.7 million. Included in this figure are set up costs of \$8.7 million.

DIAC's Response to Questions on Notice No. 12 outlines the facilities that part of this money has funded. We include the table for Inverbrackie below:

<b>Facility/Service</b>	<b>Number/type</b>
Toilets	86
Bathroom (no. of showers)	74
Medical/clinic	2
PSP	1 under construction
Recreation Rooms	5
Sporting Amenities	Soccer, 2 volleyball, 1 basketball
Other- specified	Community Garden
Library	1
Televisions	74
Musical Instruments	Various
Toys	Various
Games	Various
Telephones	75
Computer Rooms	1
Internet Access	Yes
Canteens	1
Private Dining Facilities	74



Communal Dining Facilities	Nil
Places of Worship	74
Other Relevant Facilities	Hairdressing, Playgroup, Laundries

The expenditure in the APOD and across the immigration detention system occurs in a context. How much is spent and on what is influenced by policy and legislation, and by health, welfare and security needs. This context includes policies and legislation on asylum seeking itself, both international conventions and national laws and policies on mandatory detention, as outlined in Part 1 of this report. Expenditure is in response to the identified mental and physical health needs of asylum seekers, and the legislative and policy framework that underpins the provision of health and wellbeing services to asylum seekers in detention. Expenditure is also influenced by the links between health and wellbeing and security incidents. These are outlined in the sections on health and security.

In relation to understanding the context for the expenditure in the APOD, there are two further bodies of research which we haven't covered in this report because they lie outside of the scope of an analysis of community impact. However, when considering expenditure on the APOD and how it impacts on them, readers may find the following research useful:

1. Research on the social and economic contributions of asylum seekers and refugees to Australia<sup>98</sup>
2. Research evaluating alternatives to detention, in particular the benefits of alternatives such as community detention, both to asylum seekers, the community and to taxpayers in terms of costs and expenditure<sup>99</sup>

Although outside of the scope of this research, these resources on the contributions of asylum seekers and that on detention systems may be useful information that further contextualises expenditure in the detention system and assessment whether expenditure is necessary or excessive and whether alternative forms of detention may be more fiscally prudent.

<sup>98</sup> For example, Graeme Hugo, 2011, *Economic, Social and Civic Contributions of First and Second Generation Humanitarian Entrants*. [http://www.immi.gov.au/media/publications/research/\\_pdf/economic-social-civic-contributions-about-the-research2011.pdf](http://www.immi.gov.au/media/publications/research/_pdf/economic-social-civic-contributions-about-the-research2011.pdf)

<sup>99</sup> For example, Joint Standing Committee on Migration (2009), 'Immigration detention in Australia: Community-based alternatives to detention- Second report of the inquiry into immigration detention in Australia.' Accessed online <http://www.aph.gov.au/house/committee/mig/detention/report2/fullreport.pdf>; Joint Select Committee on Australia's Immigration Detention Network Final Report (2012) [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate\\_Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate_Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

As well as expenditure in the APOD, there has also been federal expenditure on the town to minimise/negate any negative impacts experienced by local residents in the use of their town's facilities and services. Thus DIAC has provided funding for:

1. All pre, primary and secondary schools hosting Inverbrackie children, which includes funding for staff, principals, and school resources for the whole school.
2. The Mount Barker, Women's and Children's and Royal Adelaide Hospital.
3. The South Australian Ambulance Service.
4. The upgrades to the Australian Defence Force (ADF)-owned housing on the Barracks being used for the facility – these houses remain the property of the ADF.
5. The new hall for a crèche at the Woodside Barracks for use by the Woodside Defence Families Association. This expenditure included purchasing the demountable building and fitting it out with things like window furnishings, shelving, and televisions as requested by the WDFA, as well as meeting the groups' relocation expenses.
6. The social and economic impact reports.
7. The Community Liaison Officer position as requested by the Adelaide Hills Council.
8. Trees for the facility grounds.
9. The footpath along the Woodside-Nairne Rd between the APOD at House 8.

There are ongoing negotiations for federal funding for:

1. The mobile library service
2. The upgrade of Riverview Road (Please see the next section 'Services and Facilities' for more details of these)

As noted previously in the list of community concerns about direct expenditure, some residents expected that there would be expenditure on the pool or sporting facilities in addition to the other expenditure outlined above. However, the direct expenditure undertaken on behalf of the APOD is targeted at minimising any potential negative impacts on services and facilities where the APOD has directly affected these. The pool and the town's sporting facilities have not been negatively affected by the APOD.

A second expectation relating to direct expenditure was that local disadvantaged groups would receive funding over asylum seekers. There are existing groups who experience social and economic disadvantage in Woodside: Indigenous Australians, people with disabilities, the unemployed or those on very low incomes. There are 20 people in the Woodside area who identify as Indigenous. Five percent of the local population indicate requiring assistance in self care, body movements or communication because of a disability, health condition or old age.<sup>100</sup> There is a 3% unemployment

---

<sup>100</sup> Adelaide Hills Council, 2008, *Woodside Community Profile*

rate. There is no research showing the economic and social disadvantage they face in Woodside. However, we might conclude, on the basis of research on these groups in South Australia and Australia, that they face significant disadvantage. There is no research comparing expenditure between existing disadvantaged groups and asylum seekers or whether expenditure on one group results in reduced expenditure on another.

Our research did not find that there were specific negative impacts arising from the APOD on these groups, though we were not able to speak with any Indigenous residents to confirm this in relation to this group. However, along with community leaders in the schools, health system, business organisations, churches and community groups, DIAC is also focussed not only on mitigating possible negative impacts through direct expenditure but also enhancing positive benefits for the community as a whole. As noted throughout this report, there have already been a number of benefits, not only arising through direct expenditure, such as new hospital equipment, but also through other types of contributions, such as new learning and relationships, as found in the schools. This report outlines the many ways in which the APOD and other community leaders responding to the arrival of the APOD have contributed to the town's social and economic fabric. These efforts might be further strengthened through a focus on the existing disadvantaged groups in the area. Many organisations and residents are already active in this area. We would suggest that DIAC may engage with these groups in the first instance to develop ways in which they may work in partnership which may include sponsorship, participating in fund raising efforts and volunteering by staff and asylum seekers. For example, we highlight in the section on Community Relationships how asylum seekers volunteered for tree planting. The APOD also offers an excellent opportunity for addressing youth unemployment through creating programs and pathways to enhance employment opportunities for people at the APOD.

#### **Recommended options**

Further to our recommended option on youth employment in the previous section, we would suggest starting a conversation with local Indigenous, disabled and homeless/low income groups about their needs and how the APOD might contribute to these. Possibilities include: sponsorship, participating in fund raising efforts, employment opportunities and volunteering by staff and by asylum seekers.

### *Conclusion*

As noted, community development after the APOD involves building people's access to meaningful employment, education and health and wellbeing where this is directly threatened by the arrival of asylum seekers. Further, we've recommended a number of options for building this kind of capital throughout the report which, although they don't involve sporting fields and pools, do engage with particular concerns like real estate and local employment.

## **Indirect expenditure**

### *Community concerns about indirect expenditure*

Indirect expenditure refers to the flow on economic benefits of the APOD through the increased number of people spending money in the town.

As with direct expenditure, there were expected benefits to the town through this indirect expenditure.

## *Impacts*

The Economic Impact Study includes a numerical analysis of the impacts of indirect expenditure (flow-on effects from workers and business owners spending their extra income) in Woodside. For this report, we spoke with people about expenditure in the town, as well as observing, on our many field trips, how people from the APOD utilised town services and facilities.

We found that the largest indirect expenditure benefiting Woodside was in retail. This included expenditure on:

1. *Food*. For example: Woodside takeaway, the Bakery, Woodside Providore, the local supermarket, roadside stalls, the local pubs, Melba's, Woodside Cheese. Catering for events/meetings is sourced in Lobethal and Woodside.
2. *Local services*. For example: petrol station, post office, newsagency, pharmacy
3. *Gift shops*. For example: antique shops, art galleries

It was also reported that the increase in people in the town, whether buying or not, was a positive outcome that created an atmosphere of aliveness and bustling industry, adding to the ambience of Woodside. Further, those new to the town told us that working in the area had introduced them to various eateries and tourist places which they hadn't known about before like Melbas and the local beer brewery.

## *Conclusion*

There have been benefits to Woodside from indirect expenditure, particularly for businesses offering food, services and gifts. A newly bustling atmosphere and increased knowledge of Woodside's attractions have also flowed on from the presence of the APOD.

## Services and facilities

---

There are a number of services and facilities in Woodside that may be impacted by the APOD:

1. The Adelaide Hills Council
2. The library
3. The pool
4. Local roads
5. The Country Fire Service
6. The Woodside Barracks

Below, we consider the concerns, provisions and impacts for these in turn.

### Adelaide Hills Council

Christopher Callinan, the State Director of the Department of Immigration and Citizenship of DIAC contacted the Council on the day of the announcement. Mr Callinan and Ken McArthur also from DIAC addressed the Council meeting the next day on 19 October. Following this, Council passed a resolution reflecting their position that the community should have been consulted, but that their primary focus was to ensure that there were benefits to the town arising from the APOD. The AHC took a politically neutral approach to the facility, focussing on how to best represent the community. This approach avoided polarisation and ensured the best outcomes for the community.

Initially, there were a lot of calls to the Adelaide Hills Council asking whether the Council could stop the facility. Initially these were directed to existing Council staff. A Community Liaison Officer was later appointed, at which time they handled the inquiries about the facility. Please see the section in Community Relationships on the Community Liaison position for more information about the types of activities they undertook.

### Library

The main concern raised in interviews wasn't about the impact on the local library, but about the adequacy of the library provided onsite to the clients. However, as there are continuing concerns about expenditure in all areas of the APOD, and there are negotiations for a mobile library service, we have also included here information on this expenditure as a likely issue that people in the town may raise.

The provision of a library for use by clients is included in Serco's contractual obligations. According to that contract, this library, run by the Activities Manager, should include:

1. English and foreign language videos/DVDs
2. A selection of local, national and foreign language books, periodicals, and newspapers
3. Foreign language to English translation dictionaries

#### 4. Electronic and hard copies of the Act and other relevant Australian legislation<sup>101</sup>

Currently, the Inverbrackie APOD has an on-site library. These books were acquired through donations. The facility received a very large number of donated books. At the time of writing, the APOD library are seeking only books in specific languages (Tamil, Arabic, Persian) and English to these languages and Hazaraji dictionaries.<sup>102</sup> There are different assessments of the adequacy of this library. Advocates are concerned that it doesn't provide sufficient resources. For these advocates, approaching the Inverbrackie Good Neighbour Council about further donations of appropriate and necessary (i.e. new and in relevant languages) reading material might be useful. For example, the Little Big Book Club's publication and distribution of the Wilbur series of picture books which are in English and then translated into a number of different languages (including Arabic, Farsi and Tamil) as a tool for early English language learning would be welcomed into the APOD library.

There are also ongoing negotiations to include the APOD as part of the Adelaide Hills Library Service mobile library. Books for this service will be resourced through the State-wide network of Community Languages books. These Community Languages books are shared resources for all the public libraries in South Australia, including the mobile library. The local library will receive funding for the extra work or any extra equipment required to extend the mobile library service.

However, there are two logistical difficulties with people in the APOD using the local mobile library which have been identified by school library services:

1. Libraries need members to provide residential and other details in order to join, which clients at the APOD don't have
2. The time between receiving a protection visa or notice of a move into community detention is often very short, and returning library books can be difficult

Council's Manager of Library and Customer Services is keen to work with clients and students to overcome these. The examples of the processes in schools, where Inverbrackie students have the same card and return their books to a designated school officer, seems to work well and might be useful for the mobile library service too. If the mobile library service can't be established, it may also be possible for the Community Languages books to become part of the onsite library at the APOD.

Another option is online library services. For example, the State Library has an online database with access to materials for learning English, such as an Interactive Picture Dictionary.<sup>103</sup>

None of these initiatives will impact on the funding for local library users, nor on their access to library services, in any way.

Local libraries also have an important role to play in community education. The local Woodside library (and other local libraries), in conjunction with the Community Liaison Officers (CLO), hosted a

---

<sup>101</sup> Serco, 2011, Submission to the Joint Select Committee on Australia's Immigration Detention Network

<sup>102</sup> Inverbrackie Good Neighbour Council, 2011, *Guidelines for donations of goods*, <http://www.inverbrackiegnc.org.au/getting-involved/donations-1/donations>

<sup>103</sup> This and other resources can be found at: <http://www.slsa.sa.gov.au/site/page.cfm?u=444>

community information forum where residents could come and speak with the CLOs and ask questions about the facility. For Harmony Day, the library coordinated with the school to run a picture competition and prize. They also hosted author David Miller, to speak to school children about his book 'Refugees'. The librarians noted that there was a very positive response from all the children who attended and took part in the competition and book reading.

## The Woodside public swimming pool

There were a number of complaints when Inverbrackie clients used the Woodside Pool in January 2012. There were also complaints about the pool in the Woodside Barracks being closed to local residents. These were:

1. The Woodside pool was closed to the local residents when the clients were there and the Barracks Pool is now [because of the APOD] closed to local residents
2. There is a danger of catching diseases in the pool water from the people in the APOD

When Inverbrackie clients used the Woodside Pool, it was between club swimming and the usual time the pool opened for public swimming. The pool was operated for Inverbrackie clients on a fee for service basis. The presence of Inverbrackie clients did not impact on the pool opening times for other pool users.

The pool at the Barracks has never been available for public use, only for use by registered sporting clubs. There are two clubs who currently have a lease agreement to use the Barracks Pool. The Barracks Pool was not affected by the opening of the APOD.

As outlined in the section on health, all asylum seekers entering Australia receive a comprehensive health check. No asylum seekers with untreated communicable diseases are transferred to the mainland, including to Inverbrackie.

## Local roads

### *Concerns*

The increased traffic along Riverview Drive was reported as impacting on the road quality in this area. "Potholes" was reported as a significant impact. There was also a concern about increased congestion on the Woodside-Nairne Road. Two residents reported a visual impact on the town from the increased traffic.

### *Impacts*

The care and maintenance of local roads is the responsibility of the local Council. Riverview Road has been in need of repair for some time. The road has been proposed for upgrade in 2011 with \$250,000 committed by the Adelaide Hills Council.<sup>104</sup>

---

<sup>104</sup> Adelaide Hill's Council CEO's Message, 2011, Available online:  
<http://www.ahc.sa.gov.au/site/page.cfm?u=165> (Accessed 10 October 2011)

We understand from Council's traffic counts of the road usage that traffic volumes have increased from an average of 511 vehicles per day in August 2008 to 872 vehicles per day in 2011. This is an increase of 70.6%. This figure includes an increase in the number of commercial vehicle movements from an average of 34 per day to 68 per day.

However, it is not possible to ascertain from the data provided whether this traffic increase is related solely to the APOD. There are other businesses located in the area that use Riverview Road, including the popular Inverwood Stud and Thoroughbred Agistment, which until 2001 included a riding school that attracted dozens of clients during the weekend and more so during the school holidays, the Woodside Barracks, and the Bird in Hand Winery which opened its cellar doors in 2005.

The Adelaide Hills Council is currently negotiating with the Federal Government for a contribution to the funding to improve Riverview Road.

## The Country Fire Service

There were three concerns about the impact of the APOD on bushfires and the CFS:

1. There is no comprehensive evacuation plan and therefore no way of guaranteeing the safety of an extra 400 people
2. The increase in population from the APOD would place a strain on local fire services
3. The clients will start fires, either during a protest or by accident because they don't understand fire safety

This issue was raised at both town meetings and in letters to the editor, as well as on the Fair Go for Communities website and by the media. For example, this was one comment at the second meeting:

*I take it you're from the city...Nowhere to hide, no refuges. How can you justify putting 400 people into a high risk bushfire area....where are you gonna house them when we have a catastrophic fire...*

The Mt Barker Region 1 Headquarters of the CFS was officially informed of the opening of the APOD on the same day the announcement was made publicly. Representatives from the local CFS are part of the State Coordination Group, the Regional Managers meeting, the Community Reference Group and the Community Consultation Committee.

Through these and other meetings, a fire safety and evacuation plan was established for Inverbrackie. The APOD is not on a fixed alarm system (as is the Woodside Barracks). The APOD has a fire warden who is also the captain of the Brukungu CFS. Fire alarms are raised by dialling 000. This call goes to the Adelaide Fire Service, which triggers a dual page and dual response from Balhanna and Woodside CFS.



The evacuation site is the Mt Barker YMCA. As this site is not the last place of refuge for the Mt Barker community in the event of a catastrophic event, using this site should not impact the community. Twenty Serco employees have volunteered for the CFS.<sup>105</sup>

Fire awareness is part of the Serco Induction Program undertaken by all employees working in the detention facility.

APOD clients are also educated about fire safety during their induction and orientation. Children from Inverbrackie from the local schools are also educated on fires and fire safety as part of the general curriculum. For example, as part of this research we observed the display about bushfires at one of the preschools, and a lesson on barbequing at one of the primary schools.

Fire drills at the Inverbrackie are completed regularly with the latest site evacuation drill involving both adults and children.

The section on security below discusses the likelihood of fires arising from protests in more detail.

The CFS has had two call outs to the facility as at 11 months of its operation. Neither of these were serious. The CFS Woodside reports that it has not experienced any increase in its workload, and they are not in need of extra equipment or funding.

## Woodside Barracks

### Concerns

1. Moving and expanding:
  - a. the Barracks are being moved, affecting the town's identity, economy and community relationships
  - b. the numbers of asylum seekers in the APOD will increase and the Barracks will leave
2. Losses:
  - a. married quarters housing meaning a loss of the economic and social contribution from people living there
  - b. facilities – hall/creche and sporting/recreation grounds

### Impacts

There is a long-term relationship between the Australian Defence Force and the Department of Immigration and Citizenship. Many immigration facilities in Australia are located on land and housing owned by the Defence Services Group (DSG). Many of the personnel of the Woodside Barracks have worked in other barracks that house asylum seekers including Darwin, Pakapanu, Woomera and Baxter.

---

<sup>105</sup> Department of Immigration, 2010, *Inverbrackie Alternative Place of Detention Fact Sheet*

Part of the agreement between DIAC and the ADF is to ensure that housing asylum seekers close by will not affect the operation of the Barracks. A Barracks representative reports that the presence of the APOD has not affected the normal day to day operation and running of the Woodside Barracks.

Barracks management view their relationship with the APOD as part of a *“good neighbour policy, like any other community group”*. There are formal and informal communication channels between the facilities: between DIAC and DSG as government departments; the head and 2IC of the Woodside Barracks are on the CCG; and as neighbours there are also plenty of opportunities to communicate informally.

Rumours about the Barracks leaving have been circulating for a long time, and indeed are part and parcel of many barracks’ life across Australia. Studies are often undertaken into the economic feasibility of closing one barracks and combining it with another, such as that undertaken in 2007 for the ADF assessing the costs and benefits of closing the Woodside Barracks.<sup>106</sup> However, the response of Ron Hunter, the regional director of the Defence Support Group, was reported in *The Courier* in answer to this question of closure as saying: *“there’s absolutely no plans to leave that facility at this time...Woodside is an enduring base”*.<sup>107</sup> This was also confirmed in our interviews.

The concerns about the expansion of the APOD were heightened by the 2011 High Court decision disallowing the proposed offshore processing of asylum seekers in Malaysia. Following this, it was rumoured that there would be an increase in asylum seekers being processed onshore which subsequent increases in the population of facilities like Inverbrackie. However, we are reliably informed that there will be no expansion of the Inverbrackie facilities.

The APOD uses what was known as the ‘married quarters’, seventy four houses for defence personnel with families. When these no longer met the needs of the Defence Force, the housing needs of defence personnel of the Woodside Barracks were accommodated by new houses built in Mt Barker. Approximately 140 ‘singlies’ still live on the Inverbrackie Barracks itself, though many also live in off-site housing provided by the Department of Defence as well.

Two Barracks members we spoke with preferred that the married quarters be rebuilt, rather than living off barracks, for reasons of commuting. However, others felt the new Defence housing provided to them was very good and they were happy with the arrangement. They also noted that housing in Mt Barker provided better professional and personal opportunities for spouses.

Other people commented that the housing had become a significant financial and security burden for the DSG, as it was attracting break-ins, squatting and illegal parties. It was noted that the houses *“looked old and run down before, they’ve been given a facelift”*.

The presence of the APOD in the married quarters is unlikely to have reduced the economic benefits the Woodside Barracks brings to the local economy. The married quarters haven’t housed a large number of defence families for quite some time. The 2007 Socio-economic Impact Report noted that the economic contribution of the Woodside Barracks to the local economy of the Adelaide Hills

---

<sup>106</sup> Department of Defence, 2007, *Report for Woodside Barracks South Australia, Socio-economic Impact Study*.

<sup>107</sup> Town in turmoil, 2010, *The Courier*, 27 October 2010.

region in 2007 was approximately 1.7% of the regional GDP and 0.7% of local employment. It was estimated that the Barracks is responsible for 10 to 15% of local business revenue. This contribution is based on existing numbers of personnel, who, as noted, often don't live on Barracks.<sup>108</sup> Thus we may conclude that the economic contribution of the Barracks to the town will remain the same despite the married quarters being used for the APOD.

A hall space was also part of the original married quarters incorporated into the APOD. The hall was used for a mothers' group/creche for residents who had one family member working at the Barracks. It was also used for parties for Defence personnel and could be rented out. The Woodside Defence Families Association, who ran the mothers' group/creche, raised the closure of the hall as impacting negatively upon defence families in the area. With the assistance of the Community Liaison Officers, the group found temporary accommodation whilst new demountable rooms were established in the Barracks. These rooms, their fittings and facilities were paid for by DIAC. Assessments of the suitability of the facilities depend on whether the person speaking is taking a position for or against the APOD. If 'for', then they are considered an improvement – bigger, cleaner, newer – if 'against', they are considered inferior. There were possibly issues with a leak and the toilets when the facility was first built, but we understand these have been fixed.

The boundary of the APOD included a space previously used for recreation/sport by the Barracks, and part of the cross-country run. There are four sporting grounds in the facility, and so the games were simply transferred to another ground. The cross-country run was slightly re-routed without any detriment to the course or its users.

## *Conclusion*

There have been minimal impacts, either positive or negative, on the local library, pool, CFS and Barracks. There is some potential negative impact on Riverview Road through increased road use but this requires further assessment to more clearly identify contributions to its decline from different road users. Where there have been impacts, for example on the Woodside Defence Families Association and the use of the hall/creche, these have been adequately compensated.

---

<sup>108</sup> Department of Defence, 2007, *Report for Woodside Barracks South Australia, Socio-economic Impact Study*.

### **Effective interventions already in place**

#### The Barracks

Financial and other support to replace any facilities (e.g. hall/crèche)

Ongoing formal and informal communication with the ADF, DSG and the Woodside Barracks through a number of communication channels. The success of this relationship relies significantly on the attitude and approach of the Barracks management, which we note is positive and helpful.

#### Local Roads

Discussions between DIAC and the AHC on the contribution of the APOD to the decline of the roads' surface and the contribution to its upgrade based on this calculation.

### **Recommended options**

#### The CFS

Bushfire season will be an important opportunity to show that the detention centres' values are the same as the town's values. Ensuring that local employees of the APOD participate in any volunteering activities is important – and we note this has already started with Serco employees volunteering for the CFS. Also possible is involvement in pre-season fire prevention activities, which both employees and clients could potentially join as volunteers.

#### All services and facilities

Include information and updates about these in current communication forums (see the next section on community relationships). For example, information about the library facility and what books/DVDs the facility could benefit from, the pool usage including the benefits of this for clients, the volunteer activities of staff and clients in relation to bushfires and fire safety.

## Security

---

### Community concerns about security and the APOD

There were three main security concerns raised by residents:

1. The asylum seekers will escape and commit crimes in the local area
2. The asylum seekers will stage violent protests and riots
3. Asylum seekers are terrorists and threaten national security

The concern that the asylum seekers will escape and commit crimes is generally expressed most strongly by people living near the facility. For example, one woman reported locking her door because she was afraid of escaped asylum seekers. Another man reported that he now locks his car, whereas he hadn't before the APOD. At the meeting on 24 November 2010 at Lobethal, Chris Bowen, Minister for Immigration, was asked by a resident living near the facility:

*Do you guarantee the safety of my family, we live very close, I want a guarantee that my family will be safe.*

Four others living and working in close proximity who we spoke with for this research report were concerned with security provisions, believing that the only security was the fence:

*The facility is not secure, they can just jump over the fence.*

For those not living in close proximity, but who also felt that the facility was not secure, their concerns about personal safety were related to the belief that the clients in the APOD would be allowed into the town and were likely to commit crimes there. For example, this comment was reported in *The Advertiser*:

*Later Mr Prince also told Sky News there were concerns that asylum seeker residents could be allowed to wander through the community unchecked raising concerns for property as well as for local children and even wives.<sup>109</sup>*

As a result of these concerns, some residents keep a close watch on activities at the APOD and any police presence in the town for evidence of security breaches. At times this has meant that incidents unrelated to the APOD have been interpreted by residents as a security threat involving the asylum seekers. For example, on 2 February 2011 a local Hills man was reported as acting suspiciously in Woodside. Members of the Woodside Community Action Group saw the police patrols and thought they were chasing a man who escaped from the Inverbrackie APOD. Here is the Facebook conversation which illustrates how some residents interpret security incidents in the town since the arrival of the APOD:

- 1: *Please call the police and find out why there are so many patrols out? And ask why if it is under control, why they can't release who they've been after. This is ridiculous!*

---

<sup>109</sup> Mark Kenny, 2010, *Woodside Residents Fear 'Spies'*, *The Advertiser*, 23 November 2010

- 2: *Just rang the police, of course they can't tell me, but no need to worry madam, it is all under control!!!!*
- 3: *I have just sent information to a few people in newsrooms. I've had enough of this government trying to pull the wool over our eyes with information protection.*
- 4: *I think you should now all call Leon [Leon Biner, 5AA Radio]. If we have a few calls about this, and tell him that you are concerned that the Police can't tell you who it is or what sort of level of criminal/person it is, that you feel unsafe. They have not found the person yet, and the police are being VERY cagey. The woman I spoke to was very abrasive!!*
- 5: *Have just called 5AA, their newsroom is onto the story, apparently someone has escaped and is being violent and abusive but they can't locate him!!*
- 6: *Maybe the accused is not from the centre, hopefully they have got their facts mixed up!*
- 7: *escaped from where? making threats is what we were told but not that he was part of the detention centre. Well done. Sadly this is the only way we can find out information!! can you believe it!<sup>110</sup>*

This type of exchange demonstrates the speed with which suspicions about the APOD are inflamed and passed through members of the community to the media. A similar example of the implications of residents' suspicions was reported to us during this project. In this incident, two members of the Woodside Regiment who are not of Anglo-Saxon background were accosted and held up in the Mount Barker Pub, with their assailants accusing them of being "escapees from the APOD". Other Barracks members who were present were able to intervene on their behalf, however the situation was reported as quite aggressive and ugly.

Concerns about protests and riots at Inverbrackie are based on people's knowledge of incidents occurring in other immigration detention facilities gained through the media. People concerned about riots gave examples of what happened at Christmas Island and Villawood as evidence of what they fear will happen at Inverbrackie. The Woodside police have been quoted in media articles as being concerned about protests and riots at Inverbrackie, with an unidentified source claiming that the facility is a:

Residents, the local media, local politicians and the local police also expressed related concerns about the capacity and role of the local police in responding to security incidents. Namely, that:

1. The local police station in Woodside provides a single patrol response only and does not operate on a full 24/7 basis, and this resource alone is not sufficient to protect residents in the event of a security incident
2. The APOD is on Federal land and therefore not the jurisdiction of the local police, so the protection they can provide to the local community in the event of a security incident is limited

---

<sup>110</sup> Facebook: Woodside Action Group. Accessed 2nd February 2011

The issue of the role of the local police and Federal/State jurisdiction was most recently reported in local media as “a ban on SA police”, that the “police have been told not to go near the facility” and that the “police were powerless to act”.<sup>111</sup>

Associated with these concerns about security is knowledge and communication about security at the facility.

1. Potential and actual incidents are being kept secret from the community and therefore the community is not sufficiently prepared or protected.

As the Facebook conversation illustrates, some residents opposed to the facility believe information is being withheld from them. This has also been a theme in recent media articles, which report on alleged violent incidents between security staff and clients which they argue have been covered up and are only accessible through leaked information.<sup>112</sup>

Those who are supportive of asylum seekers, but not of the facility, also believe information is being withheld. However, their concerns about information are related to the health and wellbeing of the asylum seekers and rates of suicide and self-harm.

The Woodside/Mt Barker police service is concerned about the amount, detail and timeliness of information exchanged with the facility about security incidents. Because the local police are often the first point of call for people reporting security concerns, they feel their ability to communicate accurately with the public is compromised.

There are concerns that there is a lack of information about security provisions in general. For example, this question was asked at the Woodside meeting:

*...are there any penalties for any of these people if they break any of the regulations, and if so what are those penalties...*

In response to being told “their risk assessment will be re-made and they make a decision then about whether such a location is appropriate” the questioner’s reply “That’s a bloody weak answer” reflects a concern about the quality and comprehensiveness of information about security.

As well as expressions of explicit security concerns, as overviewed above, a number of people we spoke with expressed general beliefs about asylum seekers being terrorists and criminals. For example, at the first town meeting, one man said:

*They’re taught to beg, borrow and steal from the day they’re born.*

One interviewee commented in response to hearing the story of an Afghan refugee:

*I understand why he did what he did, if it’s true, but you can’t trust their stories.*

---

<sup>111</sup> The Australian, 2/5/2011, *SA Police Worried About Centre*

<sup>112</sup> Brian Littlely, 2011, *Culture of Secrecy at Detention Centres*, The Advertiser 20 May 2011; Michael Owen, 2011, *Violent Incidents Raise Pressure for Detention Inquiry*, The Australian 26 May 2011; Brad Crouch, 2011, *Inverbrackie Staff Hospitalised After Violent Brawl*, Sunday Mail 28 May 2011

*powder keg...that could blow at any time.*<sup>113</sup>

The concerns about terrorism were also circulated by the Woodside Community Action Group/Fair Go for Communities group on their website and through their email lists:

*The Immigration Department's current plan to erect a 'swimming pool' type fence around the detention centre gives the community little confidence for a secure environment and protection against any absconders or unassessed 'sleeper' element which ASIO estimates at 4% of all asylum seekers arriving to Australia. With not much more than a 'curfew' to retain detainees, the fact that the facility is adjacent to an existing army base complete with armoury, and a rural supply business warehousing tonnes of fertiliser with negligible security located across the street does little to reduce any such concerns.*<sup>114</sup>

Their concerns were also reported in the media<sup>115</sup>:

*Why would you put a detention centre next to an Army camp, the mind just boggles to think what's in that Army camp that the refugees would love to know about. It's just a disgrace...*

These claims about terrorism and sleeper cells were strongly refuted by DIAC staff during the Community Reference Group meetings at which members of the Woodside Community Action Group were present. The claims however hadn't been removed from their website at the time of writing this report.

However, these beliefs that asylum seekers are terrorists and criminals are wider than Woodside itself. They are found throughout the Australian and international media, on websites and in political speeches and campaigns.

Several people raised people smuggling as a national level security issue impacting on Woodside through the establishment of the APOD. It was argued that the housing provided at the APOD encouraged people smugglers. For example, this type of thinking is utilised by politicians such as Tony Abbott, who, on his visit to Woodside, claimed:

*I think bringing asylum seekers to an area like this is basically saying to the people smugglers and their customers that the welcome mat is out, that the red carpet treatment is available.*<sup>116</sup>

---

<sup>113</sup> Brad Crouch, 2011, *Inverbrackie a powder keg say police, amid claims violent incidents are being covered up*, Sunday Mail 8/5/2011

<sup>114</sup> Fair Go For Communities, 2011, Our Position, [http://fairgoforourcommunities.com.au/our\\_position.html](http://fairgoforourcommunities.com.au/our_position.html) (Accessed 31 October 2011)

<sup>115</sup> Mark Kenny, 2010, Woodside Residents Fear 'Spies', The Advertiser 23 November 2011

<sup>116</sup> Tony Abbott, 2010, Joint Doorstop Interview, Inverbrackie, Adelaide, <http://www.tonyabbott.com.au/News/tabid/94/articleType/ArticleView/articleId/7703/Joint-Doorstop-Interview-Inverbrackie-Adelaide.aspx> (Accessed 1 November 2011)



However, these views are not universally held, either within Woodside or more widely. There are residents in Woodside who take a different view of asylum seekers and security. They were not viewed as criminals or terrorists. For this group, security concerns centred around self-harm and suicide, i.e. whether the asylum seekers were being treated well in the facility and having their claims processed in a timely way. Protests were viewed as the outcome of frustration at processing delays and mental health issues exacerbated by detention. Their main concerns were that:

1. Serco's security procedures are invasive, e.g. entering people's houses and shining torches in their faces in the middle of the night
2. The time spent in detention is too long, leading to mental health issues and then to self-harm and suicide

## Security in Woodside

Woodside is part of the South Australian Police Hills Fleurieu Local Service Area (LSA). This LSA extends across the Hills and includes the Fleurieu Peninsula and Kangaroo Island. The community police service across this LSA includes 135 police officers in various roles including CIB, General Patrols, Traffic Control, Crime Prevention and Domestic Violence. The community police service is supported by metropolitan specialist services for events such as a major crash or a murder.

The South Australian Police Service is state, not federally, funded. As all Defence land is federally owned, the Australian Federal Police, rather than the South Australian police, have primary jurisdiction there. In the next section we outline the security arrangements for the APOD, including the role of the Australian Federal Police and the South Australian Police.

### *Role of the local and state police in security at the APOD*

In the event of a critical security incident such as a non-peaceful protest, Serco, DIAC and the Australian Federal Police work together. There may also be circumstances where the local police are called upon to work in conjunction with these groups as well.

Members of SAPOL are on the State Coordination Group and attend the Regional Managers meeting. They are also on the Community Consultative Group. There is a weekly teleconference between APOD security staff, DIAC, AFP and SAPOL to discuss security issues. Assessments of the depth and usefulness of this information differ between APOD staff and the police, with APOD staff seeing the phone conferences as positive, useful and having improved relations, while police are less confident that the process is sufficient to meet their information needs.

At the time of writing this report there is an emergency response plan established between the police, DIAC and Serco. The police have a recognised obligation to attend an incident where there is a threat to life or injury.

However, at the time of writing this report there is not as yet a Memorandum of Understanding that encompasses a coordinated approach to major security events. This is being negotiated, however negotiations have been slower than expected. This delay has occurred after a decision that a nationally-coordinated approach to the MOU between Federal and State Governments over policing is warranted in light of the new facilities being opened up in different areas of Australia. This national

MOU will be informed by a risk assessment conducted conjointly by the Australian Federal Police, DIAC and all State police services including South Australian Police. A single, coordinated approach potentially offers a clear, unified response to any major incidents.

Negotiations for funding for two local police officers to be dedicated to the Inverbrackie facility are also continuing. This role will include educating clients about the rule of law and the legal system in Australia. An ongoing presence allows the police to develop early a good relationship with clients who may in the past have experienced trauma and torture at the hands of authority figures such as police. In the past, there has been a similar role for police liaison in the Baxter facility.

For the police, an ongoing role in the facility would also assist them in managing community concerns about security. There are concerns that without this police liaison role, they are less able to manage community responses to issues such as that of the Nairne man in Woodside (see above). Although it was communicated to the public that this had nothing to do with the APOD, it was suggested during our interviews that an initial failure to engage public trust around the APOD has allowed for a more generalised distrust that is difficult to contradict.

## **Security in the Immigration Detention network and the Inverbrackie APOD**

Although many of the concerns reported to us and in the media focus on large non-peaceful security incidents – escapes and non-peaceful protests – security incidents actually include personal incidents such as self harm and suicide, interpersonal incidents of threatened or actual aggression and violence between clients and between clients and staff, as well as group protests and demonstrations which can be peaceful or non-peaceful.

The community concerns about security at Inverbrackie focussed on the inadequacy of visible security measures such as the fence, the location of the facility (next to a Barracks) and the role and capacity of the local police. These were seen to be the main factors that created security risks for the people in the town.

However, security incidents in immigration detention facilities are the outcome of a complex range of factors:

- length of processing time (see the section below for more detail on this)
- negative decisions about visas
- concerns about the fairness of the visa application process
- understaffing, staff stress and other staff health and wellness issues, including less than adequate training for security personnel
- the capacity of the security equipment, the security of the location and the physical infrastructure
- conditions resulting from crowding, limited support programs and facilities, limited contact between family members

- the previous experiences of clients, including existing levels of trauma and mental health issues and those exacerbated or developed through the detention experience
- remoteness and consequent limited access to health and legal services<sup>117</sup>

Many of these factors were present prior to the non-peaceful protests at Christmas Island and Villawood this year. For example, the Hawke and Williams (2011) report notes that there has been an increase in the number of people arriving by boat in 2010, exacerbated by more restricted options for housing and processing people in detention, and further influenced by the increasing number of people in detention who have received negative decisions or who are awaiting security clearances.

<sup>118</sup>

As security incidents are the outcome of a complex range of factors, effective prevention needs to address all of these. Following this, the security program at Inverbrackie includes:

1. Perimeter and occupancy checks
2. Intelligence gathering and monitoring the population using 'dynamic security' i.e. through staff actively engaging with clients to maintain a responsive, up to date assessment of potential risks
3. People who are convicted in a court of law for involvement in escapes or violent protests will not be granted a visa<sup>119</sup>
4. Only housing clients who have been previously assessed as low risk

---

<sup>117</sup> Report on the Commonwealth and Immigration Ombudsman's Oversight of Immigration Processes on Christmas Island: October 2008 to September 2010, Report no 02/2011 published February 2011. AHRC 2010, Immigration detention on Christmas Island:

[http://www.hreoc.gov.au/human\\_rights/immigration/idc2010\\_christmas\\_island.html](http://www.hreoc.gov.au/human_rights/immigration/idc2010_christmas_island.html). AHRC 2011 Immigration detention at Villawood: [http://www.humanrights.gov.au/human\\_rights/immigration/idc2011\\_villawood.html](http://www.humanrights.gov.au/human_rights/immigration/idc2011_villawood.html); Allan Hawke and Helen Williams, 2011, *Independent Review of the Incidents at the Christmas Island Immigration Detention Centre and the Villawood Immigration Detention Centre*. Department of Immigration and Citizenship, <http://www.immi.gov.au/media/publications/independent-review-incidents.htm>

<sup>118</sup> Report on the Commonwealth and Immigration Ombudsman's Oversight of Immigration Processes on Christmas Island: October 2008 to September 2010, Report no 02/2011 published February 2011. AHRC 2010, Immigration detention on Christmas Island:

[http://www.hreoc.gov.au/human\\_rights/immigration/idc2010\\_christmas\\_island.html](http://www.hreoc.gov.au/human_rights/immigration/idc2010_christmas_island.html). AHRC 2011 Immigration detention at Villawood: [http://www.humanrights.gov.au/human\\_rights/immigration/idc2011\\_villawood.html](http://www.humanrights.gov.au/human_rights/immigration/idc2011_villawood.html); Allan Hawke and Helen Williams, 2011, *Independent Review of the Incidents at the Christmas Island Immigration Detention Centre and the Villawood Immigration Detention Centre*. Department of Immigration and Citizenship, <http://www.immi.gov.au/media/publications/independent-review-incidents.htm>

<sup>119</sup> A person will not pass the character test if they receive a conviction of any kind, regardless of whether a prison sentence has been imposed while: in immigration detention; during an escape from immigration detention; during a period where a person had escaped from immigration detention; if the person has been convicted of the offence of escaping from immigration detention <http://www.immi.gov.au/media/factsheets/79character.htm> (Accessed 1 November 2011)

5. Quicker and more transparent processing times and procedures
6. Provision of a 'positive culture': well maintained spacious facilities, not overcrowded, with plenty of programs, and families kept together (see Section on Health, above)
7. Physical and mental health support (see section on Health, above)

There are differences between the Inverbrackie, Christmas Island and Villawood facilities that are likely to affect the risk of security incidents. For example, Inverbrackie is a newer facility with a particular client group and a management direction of 'positive culture'. The AHRC, after their visit to the facility in August 2011, said *"if people must be held in closed detention facilities, then the detention conditions should be comparable to those at Inverbrackie"*.<sup>120</sup>

However, there are three factors that have been reported as potentially influencing the security at Inverbrackie:

1. Length of time spent in detention
2. Concerns about the visa application process
3. Staff levels, training and occupational health and safety

### *Length of time spent in detention*

Long term detention is directly related to negative psychological and physical health outcomes for asylum seekers. The Detention Health Advisory Group notes that the psychological distress engendered by long term detention, the increasing numbers of people in detention and increasing numbers of application refusals, are the primary factors motivating violent unrest, self-harm and suicide.<sup>121</sup>

Length of time in detention is influenced by:

1. Processing requirements
2. Nationality
3. Statelessness
4. Numbers of arrivals

Here in this section of the report we only consider the influence of processing requirements as they are most relevant to the conditions and therefore security at Inverbrackie. The other factors listed refer to the longer detention time experienced by people from Sri Lanka and Afghanistan as a result of the decision to freeze any processing for these groups in 2010, to the situation of people who are

---

<sup>120</sup> AHRC, 2011, Conditions inside facility ok but detainees still distressed, Available online: [http://www.hreoc.gov.au/about/media/news/2011/75\\_11.html](http://www.hreoc.gov.au/about/media/news/2011/75_11.html) (Accessed 31 October 2011)

<sup>121</sup> Detention Health Advisory Group (DeHAG), 2011, Submission to the Joint Select Committee on Immigration Detention

found not to meet the definition of a refugee but who cannot be returned to their country of origin, and the increased number of people in detention facilities such as Christmas Island due to the increase in arrivals, the higher number of people on negative pathways and people awaiting security clearances.

There are two separate processes for determining asylum applications depending on the mode of arrival: onshore and offshore. Onshore applicants are people who have entered Australia on a visa, such as a student or work visa. They can apply for a protection visa under Section 36 of the Migration Act. Their applications are assessed by a DIAC officer. Unsuccessful applicants may appeal to the Refugee Review Tribunal, and make a further judicial appeal to the courts.

Offshore applicants are people who arrive without a valid visa on Australian territory, usually Ashmore Reef or Christmas Island, that was excised from the migration zone in 2001. In these excised areas, there is no automatic right to apply for a protection visa under S. 36. Instead, Section 46A of the Migration Act requires that people arriving in excised areas are interviewed by a DIAC officer. During this interview, if there are claims that may potentially invoke Australia's protection obligations under the Refugee Convention these claims go on to be assessed by a DIAC officer.<sup>122</sup> If the Protection Obligation Evaluation (POE) finds that the applicant may meet Australia's protection obligations, the evaluating DIAC officer applies to the Minister to "lift the bar" to allow the person to lodge an application for a protection visa. The basis for the decision to "lift the bar" is 'if it is in the public interest'. If the officer determines that the person does not require protection, the case is automatically referred to an Independent Protection Assessor (IPA).<sup>123</sup>

Once the POE has been completed and the Minister has 'lifted the bar', but before the offshore applicant can submit a protection visa application, they then undergo health, character and security checks.

As outlined in the section on health in this report, all arrivals undergo comprehensive health checks on arrival. Character checks are investigations into previous criminal behaviour prior to entering Australia, and also to criminal activity whilst in detention. People who are convicted in a court of law for escape from detention or involvement in protests cannot pass the character test.<sup>124</sup> Because of this requirement, asylum seekers are thus considered to have a fundamental interest in their own compliance.<sup>125</sup>

---

<sup>122</sup> Jack Hoysted, 2011, *Two-tiered justice: the inbuilt bias in Australia's asylum assessment system* <http://www.lawyersweekly.com.au/blogs/opinion/archive/2011/05/23/two-tiered-justice-the-in-built-bias-in-australia-s-asylum-seeker-assessment-system.aspx> (Accessed 1 November 2011)

<sup>123</sup> DIAC, 2011, *Changes to refugee status determination*, Available online: <http://www.immi.gov.au/visas/humanitarian/pdf/faq-changes-to-refugee-status.pdf> (Accessed 1 November 2011)

<sup>124</sup> DIAC, 2011, Fact Sheet 79 – *The character requirement*, <http://www.immi.gov.au/media/fact-sheets/79character.htm> (Accessed 1 November 2011)

<sup>125</sup> DeHAG, 2011, *Submission to the Joint Select Committee on Australia's Immigration Detention Network*

Security assessments for offshore applicants are a full assessment conducted by ASIO. However, in March 2011 it was reported that ASIO's average processing time for boat arrivals had increased to 66 days. There were 1000 people in detention who had been found to be refugees but who had waited a further year in detention for ASIO clearance.<sup>126</sup> There are people who have been in detention for more than two years because of unresolved security clearances.<sup>127</sup> In response to these issues, DIAC and ASIO undertook to reform this security assessment process. In 2011 DIAC staff implemented the new 'security indicator triage':

*In January 2011 the Australian Security Intelligence Organisation (ASIO) developed an intelligence-led and risk-managed security assessment framework for IMAs who meet Article 1A of the Refugee Convention. Since December 2010 only IMAs found to meet Article 1A of the Refugee Convention are referred to ASIO for security assessment.*

*With the department's support, the new framework was implemented in mid-March 2011. It enabled ASIO to prioritise complex and long-standing IMA cases that required ASIO investigation. ASIO maintains direct responsibility for managing the framework<sup>128</sup>.*

Asylum seekers may apply for judicial review of these decisions.

Asylum seekers remain in immigration detention throughout this process, including judicial review.

Length of time in detention is thus influenced by government policy and processing requirements. Current processing times prior to the POE, IPA and SIT are approximately 12 months. Both the POE and the 'security indicator triage' processes are described as reducing the time spent in detention previously created by delays in these two processes. For example, the new POE is expected to take 7 weeks from the time of the initial interview, and the IPA 3 to 4 months. This doesn't include the time required to prepare the application to the POE. In support of the potential for new security processes reducing delay, even prior to the introduction of the security indicator triage, the Immigration Ombudsman reported a decrease in the number of complaints due to delays in processing security clearances in 2009-10.<sup>129</sup> However, for those who apply for judicial review, the wait will be significantly longer.<sup>130</sup>

The government policy of moving people into community detention (Residence Determination), introduced as part of the *New Directions in Detention Policy* (outlined in Part 1) is also potentially

---

<sup>126</sup> Kirsty Needham, 2011, *ASIO delegates security checks*, Sydney Morning Herald, 27/5/2011

<sup>127</sup> UNHCR, 2011, *Submission to the Joint Select Committee on Australia's Immigration Detention Network*

<sup>128</sup> DIAC, 2011, *Answers to questions on notice for the Joint Select Committee Inquiry into Australia's Immigration Detention Network*

[http://www.aph.gov.au/Senate/committee/immigration\\_detention\\_ctte/immigration\\_detention/submissions.htm](http://www.aph.gov.au/Senate/committee/immigration_detention_ctte/immigration_detention/submissions.htm) (Accessed 19 December 2011)

<sup>129</sup> Commonwealth Ombudsman, 2010, *Annual report*, Commonwealth Ombudsman, Canberra

<sup>130</sup> DIAC, 2011, *Changes to refugee status determination*, Available online: <http://www.immi.gov.au/visas/humanitarian/pdf/faq-changes-to-refugee-status.pdf> (Accessed 1 November 2011)

shortening the time for some asylum seekers in closed detention. As at 18 May 2011, 799 asylum seekers, including 401 children, have been moved into this less restrictive form of detention.<sup>131</sup>

How do these broader events and policies affect processing times and thus length of detention at the Inverbrackie APOD?

In 2011, 4815 permanent visas were granted to IMA clients, with an average processing time of 338 days from the time of arrival to the grant of a protection visa. At Inverbrackie, 140 people have been moved into the community after being granted refugee protection status, and 320 transferred into community detention. However, the AHRC Commissioner noted that that many had been in detention “*for prolonged periods, including some for a year*”.<sup>132</sup> Thus it appears that there is a concerted effort to speed up processing times for people in immigration detention including Inverbrackie, but shorter processing times haven’t occurred in all cases.

### *Concerns about the visa application process*

It is not only the length of detention, but the uncertainty of its length that impacts mental and physical health, and thereby security in detention centres.<sup>133</sup> In Australia, mandatory detention is indefinite. That is, there is no legislation which sets a limit on the time spent in detention. There is some external oversight of the length of detention provided by the Immigration Ombudsman. Since the Palmer and Comrie reports (see Part 1 for more information on these reports), the Ombudsman reviews all cases of asylum seekers in detention every six months. These reviews have raised concerns about individual cases with the Minister about risk assessment factors for detention placement, delays in medical assessments and security clearances, and access to medical services.<sup>134</sup>

As well as the indefinite nature of detention, there have been particular concerns raised about the visa application for offshore applicants. The issue of procedural fairness in the offshore application process exists because the process is ‘non-statutory’, operating as it does in an ‘excised migration zone’. This means that whilst onshore applications are conducted under the Migration Act, the Migration Regulations, and Australian case law interpreting Australia’s obligations under the Refugee Convention, offshore applications are not bound by this legislation and case history. Decision-making in this non-statutory environment is guided by departmental Manuals. Even the Minister’s decision to “lift the bar” is based on ‘public interest’ and there is no statutory requirement for this decision to

---

<sup>131</sup> DIAC, 2011, Response to the Australian Human Rights Commission Statement on Immigration Detention in Villawood, Available online [http://www.hreoc.gov.au/human\\_rights/immigration/idc2011\\_villawood\\_response.html](http://www.hreoc.gov.au/human_rights/immigration/idc2011_villawood_response.html) (Accessed 2 November 2011)

<sup>132</sup> AHRC, 2011, Conditions inside facility ok but detainees still distressed, Available online: [http://www.hreoc.gov.au/about/media/news/2011/75\\_11.html](http://www.hreoc.gov.au/about/media/news/2011/75_11.html) (Accessed 31 October 2011)

<sup>133</sup> UNHCR, 2011, Submission to the Joint Select Committee on Australia’s Immigration Detention Network

<sup>134</sup> Commonwealth Ombudsman, 2010, Annual Report, Commonwealth Ombudsman, Canberra.

take into account protection obligations, though it is reported that these obligations have been taken into account in decisions made since 2009.<sup>135</sup>

The POE process, including access to judicial review, was introduced following a High Court case on procedural fairness. The High Court reviewed two refugee status claims made by Sri Lankan citizens. In November 2010, the Court found they were denied procedural fairness in the review of the assessment of their claims because they had not been given the opportunity to reply to adverse information as required by law.<sup>136</sup>

It is important that the offshore application system reflects procedural fairness. A number of negative status decisions are overturned at the review stage – currently over 60%. This means that some valid applicants may remain in detention for longer times.<sup>137</sup>

As well as concerns about the discretionary nature of the process for offshore applicants, and the criteria and quality of this non-statutory decision-making, there are other common claims about access and fairness such as:

1. The impact of changes in the application process, such as the decision in 2010 to freeze applications by people from Sri Lanka and Afghanistan
2. The criteria for making security assessments is unclear, opaque and lacking in meaningful accountability<sup>138</sup>
3. Offshore applicants' access to legal advice and to their migration agents is limited by the remoteness of the facility and the difficulties of gaining access to Christmas Island<sup>139</sup>
4. There have been reports that not all interpreters on Christmas Island are adequately qualified or experienced<sup>140</sup>

---

<sup>135</sup> Michelle Foster and Jason Pobjoy, 2011, A failed case of legal exceptionalism? Refugee Status Determination in Australia's 'excised' territory, *International Journal of Refugee Law*, published online: <http://ijrl.oxfordjournals.org/content/early/2011/10/24/ijrl.eer025.full> (Accessed 1 November 2011)

<sup>136</sup> Sunili Govinnage, 2011, Refugee Status, *Alternative Law Journal*, 36(2), 128. Available online: <http://www.altl.org/news-and-views/downunderallover/duao-vol-36-2/102-36-2-federal/115-refugee-status> (Accessed 1 November 2011); DIAC, 2010, Questions and answers – impact of the High Court of Australia's decision on Refugee Status Assessment (RSA) clients, Available online: <http://www.immi.gov.au/visas/humanitarian/pdf/client-information-impact-high-court-decision-rsa-clients.pdf> (Accessed 1 November 2011)

<sup>137</sup> Detention Health Advisory Group, 2011, Submission to the Joint Select Committee on Australia's Immigration Detention Network

<sup>138</sup> UNHCR, 2011, Summary Report of the UNHCR-IDC Expert Roundtable on Alternatives to Detention held in Canberra, 9-10 June 2011

<sup>139</sup> Michelle Foster and Jason Pobjoy, 2011, A failed case of legal exceptionalism? Refugee Status Determination in Australia's 'excised' territory, *International Journal of Refugee Law*, published online: <http://ijrl.oxfordjournals.org/content/early/2011/10/24/ijrl.eer025.full> (Accessed 1 November 2011)



In relation to the impact of these issues about the application process at Inverbrackie, the AHRC Commissioner noted that “many [detainees] were also confused over the legal and policy changes that have occurred”.<sup>141</sup>

### *Security staff levels and training*

The role of psychological distress in detention centre security incidents highlights the important role that staff play in security. Occupational health and safety for staff, sufficient staff levels and staff training are key factors in supporting staff in this role. The Comcare Report 2011 notes that within the immigration detention network Inverbrackie has the highest standards of work health and safety.<sup>142</sup> However, a union report for the Joint Select Committee on Australia’s Immigration Network suggests current staffing levels and training at Inverbrackie potentially impacts on the prediction and management of security incidents there.

The Union Report<sup>143</sup> identifies two main issues:

Firstly, understaffing. Because of the nature of the work, although there is a full complement of security staff at the beginning of a shift, throughout the day personnel must leave the site to escort children to school, clients to appointments, and on excursions. For example, for external excursions 5 staff are need for each group of 16 clients. This can lead to situations of understaffing at some points during the day.

Secondly, even the best facilities can’t necessarily outweigh the effects of extended detention on asylum seekers. And for staff, immigration detention facilities are challenging environments in which to work. There is a lot of pressure on staff to prevent suicide and self harm as well as group incidents. Staff support through pre-incident training and post-incident counselling is essential for staff wellbeing, client wellbeing and the security of the facility. However, the level of training for security staff around incidents of self-harm and suicide may not be sufficient for them to adequately deal with these issues.

There are two levels of security staff employed in immigration detention facilities including at Inverbrackie: Client Service Managers (CSM) and Client Service Officers (CSO). CSM’s are required to have a Certificate Level IV in Security Operations (or equivalent) and five years’ experience managing security, and CSO’s a Certificate II in Security Operations (or equivalent) or obtain these within six months of beginning employment. The induction course for CSO’s includes: cultural awareness, mental health and suicide awareness, welfare and occupancy checks, working with children and

---

<sup>140</sup> Yuko Narushima, 2011, Refugee translators “unqualified”, *The Age* (Melbourne), 4 February 2011

<sup>141</sup> AHRC, 2011, Conditions inside facility ok but detainees still distressed, Available online: [http://www.hreoc.gov.au/about/media/news/2011/75\\_11.html](http://www.hreoc.gov.au/about/media/news/2011/75_11.html) (Accessed 31 October 2011)

<sup>142</sup> Comcare, 2011, *Work health and safety investigation: Immigration Detention Facilities*. Available online [http://www.comcare.gov.au/\\_data/assets/pdf\\_file/0010/95986/Comcare\\_Work\\_Health\\_and\\_Safety\\_Investigation\\_-\\_Immigration\\_Detention\\_Facilities\\_-\\_Main\\_points.pdf](http://www.comcare.gov.au/_data/assets/pdf_file/0010/95986/Comcare_Work_Health_and_Safety_Investigation_-_Immigration_Detention_Facilities_-_Main_points.pdf) Accessed 21/09/2011

<sup>143</sup> United Voice, 2011, Submission to the Joint Standing Committee on Australia’s Immigration Detention Network

incident management. (For a full list of the induction course requirements please refer to the Final Report of the Inquiry into Australia's Immigration Detention Network see Footnote 141). There are reported concerns with the adequacy of the training for CSO's, however it is reported that many of these have been acted upon following reports into this issue.<sup>144</sup> There remain, however, concerns about training for staff in working with clients who are suicidal or have other mental health needs. There is a Psychological Support Policy developed by DIAC, and Serco's Keep Safe program, however the Keep Safe program has been criticised for some of its practices.<sup>145</sup> The Detention Health Advisory Group argues that all detention staff should be trained in the appropriate use of psychological support interventions in order to fully implement the Psychological Support Policy<sup>146</sup>.

As the review in this section demonstrates, there are a number of factors that influence the advent of security incidents, both those that affect the wider population, such as protests, and those which primarily affect people in the facility itself like self-harm. The factors at Inverbrackie which create a positive security environment include: its demographic population of low risk families and children, the comprehensive health and wellbeing programs including its environment and location, and the availability of mental health support. The factors at Inverbrackie which potentially contribute to security incidents include: the length of time in detention, clients' concerns about procedural fairness and staffing levels and training.

Having summarised the underlying risk factors for security incidents, in the next section we next consider the actual occurrences of security incidents and their impact on the town.

## Impacts

Table 4 below summarises three tables of figures submitted by DIAC to the Joint Select Committee on Australia's Immigration Detention Network. These tables quantified security incidents from the opening of the APOD to the end of June 2011. Of note:

1. There have been no security incidents that adversely impacted Woodside residents: i.e. violent protests, escapes resulting in criminal activity in Woodside, or terrorist threats.
  - a. There have been 3 incidents classified as attempted escapes from the APOD since its opening in December 2010. None of these involved criminal activity in the local area. One was children picking fruit in the adjacent property.
  - b. There has been one demonstration onsite. This did not involve violence or property damage. It did not impact on the local residents.

---

<sup>144</sup> Joint Select Committee on Australia's Immigration Detention Network, 2011, Final Report, Available at: [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate\\_Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate_Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

<sup>145</sup> Joint Select Committee on Australia's Immigration Detention Network, 2011, Final Report, Available at: [http://www.aph.gov.au/Parliamentary\\_Business/Committees/Senate\\_Committees?url=immigration\\_detention\\_ctte/immigration\\_detention/report/index.htm](http://www.aph.gov.au/Parliamentary_Business/Committees/Senate_Committees?url=immigration_detention_ctte/immigration_detention/report/index.htm)

<sup>146</sup> DeHAG, 2011, Submission to the Joint Standing Committee on Australia's Immigration Network

- c. There have been no records of terrorist activity.
2. There have been security incidents that adversely impact on staff and people in detention such as instances of aggression and assault between clients and between clients and staff.

**Table 4. Security Incidents at the Inverbrackie APOD from 1 October 2010- 30 June 2011**

<b>Category</b>	<b>Critical</b>	<b>Major</b>	<b>Minor</b>	<b>Total</b>
Accident/Injury	22			22
Abusive/Aggressive Behaviour			10	10
Assault	3	5		8
Assault - Not Occasioning Bodily Harm			3	3
Contraband found			4	4
Contraband brought by Visitor			1	1
Disturbance		2	23	25
Damage			5	5
Outage-Security Systems		4		4
Media-Incident of Interest		8		8
Media- Unauthorized presence	5			5
Media- Approach Staff/Clients			1	1
Use of Force		1		1
Use of restraints-Unplanned	1			1
Transfer to Alternative Place of Detention			20	20
Self Harm- Actual	3			3
Self Harm- Threatened		2		2
Property- Missing Money			1	1
Public Health Risk			1	1
Escape- attempted		3		3
Demonstration- onsite		1		1
Voluntary Starvation (<24 hours)			2	2
Voluntary Starvation (> 24 hours)		1		1
<b>Grand Total</b>	<b>34</b>	<b>27</b>	<b>77</b>	<b>138</b>

The Serco Service Delivery Contract classifies incidents into three categories of critical, major and minor for the purposes of reporting timeframes and responses. Based on a general review of incident descriptions in the reporting portal these are some general guidelines for what may be included in the above descriptions of incidents:

1. A serious accident or injury generally involves a person onsite that doesn't require off-site medical attention. Examples include injuries sustained as a result of on-site activities or sports-related activities such as an ankle sprained playing soccer or a hand burnt during a cooking class.

2. Abusive/aggressive behaviour may include verbal arguments between clients and threats/verbal abuse.
3. A disturbance is generally an incident that causes a brief interruption to operations at the site often resulting in a code being called by Serco and resolved quickly. Examples include medical issues not requiring offsite attention, arguments between clients and a brown snake onsite.
4. Damage generally involves damage to an asset on-site or a building. Some examples include a tree falling on a building, a client breaking a window and staff or visitor damaging property.

Although there have been no security incidents which negatively impact on the Woodside and its residents, there has been an impact in terms of fears about security incidents, particularly noticeable in the heightened surveillance of the APOD and local police activity. These fears have been inflamed by the only readily available source of information about security being the media which uses terms like “powder keg” without reference to evidence.

In terms of impacts on the local police, in the first 11 months since the APOD opened, the local police have been called out to the facility on 17 occasions. Of these, 4 required no police action (they included 2 fire investigations and a media disturbance), 1 was cancelled, 9 were handled by Serco and 3 referred to the AFP. In comparison, during the same 11 months in the Woodside Police District as a whole there have been 205 reported offences and 957 taskings of which Woodside patrol members attended 322.<sup>147</sup>

In order to make this comparison more meaningful we can convert it to a rate of patrol responses per 100 residents. The Woodside Police Station District includes approximately 9303 people (the population of the Adelaide Hills Council - Balance SLA (ABS 2011, quoted in Answers to questions on notice received by the South Australian Police on 16 December 2011), and the average population of the APOD has been roughly 300. This gives a patrol response rate of 5.7 per 100 residents of the APOD, compared to 8.7 per 100 residents for existing population of the Woodside Police Station District. Looking at it another way, the APOD accounted for 2 per cent of all police responses in the Woodside Police Station District over the 11 months since its opening.

There has been some impact on the local police in terms of workload through answering calls from residents, responding to the media and attending workshops and consultative groups. They received a number of calls from residents during the initial months after the announcement from people seeking information from them. They have been interviewed in the media about their position on the facility. High level personnel are involved in the State Coordination Group, Regional Managers Group, and ongoing discussions and negotiations with DIAC and the AFP to develop a critical incident management plan. To manage this work, the local SAPOL suggest the appointment of two dedicated police staff who would have an ongoing police liaison role in the facility.

---

<sup>147</sup>Joint Select Committee on Australia’s Immigration Detention Network, 2011, Answers to questions on notice received by the South Australian Police on 16 December 2011, available at [http://www.aph.gov.au/Senate/committee/immigration\\_detention\\_ctte/immigration\\_detention/submissions.htm](http://www.aph.gov.au/Senate/committee/immigration_detention_ctte/immigration_detention/submissions.htm) Accessed 21 December 2011

## Conclusion

As outlined at the beginning of this section, there were three concerns expressed by residents about security:

*Community concern 1: The asylum seekers will escape and commit crimes in the local area*

*Community concern 2: The asylum seekers will stage violent protests and riots*

*Community concern 3: The asylum seekers are terrorists and will breach national security (e.g. by spying on the Barracks; by building bombs)*

There have been 3 incidents classified as attempted escapes from the APOD in the 11 months since its opening. None of these involved criminal activity in the local area. One was children picking fruit in the adjacent property.

There has been one demonstration onsite. This did not involve violence or property damage. It did not impact on the local residents.

There have been no records of terrorist activity.

Security incidents like escapes and riots are most likely to occur under particular conditions: lengthy detention, a high number of negative decisions, understaffing, crowding, poor conditions, poor mental and physical health support. As noted, Inverbrackie is considered to have appropriate standards of care for asylum seekers in that it provides pleasant surroundings, is not crowded, there is good health care support and a good number of activities. The issues of length of stay in detention, experiences of the visa application process, and staff training/understaffing are possible issues at Inverbrackie which may potentially influence security incidents.

The main impact on the local community has been a heightened concern about personal and property security. However, much of this concern is based on beliefs about asylum seekers, crime and terrorism which are proliferated in the media and online, but which are not correct. For example, the claim that 4% of asylum seekers are 'sleeper agents' is absolutely incorrect. Addressing these underlying beliefs is likely to play an important role in reducing the concerns about security expressed by local residents. We suggest some possible ways to do this in the section on Community Relationships.

### **Recommended Options:**

Addressing underlying beliefs about asylum seekers through established and suggested communication channels. Please see the section on Community Relationships for further information on this.

There were two concerns raised by the community about policing:

*Community concern 1: The local police station in Woodside provides a single patrol response only and does not operate on a full 24/7 basis, and this resource alone is not sufficient to protect residents in the event of a security incident*

*Community concern 2: The APOD is on Federal land and therefore not the jurisdiction of the local police, so the protection they can provide to the local community in the event of a security incident is unclear*

Security incidents are handled in the first instance by Serco, DIAC and IHMS using a preventative approach. Where necessary, the AFP is expected to provide policing assistance but a lack of capacity in the Adelaide AFP office means that the local police provide assistance in almost all incidents requiring a policing response. The AFP and State policing services across Australia are currently undertaking a risk assessment and developing a Memorandum of Understanding for the procedure for these critical incidents.

Since its opening there have been 17 incidents where SAPOL was called out to Inverbrackie, which represents 2% of the total police workload. Calls from community members to the police were high during the first months, but have declined since then. There are currently negotiations for two new members of the police force to be dedicated to Inverbrackie.

**Recommended Options:**

Provide a designated contact person for suspected security breaches, and distribute this information widely, particularly to those living close to the facility.

Keep the public informed about security through already established communication channels – see the section on Community Relationships

There was also a community concern that potential and actual incidents are being kept secret from the community.

There are established communication channels for information relevant to security such as the meetings between SAPOL and DIAC, both the regular local weekly meetings and the larger, state and national-level meetings between SAPOL, DIAC, the South Australian government and the AFP. A table of security incidents was also submitted to the Joint Select Committee Inquiry into Australia's Immigration Detention Network. However, most local residents are accessing information about security through the media, or through word of mouth – either in person or online – from people observing the facility, which often emphasises the perspective that the facility is secretive and closed. However, these sources are not always accurate.

People also raised concerns about the effects of the security procedures on people in detention:

*Community concern 1: Serco's security procedures are invasive, e.g. entering people's houses and shining torches in their faces in the middle of the night*

*Community concern 2: The time spent in detention is too long, leading to mental health issues and then to 'security' incidents of self harm and suicide*

In relation to the first comment, it is difficult for us to respond to this in this report given that we haven't spoken with the detainees themselves. In the article in The Courier on the allegations of invasive security checks, DIAC responded that "security guards do not shine torches in people's faces" and that "If checks beyond the final house visit at 10pm were advised...Serco contractors informed the

*household, the security guards knocked before entering, a female officer always entered first...and they identified themselves before entering".*<sup>148</sup> Further, as noted by United Voice and the Detention Health Advisory Group,<sup>149</sup> many staff work extremely hard to ensure clients' wellbeing and do not engage in invasive practices. However there may be room for further training to support employees working with clients who are experiencing psychological distress. This is, however, outside of the scope of this report and we refer people to the references we drew upon in the section on staffing for further information on this topic.

---

<sup>148</sup> N.A., 2011, Immigration confirms extra night checks, The Courier, 17 August 2011.

<sup>149</sup> United Voice, 2011, Submission to the Joint Standing Committee on Australia's Immigration Detention Network; DeHAG, 2011, Submission to the Joint Standing Committee on Australia's Immigration Network.

## Community relationships

In this section we look at three relationships in the community and the social impacts on them:

1. Between the community, DIAC and Serco
2. Between the community and the asylum seekers
3. Between residents

### *Relationship between the community and DIAC/Serco*

Arguably, the relationship between the community and DIAC/Serco has been a long one, conducted through the media representations of asylum seekers and successive governments' asylum policies, legislation and actions prior to the Inverbrackie APOD even being announced. As outlined in Parts 1, 2 and 3, the people in Woodside have read, thought and conversed about asylum seekers, and related topics such as immigration and multiculturalism, for many years.

However, the beginnings of the local relationship and the local debate about asylum seekers may be traced to the announcement and the first two town meetings about the APOD. We thus begin our analysis of the relationship between the community and DIAC/Serco here.

### *The first three months: The announcement and town meetings*

#### *Community concerns about the announcement and town meetings*

There were three main concerns about the announcement and the subsequent town meetings:

1. There was no community consultation on the decision
2. Residents' questions weren't adequately answered
3. The meetings alienated those who were more supportive of asylum seekers and didn't allow for positive voices to be heard

#### *Community consultation*

Whereas in other areas of the report we have identified that people gave different responses to their assessments of the impact of the facility based on whether people supported or didn't support the APOD and asylum seekers, there was an almost universal perspective on the announcement. It was described as "*sprung on us*", "*dumped on us*" and "*not transparent*" by both opposers and supporters alike.

However, how this initial announcement was then dealt with did depend on the speakers' position on the facility. Those who were opposed to the facility sought to have the decision reversed.



Those who took a pragmatic stance to the arrival of the APOD criticised the decision but committed to 'making the decision work for the town'.

*At 5 o'clock on Monday when I drove home from work I heard the news. I suppose like everybody here I was shocked. Uninformed, felt betrayed, angry...but hey let's put us on the map for the right reasons and let's use this for us in the right way...let's start getting what we need and what we want and what we deserve in this decision because we have no say in it going forward from now.*

And those who were supportive were concerned about the influence of the announcement on people's attitudes towards asylum seekers, but were pleased that there was a low security facility being opened up which they saw as potentially more humane for the asylum seekers:

*I'm surprised by what I've heard tonight...and I understand the anger and upset that people have got about not being consulted...I know as well as you do that community consultation is a way of being told what is going to happen. That said I reflect upon these things myself and...if we were ever in the same circumstances as these people...if you were ever in a similar sort of circumstance...what sort of reception would you like?*

Thus it seems that whilst community consultation was a concern raised universally, how people then decided to respond to the APOD was not universal but rather reflected a spectrum from opposition to pragmatism to support.

#### *Answering residents' questions*

As with the announcement, there was a consensus that the town meetings had limited usefulness. Most of the people we spoke with went to the first meeting. Their assessments of the meeting include:

*there were lots of questions but no answers*

*they talked in circles*

*it wasn't productive*

At both meetings, but more so at the Woodside meeting, it was often difficult to raise issues or for panellists to then answer them fully. There was a lot of yelling, a lot of loud applause, and a lot of interruptions. The interruptions were often focussed on the status of the speaker, i.e. whether or not they were locals. For example, people were told to "...sit down, you don't live in Woodside". Many felt that the meeting was stacked and that many people there weren't residents. Who counted as a local, and therefore who had authority to speak, was hotly contested at the meeting. Those opposing the facility countered supportive statements with "you're not a local" whilst those more supportive believed that the meeting was stacked by people from far-right groups who weren't locals.

Interruptions were predominantly against those who spoke in support of refugees. For example, this was the response to a woman from a refugee advocacy group:

*S: My name's S and I was one of the people that first made the Circle of Friends for Refugees in Australia. (APPLAUSE) We have been very successful...*

*Interruption: They're illegal immigrants, they're not refugees. (LOTS OF PEOPLE SPEAKING OVER EACH OTHER)*

*S: As I was saying once you get to know the people...*

*Interruption: Why do they walk down the main street in a burqa.*

*S: If you actually give them a chance you will find that many of them...*

*Interruption: They're illegal*

*Interruption: They're illegal boat people.*

### *Alienating supporting voices*

Those in support of the facility reported they were “excited”, another that “it was a good thing to meet our obligations”. Another said “it’s good to take responsibility for asylum seekers” and that “here is better than Christmas Island or Nauru”. However, they described the meetings as emotional and hostile, with little openness to discussion and dialogue. This group of people felt alienated, not by the governments’ decision-making process, but by the response of other residents at the meeting. People from this group said:

*it was mind boggling, I had no idea of the amount of anger*

*I was shocked at the ‘No Refugees’ and ‘One Nation’ posters – I wasn’t aware that was in the community*

*people who were positive were shouted down*

These residents felt that their values of humanity and morality were not displayed at the meeting. Many were shocked and concerned by the views expressed by others in the town that were less supportive. For example “I was embarrassed by how people reacted and the way they were showing Woodside.”

This concern particularly centred on the first meeting, the One Nation and No Refugees signage, the presence of far-right groups and the views expressed about asylum seekers such as the claim that “they’re taught to beg, borrow and steal from the day they’re born”. It was reported to us that the expression of these sentiments changed how this group views their town. One person said “I just want to move away, I just don’t feel I belong here anymore”.

### **Provisions**

As noted in Part 1, the processing of offshore asylum seekers has undergone significant reforms since 2005. Part of the commitment to these reforms is the move towards APODs and community detention. The opening of new facilities is also a response to pressure on existing facilities created by the increase in asylum seekers coming to Australia, and the increasing length of time in which people are detained. As noted, the site for the Inverbrackie facility was chosen because it was cost effective whilst offering a more humane environment for asylum seekers.

The decision about a new facility is made in Cabinet. According to DIAC's National Communications Unit, cabinet confidentiality prevents early announcements of new facilities. In the case of Woodside, the decision was made in Cabinet, and the State and local governments and residents were informed on 18 October 2010.

Christopher Callinan, the State Director of the Department of Immigration and Citizenship, briefed the Adelaide Hills Council on the 19<sup>th</sup> of October 2010.

The first community meeting was organised by a local woman who later established the Woodside Community Action Group/Fair Go For Communities Group. That meeting, held at the Woodside Institute Hall, was addressed by the then Mayor of the Adelaide Hills Council, Bill Cooksley, other members of the Council (the CEO, the Finance Director, the Community Services Manager), Mark Goldsworthy and Jamie Briggs the local Federal and State members, Christopher Callinan the State Director of the Department of Immigration and Citizenship, and two other members of the South Australian DIAC. There were also invited speakers from the Department of Defence, the police, and education, and a local real estate agency.

The second meeting at Lobethal on 24 November 2010 was also organised by a community member and included a similar panel, with the addition of the Minister for Immigration Christopher Bowen.

These meetings might be described as 'information sessions' rather than community consultation. In both situations, community concerns are potentially taken into account, but at different stages and with different potential outcomes. In the first, concerns are taken into account after the decision but during the planning stage, but community concern will not be taken into account in terms of deciding whether or not a development goes ahead. In the second, concerns are taken into account prior to the decision and may potentially lead to stopping a development. Given the reasons why the site was chosen and why a new APOD was opened, the APOD falls into the former category.

## Impacts

It seems that the form of the announcement and the meetings initially made the job of communicating with the community and establishing positive community relations rather difficult. The two main impacts on the town's community relationships are:

1. For those opposed to the facility, and asylum seeking generally, there was increased mistrust of government, and the proliferation of negative rumours and myths about the facility and asylum seekers
2. For those supportive of asylum seekers (though not necessarily of mandatory detention), a feeling of alienation from other residents in the town with less supportive views

Frank Vanclay (2002, p. 202) notes that "one of the greatest impacts of many projects is the uncertainty or fear associated with a project". This would certainly be an apt description of the impact of the announcement and the following few months, the uncertainty generated mistrust and supported the proliferation of rumours.

Are the impacts of uncertainty long term?

We asked people how they feel about the facility 11 months after the opening of the APOD. Most people said its *'out of sight, out of mind'*. However, they also said that there were certain times when they thought about the facility, for example when driving past it and when there was a new articles in the media. Depending on their position, these visual and media reminders sparked anger or curiosity.

We found that the effect of increasing mistrust and rumours are not necessarily constant, but rather sporadic. Concerns about the APOD and asylum seekers are reactive. They settle down and are no longer part of the conversation, and then re-ignited by particular events both locally such as the attempted escapes or nationally such as the release of expenditure figures for the APOD in the Inquiry into the Immigration Detention Network.

What contributes to changing the impact of uncertainty?

Firstly, time. There was a lot heightened anxiety in the initial months of the announcement about the potential impacts of the APOD. This anxiety is in large part fed by the constant scaremongering in the media and among politicians about asylum seekers. However, in Woodside at least, the community has had the opportunity to see that many of their fears about asylum seekers were not realised. For example, asylum seekers aren't wandering around Woodside committing crimes. Uncertainty was replaced by certainty in most cases. Thus time has inevitably reduced uncertainty.

However, uncertainty remains. A second factor which contributes to its continuation is the continuing reliance on inaccurate information. We found, despite the changes wrought simply through feared events not occurring, that there remain gaps in people's understanding of the APOD and asylum seekers which contribute to continuing mistrust and rumours. We found that most people gained their initial impression of the facility from the first town meeting, and continue to hold the view that the negative predictions made at the meeting about the impact of the facility are in fact what has occurred. This has meant that any rumours that support these beliefs are taken up and passed on. For example, as we've noted in this report, many people we spoke with believed that the pool was closed to the public because of the asylum seekers, or that local business has not benefited, or that a man in Woodside wanted by the police was an escapee from the facility. This kind of inaccurate information increases uncertainty, whilst accurate information – given consistently over time through a variety of sources – is likely to decrease it. For example, we note later in this section the impact that the school newsletters, community talks by DIAC and interactions in the schools and in the facility between asylum seekers and residents have all contributed to the stock of accurate information which has changed people's perceptions and alleviated anxiety and uncertainty.

Is the experience of alienation by supporters long term?

We found that this has also died down.

What contributed to the changing experience of alienation?

This change occurred generally because people made strategic decisions about who to talk to, when, and about what topics. This is a reflection of the broader social norm for harmony *'never talk about politics or religion'*. The experience of alienation for some was also reduced through joining groups who were supportive of asylum seekers, or becoming involved in donations and volunteering. An

increasing presence in Woodside by these groups and the increasing availability of these activities would allow more people to access these groups, further reducing a sense of alienation.

In the next section we look at the continuing relationship between DIAC/Serco and the community over the 11 months since its opening and further address these questions of whether the impacts of the announcement are long term and whether they are changing.

## Conclusion

In relation to community consultation, we note that the facility site was chosen because it provides the most humane and also cost-effective location. The facility itself is built and run according to strict guidelines established through consultation with experts on detention, immigration and mental health. Thus, in these circumstances, prior community consultation is not feasible. However, consultation processes for residents and service providers to raise concerns about potential impacts on them and their town and to address these impacts have been established. We examine these processes in the next section.

In relation to the town meetings, the format made them a very difficult forum for raising questions and for giving answers. As noted, there were a lot of interruptions and loud applause which made it difficult to hear answers and for people to complete their answers. People felt their questions weren't answered, and those more supportive felt alienated by the meetings.

We suggest that there are other approaches to an announcement like this that may be more helpful in answering residents and service providers' questions.

We suggest the following possibilities for making an announcement:

All local stakeholders should be identified prior to the announcement. Then, using this list of stakeholders, simultaneously with the announcement in the media, all these stakeholders should be contacted immediately via fax, phone and email with a pre-developed information pack.

Included in this information pack should be:

1. Contact details for designated persons who are knowledgeable about the issues and who are skilled at working with communities and stakeholders.
2. Answers to the questions communities want answered. This social impact report gives a good indication of what these questions will be:
  - a. Health:
    - i. provisions for the asylum seekers
    - ii. use of local health providers
    - iii. communicable diseases
  - b. Education:
    - i. where the children will be educated
    - ii. use of local education providers

- c. The local economy
  - i. likely impacts
  - ii. how local businesses can get contracts
  - iii. how people can apply for jobs
- d. Security
  - i. what are the security provisions
  - ii. how will the local police be involved
- e. Relationships
  - i. how will people be kept informed
  - ii. how can people visit, volunteer and donate

The answers to many of these questions require substantial background information. For example, in this report, in order to respond to community concerns about security, we outlined the comprehensive security plan for immigration detention facilities, including the importance of health and wellbeing and length of detention to security. This necessitated also informing people about the visa application process, about which there is limited knowledge. This kind of background knowledge is critical for broader understanding and needs to be included in information packs and other sources of information, such as meetings.

As part of identifying and informing stakeholders, it's very important to identify pre-existing local issues and have developed strategies for addressing these prior to making the announcement. These pre-existing issues include: the quality of health care and education, local employment and the local economy, crime and security, and local access to education opportunities. These are State issues, and it would be helpful to have input from the relevant departments into these issues. We note that there were representatives from education and the police at both town meetings. However, including in the information package links to relevant information at the state level about health, education and security resources could disseminate this information more widely and in a more easily accessible format than the meetings.

Again, this report provides a comprehensive guide to identifying local issues, and how these may impact on the reception of asylum seekers and immigration detention facilities. It is important to identify and analyse:

1. The social and economic status of the area
2. The previous experience of diversity
3. Identity and values

Using security again as an example, two issues impacted on people's assessment of security:

1. Exposure to ongoing discourses that criminalise asylum seekers

2. The local police station in Woodside provides a single patrol response only and does not operate on a full 24/7 basis

In each instance, there must be prior consideration for how these issues can be addressed. In this example, it would be useful to have countering information to hand about asylum seekers and crime that could be used in response to these questions. Also, it would be useful to inform the police at the time of the announcement and set up a meeting with them immediately, and then tell people about this meeting and the outcomes arising out of it, so they understand that the processes are occurring.

In response to an announcement like a new detention facility, people will draw on their existing position on asylum seekers. These views strongly influence people's concerns about the impact on their town. As people see the decision to have an APOD in their town as part of a wider government policy on asylum seeking, it is vitally important to include information about the immigration system and asylum seekers in the information packs. This includes information about asylum seekers legal status, the visa application process and the numbers of asylum seekers arriving in Australia.

It is this 'whole picture' information that can be provided to stakeholders at the time of the announcement that will be an important source of context. Which means that stakeholders will be in a position to think through themselves, and also communicate to others, the 'why' and the 'how' behind, for example, the decision to build a low fence, or the need to spend money on health and wellbeing.

### **Recommended Options for the announcement:**

We note that many of these things happened in Woodside over time, but it would be of benefit if these were established much more quickly – this could prevent the escalation of rumours.

1. The set up team for the new facility must be well informed and have the necessary information to hand. Preparation for the announcement should include:
  - a. identifying key stakeholders,
  - b. identifying key local factors (socioeconomic, diversity, identity),
  - c. identifying common community concerns about asylum seekers.

Including experienced people in the set up team who have been involved in other announcements and forums would also assist the preparation, they will know what questions people will ask, and how best to answer them.

2. Send information packs via fax, email and phone to all key stakeholders and groups in the community at the time the announcement is made. These information packs must comprehensively answer community concerns and include relevant contextualising information about the immigration detention system.
3. Immediately establish information sessions with key stakeholders and service providers and provide feedback to the community of the outcomes of these meetings.
4. Immediately establish information sessions for community members. Although a larger meeting is probably unavoidable, also establish a series of smaller meetings with different groups to allow a wider range of voices to be heard.
5. Establish and widely advertise various contact points for people to access accurate information: in person, online, on the phone, in the media.

### *The first 11 months*

#### **Concerns**

There were two concerns about the ongoing relationship between DIAC/Serco and the community:

1. That there isn't any ongoing communication and relationship-building
2. The existing communication channels aren't sufficiently accessible, diverse or provide the needed information

Many of the people we spoke with reported that they didn't know of or access any official ongoing sources of information about the APOD. Based on this, people described the APOD as "*not*



*transparent*” and operating *“behind closed doors”*. This lack of information was interpreted as either being used to obscure poor treatment of asylum seekers, or to prevent residents from knowing how many benefits they were getting. However, there was a general consensus that *“information is not getting out”* despite the different attributions of why this was the case.

In the absence of official communication, most people cited word of mouth as the main way they obtain information about the APOD. This is through, for example, talking at sporting events for people involved in sporting clubs, with other parents at school pick up and drop off times, and in local venues like the pub.

However, not all of this information is accurate. For example there was a rumour that the APOD was using helicopters, however this wasn't the case. It may have been that there was a helicopter as part of a rescue crew after an accident on the road to the APOD. But many rumours are started this way, someone sees something in the facility, and interprets it in a particular way, and passes this on to other people.

In relation to accessibility, residents referred to a reliance on electronic forms of communication. One resident told us that when he asked for information it was suggested he go to the DIAC web page. However, he pointed out to us that not everyone in Woodside has a computer or the internet, particularly the older residents, so there need to be sources of information other than just the web page.

## Provisions

Although most people said there was no ongoing source of official information about the facility, and that what information there was required internet access, the Inverbrackie DIAC team have established a number of communication and relationship-building initiatives using multiple communication channels. We outline these in this section. We discuss the discrepancy between residents' perceptions of no information, and the number of communications outlined here. We put forward some possible reasons for this gap.

### *Federal, State and local level groups and meetings*

A Regional Manager's meeting organised by the Adelaide Hills Council was held on 1 November 2010 for all government and non-government agencies potentially impacted by the APOD. The meeting included the Adelaide Hills Council, the Regional Development Authority, Housing SA, Families SA, Anglicare, DECS, Woodside Primary School, the CFS, Mt Barker Hospital, and Country Health SA. This meeting was an opportunity to inquire and ask questions, identify organisational capacity and needs (e.g. Mt Barker Hospital had rooms/space capacity, but needed staff) and also an information session on the APOD: the clients, the processes, the provisions (e.g. health and education).

There is also a higher level series of meetings of the State Coordination Group for all South Australian Government Departments potentially impacted by the APOD. This group first met on 27 October 2010. It was led by Premier Mike Rann and coordinated by Sandy Pitcher from the Department of Premier and Cabinet. It was an interdepartmental committee that included DFEEST, AG, DITE, SA Health, DECS, Finance, CFS, and a legal team. This interdepartmental committee met weekly in the months following the announcement.

From these meetings of the State Coordination Group a Memorandum of Understanding has been established with each of these bodies, except for the South Australian police force, which is still in process at the time of writing. Details of these negotiations with the police are provided in the section on Security.

These meetings are evidence that governmental provisions for minimising negative impacts on local services were already in train very soon after the announcement. However, as with other committees and groups (see, for example, the Community Reference and Consultative Group in the next section) the information about this was not getting back out into the community. The meetings and their outcomes weren't reported in the media, and none of the residents we spoke with knew anything about them. Without this communication the perception that 'nothing is being done about our concerns' remained widespread.

### *Community Reference Group and Community Consultative Group*

The Community Reference Group (CRG) was an invited forum for key community stakeholders representing the full spectrum of views in the area to meet with each other and with DIAC and others involved in the APOD in order to raise questions and concerns and have these answered. The invited list was drawn up by the Adelaide Hills Council. It included members of the local Rotary Club, Woodside Commerce Association, Woodside Community Action Group, local councillors, the primary school and health services. The group first met on 4 November 2010.

Once the facility became operational and was housing asylum seekers, the CRG became the Community Consultative Group (CCG). Members of the CCG are required by DIAC to sign a confidentiality agreement. This agreement has at times been perceived as a 'gag order' designed to suppress vital information.<sup>150</sup> This perception has influenced engagement with the CCG. For example, two people reported to us that they were asked to join the CCG but declined because of the confidentiality agreement. Both those who declined were not supportive of the facility, and believed the agreement prevented them from giving information to people outside the group. However, the confidentiality agreement requires only that members do not reveal information that could individually identify asylum seekers. Those who are members of the committee report that this confidentiality agreement has not prevented them from communicating important information to the wider public. The minutes of the meetings are publicly available.

The CCG is independently chaired by Professor Nicholas Procter from the Minister's Council on Asylum Seekers and Detention (MCASD) (formerly known as the Council for Immigration Services and Status Resolution (CISSR) ) (he is also a co-author on this report). The CCG includes representatives from The Woodside Barracks, Country Health SA (including Mt Barker Hospital), Woodside/Mt Barker Police, the Adelaide Hills Council, the Inverbrackie Good Neighbour Council (see below for more information on this group), DECS, the Ombudsman's office, community representatives, DIAC, Serco and IHMS. During these meetings, the Inverbrackie staff from DIAC, Serco and IHMS report on current numbers and demographic make-up of people in the facility, as well as ongoing programs, events and issues. Members of the group ask questions about any issues they have. There was also

---

<sup>150</sup> Brad Crouch, 23/1/2011, Inverbrackie panel to sign 'gag orders', *Sunday Mail*; Sunday Mail 8/5/2011, *Inverbrackie a powder keg say police, amid claims violent incidents are being covered up*

an opportunity for CCG members to speak with the Minister, who met with the CCG on 4 August 2011.

Those who went to the CRG meetings said that those opposed to the facility dominated the proceedings, however this shifted over time so that more diverse voices were heard. Members of both the CRG and CCG found the meetings a good source of useful information that answered many of their questions. They say that the information provided there is very useful and allayed their concerns and also those of their organisation.

However, there seemed to be few ways in which this information was disseminated to the broader community. Community representatives noted that people rarely approach them to bring information to the meetings. They are sometimes proactive in seeking out this information, for example one representative spoke with a nearby resident prior to the last meeting. Yet they also note that their role is perhaps not well known, and they felt that they wanted to do more to communicate the information from the meetings back out to the wider community.

While the minutes are publicly available, they are not readily accessible.

**Recommended options to improve communication between the CCG and the wider community**

1. Including relevant information (e.g. a question raised by a community representative and the answer given) in the *Woodside Informa* column and also making the minutes accessible online and in hard copy at the local library.
2. More widely advertised avenues for people to contact the community representatives, e.g. a collection box in the library for written submissions, an advertisement in the local paper (also perhaps part of the *Woodside Informa* column), an advertisement on the Inverbrackie Good Neighbour Council website.
3. Although there are currently few people contacting community representatives directly with their concerns, there are other means of accessing this information. These include media reports on Inverbrackie, letters to the editor, websites of anti-asylum seeker groups including local groups against the APOD, government committees such as the Joint Standing Committee on Australia's Detention Network, and local groups such as the Circle of Friends. The CCG might usefully draw on these other sources of information.
4. As noted, the issues about the APOD are linked to political positions on asylum seeking. It is important that CCG members are also well versed in these issues with the latest information that is not readily accessible through popular media. Thus, we also suggest including in the meetings/meeting preparation a summary or list of media reports and other relevant developments in asylum seeker processing such as new legislation and new research reports.

### *Inverbrackie Good Neighbour Council (IGNC)*

A local resident initially put forward a proposal for a Good Neighbour Council at a Community Reference Group meeting. The idea was supported by DIAC, Serco, the Adelaide Hills Council and the Community Liaison Officers. Together, they developed the Inverbrackie Good Neighbour Council. The Council's vision is to *"extend the hand of good neighbourly relations, facilitate events and share information with the wider community in relation to asylum seekers housed at the Inverbrackie Alternative Place of Detention (APOD) Facility"*. It is non-political, secular and does not advocate for individual refugees.<sup>151</sup> There are 10 committee members on the IGNC, and a representative from Serco, DIAC and the Adelaide Hills Council, on the Board. The DIAC member does not have voting rights to ensure that the Council is non-partisan. The first meeting was held in December 2010, and the group was incorporated in 2011 with the first committee meeting as an incorporated body occurring in April 2011.

The IGNC coordinates donations and volunteering, and also organises events for the asylum seekers and residents. We discuss these roles further in the section on relationships between the community and the asylum seekers.

It also sees its role as being a conduit for information through its website, e-newsletter and media appearances. For example, the website has a FAQ section where people can access information on asylum seeking, DIAC and Serco. They had a column in the July issue of the Woodside Informa. There have been two articles on the Council and its work in The Courier.

However, few people that we spoke with had any knowledge about the IGNC and its role, including people who were very supportive of asylum seekers. The IGNC note that there is more to achieve in terms of communication. The Council is planning information forums for community members, a newsletter that is available on and offline, and a flier for clients in the APOD introducing them to the Council and its services. The Council is also seeking to recruit a committee member with media and social networking skills to enhance its communication in these areas as well.

The IGNC is particularly well placed to put a human face on asylum seekers. Their newsletters, currently only available online, share personal anecdotes and experiences from their events held in the APOD (see section on Relationship between Community and Asylum Seekers below). We note that one resident we spoke with, when asked what kind of information would be useful, said *"personal stories"*. The IGNC has unique access to such personalised and positive stories, and they are likely be welcomed if they could be shared more widely.

---

<sup>151</sup> Inverbrackie Good Neighbour Council, 2011, *Terms of Reference*, <http://www.inverbrackiegncc.org.au/about-us-1/terms-of-reference>

**Recommended options to improve communication between the IGNC and the wider community**  
(we note these are already part of the IGNC's communication plan and are underway)

1. Meet with local community groups, both personally, and in larger workshop or forum-style meetings, to provide information about the IGNC and its role, and to liaise with local groups about how they might become involved.
2. Include a person with media experience on the committee to develop media releases that appeal to the media, and to develop relationships with local media.
3. Develop and distribute a brochure that is available online and also distributed in hard copy offline to people in the community, perhaps as an insert in the *Woodside Informa*, or as a letterbox flier.
4. In the media releases and newsletters, including personal stories about asylum seekers

*Other communication: website, community liaison officers, community group talks, newspapers and newsletters*

*Website*

There is a website for the Inverbrackie facility which is part of the Department of Immigration's website (<http://www.immi.gov.au/managing-australias-borders/detention/facilities/inverbrackie-bulletin/>). The Inverbrackie website includes media releases and fact sheets about the facility.

This website wasn't set up for several weeks following the announcement. As present, the information is not up to date. As at the time of writing this report, the site hasn't been updated since early 2010. It also isn't comprehensive. For example, the link to video footage of the facility isn't accessible from this web page. Rather, information about the facility – much more up to date than that available on the Inverbrackie Bulletin website – is peppered throughout the wider DIAC site. To find up to date and more extensive information about the facility requires a search for "Inverbrackie" on the larger departmental website.

This web page could be more effective as an information source if it was a 'one-stop-shop' for all information about Inverbrackie. It may also have been useful for it to be available immediately following the announcement of the facility.

There is an Inverbrackie email box ([inverbrackie@immi.gov.au](mailto:inverbrackie@immi.gov.au)). At the time of writing this report, the mailbox receives 2 to 3 inquiries a week, this has reduced considerably from 50 to 60 per week in the months immediately following the announcement. However, email inquiries do spike in response to media reports.

### *Community Liaison Officers* <sup>152</sup>

The Adelaide Hills Council requested the Department of Immigration to provide funding for a twelve month community liaison role, which they proposed to help manage the response to the facility and its impacts on the town. Subsequently, the Community Liaison Officers (CLO) position started on 9 December 2010. Their role was to work in collaboration with DIAC, State Agencies and the local community to:

1. Act as a liaison point between all stakeholders including the Department, Council and the local community, having regard to the social, cultural and economic impacts of the Inverbrackie APOD
2. Seek to mitigate negative and support positive aspects of the Inverbrackie APOD

However, prior to their appointment, a lot had already happened: two town meetings; the Circle of Friends gathering; three meetings of the Community Reference Group; the formation of the Woodside Action Group. There was a sense that this role “*missed the crucial period*” during the initial weeks when opinions were formed and relationships begun.

On their appointment, the Adelaide Hills Council put an article in The Courier announcing the CLO role, with a picture and contact information. This led to an “avalanche of phone calls”. Prior to this, the only contact point was the email address for the Inverbrackie mailbox noted above. There were reports in the initial months that emails sent to this address weren’t answered. However, a positive outcome from the appointment of the CLOs was that they provided a personal contact point and were in a position to answer calls and emails.

They report that the phone calls were mostly from people wanting to volunteer and donate.

The CLOs were also proactive in contacting the community. In December, a CLO drove around to each house surrounding the facility to talk with residents about their concerns. They also contacted advocacy groups such as the Woodside Community Action Group.

The CLOs liaised with the Woodside Defence Families Association, the quilting group and a twin’s playgroup who were using a hall in the Barracks to find new permanent homes and interim spaces until then.

They organised three forums for community groups. These forums had invited guest speakers on the immigration process, and education, welfare and wellbeing programs in the APOD. The CLOs also held four drop-in “Coffee and Chat” information sessions at local Hills libraries.

The forums were well attended and those who attended reported that they were extremely useful. One participant noted that their most valuable contribution was in ensuring that those who went to them became viewed in the wider community as reliable sources of information. Not only were those who attended able to provide accurate information to locals in other informal settings, like around the BBQ or at the soccer, they were able to say ‘yes I’ve met Steve Johnson’ or ‘I spoke with the people at Serco’. This gave the facility a human face, and created wider links in the community

---

<sup>152</sup> Adelaide Hills Council, 2011, *Community Liaison Report*

between the facility and key people in the town. This meant that people in the broader community would seek out people who went to the forums to give them accurate, reliable information. It was felt that with the demise of these community group forums, this opportunity to facilitate communication was lost.

The CLO position ended in April 2011. The liaison role is usually done 'in house' by DIAC employees, for example it is this way in Darwin, so the Woodside position was unique. Whilst having the role filled by people not directly employed by DIAC was a good way to ensure the CLO was embedded in the community, there were difficulties in the setting up phase with different priorities between DIAC and the CLOs. These differences were due to:

1. the intense pressure on DIAC and Serco staff during the set up phase of the facility to meet very tight deadlines with a small staff
2. establishing ongoing lines of communication as staff positions and roles changed during the set up phase

Further what was required in the CLO role also changed over time resulting in a reduced need for a full time position. For example, their role in relation to donations and volunteering was taken over by the Inverbrackie Good Neighbour Council. The need for someone to be answering constant questions is less urgent now, as the number of inquiries has died right down. The role is now more about ongoing communication and stakeholder relations which we understand is now being handled in house.

#### *Community group talks*

The staff at DIAC, including the Regional Manager, have been guest speakers for a number a groups interested in learning more about the APOD and the immigration system. Inverbrackie DIAC staff have spoken at:

1. Schools in the Hills and in Adelaide (e.g. Hahndorf)
2. Local Lions Clubs (e.g. Lobethal)
3. Local Rotary Clubs
4. Neighbourhood/Rural Watch
5. The Hills Circle of Friends
6. The Community Forums organised by the Community Liaison Officers (see previous section)

These community group talks are reported as being very effective. They are an opportunity for staff to share their in depth knowledge of immigration gained through long experience of working in the sector. A more personal format allows people in the Woodside and wider community to "*drill down into the issues that matter to them amongst people they feel comfortable with.*" They are reported as an opportunity for different groups to ask questions that are specific to their interests and concerns.

People who have attended these talks say they are very informative, and gave a face to the facility which it hadn't had before. They felt more comfortable about the facility, and it alleviated many

negative misconceptions about the people in the facility and those who work there. For the speakers, they find that these talks are a great opportunity for them to be welcomed as part of the community, a way to meet locals and create new relationships: “*knowing more people who say ‘hi’ when we walk down the street*”.

*Newspapers and newsletters*

The DIAC team at Inverbrackie have started a column in the *Wooside Informa* column. The first one was in the July issue, and the second, longer one, in the September issue. These columns give information about the people in the centre and talk about issues relevant for the community, such as the progress of this social and economic report.

A newsletter for local distribution is also being produced.

- Effective interventions already in place**
- 1. Talks to community groups
  - 2. Column in the Woodside Informa
  - 3. Newsletter for local distribution

- Recommended options for other forms of ongoing communication**
- 1. The Inverbrackie website be re-designed to be a one-stop place to access all relevant information from one page
  - 2. A continuing Community Liaison position with modified job description to reflect the ongoing rather than start-up phase of the facility.
  - 3. Re-establish regular community forums similar to those run by the Community Liaison Officers

**Impacts**

There were a number of people who we spoke with who reported positively on DIAC’s communication and community engagement. For example, one person we spoke with had read the July and September issues of the *Woodside Informa* which included the DIAC column on the APOD. She said she found them very useful. People who went to the community forums held by the CLOs said that they felt more informed and that others in the community saw them as a reliable source of information. They particularly liked that they had personally met Inverbrackie management. Business owners and service providers who have contracts with DIAC and Serco note that communication channels, whilst difficult at first, have improved and most issues were sorted out quickly and easily.



They report a good working relationship with the APOD. Educators and health service providers report the same. Some residents noted that they liked seeing the APOD management in town and being able to ask them questions over lunch or in the supermarket, or simply to say 'hi how are you'.

It seems that communications and relationships with DIAC/Serco are noticed and appreciated, but there also seems to be a silo effect where this is only affecting some people in the community and not others. As noted many of the people we spoke with said they didn't have a way of getting information about the facility. However, as can be seen from this overview of communication initiatives, there are a number of ongoing sources of accurate information.

Those who reported good relationships and who felt they had good information about the facility were:

- a. service providers
- b. business owners with contracts with Serco
- c. schools and therefore parents and the wider school community e.g. the school board
- d. businesses that DIAC/Serco staff frequent
- e. members of the community forums, Community Consultative Group and Inverbrackie Good Neighbour Council
- f. members of groups who DIAC staff had addressed as guest speakers

Those groups who more often report they don't have access to ongoing official sources of information include:

- a. Elderly residents.
- b. People who are supportive of asylum seekers but not engaged with local advocacy groups or the Good Neighbour Council.

Those groups who most often report that they are not satisfied with the communication and community engagement strategies undertaken by DIAC/Serco:

- a. People who remain strongly opposed to the facility and asylum seekers. In general, this group report their concerns have not been allayed by the information provided so far.
- b. Some refugee advocates. DIAC/Serco are viewed as unreliable sources of information and asylum seekers as the more reliable source.
- c. Some people who wished to interact with asylum seekers in the facility but who feel they've been 'turned away', for example people who reported that their donations had been refused.

What are some possible explanations for these differences in assessments of DIAC's communication and community engagement? We suggest there may be several possible reasons for this.

1. *Timing and staffing.* The APOD has only been running for 14 months, and it's been 17 months since the announcement. However, the staff who are really proactive in communication (because that's their role) only started in March of 2011. So there was a time lag where people in the community, particularly just after the announcement, felt they weren't getting any answers. Even the CLOs didn't start immediately but six weeks after the announcement. Timeliness of communication is critical, with the first few months the most important time for creating good community relationships.
2. *Proactive and reactive approaches to getting information.* Although there have been changes in communication channels and the availability and type of information since the announcement and initial months, we found that many people had not sought out other information since the initial community meeting. Even articles in the media, including the most inflammatory ones, were not necessarily widely read. Residents are now less likely to seek out information. As noted, there has been a significant decline in phone calls to the Council, emails to DIAC and few people approach community representatives. Reaching out to the community, rather than waiting for them to ask questions, is important.
3. *Communication filters.* For many people, the information that they drew upon in their thinking about the facility reflected pre-existing filters such as their political persuasion and their political agenda in the current situation (i.e. whether they wanted the facility to stay or go). Their arguments draw upon widely available discourses about asylum seekers disseminated through the media, electronically and in political speeches. Similarly, for many supporters, their previous experiences with mandatory detention under previous governments influence how they viewed the present facility. Factual information is critical in redressing misinformation. Perhaps this isn't a role that DIAC can play, but groups like the Inverbrackie Good Neighbour Council are well placed for this kind of work, as are the schools and churches.
4. *Accessibility of communication channels.* Different communication channels are more accessible to some groups than others. In particular, online contact through email and websites is not accessible by everyone in the community. In contrast, the most widely distributed source of local information is the *Woodside Informa*. Thus, a wide variety of ways to contact DIAC that include both electronic and other forms of media are most useful to cater for diverse groups' access to information. As noted, DIAC is using the *Woodside Informa* to inform the community about the APOD, as well the other channels noted in this section.
5. *Procedures for interactions.* These weren't established straight away. There were an unprecedented number of offers of assistance. Many people who wished to help saw the facility as being similar to charities like St Vincent de Paul or the Salvos, who take donations of any goods and give them to families in need. However, as is outlined in more detail below, the APOD is a different kind of facility, and the opportunities for donations and volunteering are quite different from charities that people may be more familiar with. The issue of volunteering and donations has been addressed by the IGNC, however not many people know about this group. It may also be that some groups who were particularly active in the initial stages of the drive for donations and volunteering feel excluded and sidelined by the

IGNC. Engaging with these disaffected groups could help smooth relations here and we've addressed this in our recommended option below.

**Recommended Option:**

We've covered recommended options for communication, such as multiple channels, proactive reaching out to the community and addressing gaps in factual information, elsewhere in this section. However, the issue of understanding what type of donations and volunteering are needed hasn't been addressed in our previous recommended options boxes.

Thus, we would suggest a panel including IHMS, Serco, Ops Team, case managers, and DIAC forms and is engaged to talk about what they do and where volunteers/donations fit within this system. We understand that a similar panel has already been run in the universities who were keen to volunteer which was very effective in streamlining donations and volunteering whilst maintaining good relationships between those who attended and DIAC/the APOD.

## Conclusion

The communication between the APOD and the community was hampered by the way the initial announcement was made and the lack of information and good contact persons in the first few months. This situation has changed significantly since this time, with numerous good practice communication initiatives being undertaken by the Inverbrackie DIAC team. These have been more effective for some groups than others. The existing gaps in communications may be addressed through the numerous recommended options offered throughout this section.

In relation to the concern about communication channels, as reviewed here, a variety of communication methods are being utilised. We have recommended several others, or ways to improve existing communication.

## *Relationship between the community and the asylum seekers*

### *Concerns*

The main concerns about the relationship between the community and asylum seekers focussed on opportunities for interaction.

Some visitors to the facility reported that they have difficulties accessing people in the centre. The requirement to know the name of the family or person they wish to visit can make it difficult to enter the facility. One person said that 'sometimes Serco say "your name isn't on the list" after they've organised to visit. They felt that there is a general atmosphere in which people are prevented from visiting.

However, this hasn't been a universal experience. Others report that visiting and interactions are supported and facilitated by staff at the facility.

### *Provisions for interaction*

There are six ways in which people from the community may come into contact with asylum seekers in the APOD: as a visitor, as a volunteer, through organised events, during excursions and appointments with service providers, through the schools and through their work. People from the community can also interact indirectly with the asylum seekers through providing material or financial donations.

Firstly, visiting.

Serco are contractually obliged to provide access to visitors, including visitor accommodation, which has now been built. A Client Welfare Officer runs the visiting program. In addition, the Client Service Officers and Case Managers report to the Senior Care Manager if clients are receiving visitors, and they may, in consultation with the Senior Manager and DIAC Regional Management, organise visits from appropriate community groups.<sup>153</sup>

Potential visitors to the facility need to complete an application form available at <http://www.immi.gov.au/managing-australias-borders/detention/visiting/visiting.htm> However, the Immigration website for visiting is reported as not being the best place to apply to visit. People told us that the forms from here are not passed on to the Client Welfare Officer. People who visit from Circle of Friends report that they email the application form directly to the CWO.

Visitors to the APOD must:

1. Submit their application form allowing plenty of time before the visit
2. Be visiting a particular person or family in the facility
3. Have consent for their visit from that person or family
4. Complete a compliance form on their first visit
5. Take photo ID

Visiting hours are 10.30 - 12.30pm and 1.30 - 7.30pm each day.

Many visitors are members of the Circle of Friends. The Circle has developed a list of contacts of people and families in the facility. They provide contact names, information and guidance for people interested in becoming visitors. Circle of Friends visitors spend time with people in the facility, they take in gifts for people and families, advocate on behalf of particular asylum seekers and raise money and support for asylum seekers through their network. Their contact with asylum seekers in the APOD (and other facilities) is their main source of information about what is happening in the centre, and they provide this information to other members and interested people. This is their website:

<http://hillscircleoffriends.org/>

---

<sup>153</sup> Serco, 2011, Submission to the Joint Select Committee on Australia's Immigration Detention Network

Secondly, volunteering.

Potential volunteers need to complete an application form at the Inverbrackie Good Neighbour Council website: <http://www.inverbrackiegnc.org.au/getting-involved/volunteering-opportunities>

As noted in the previous sections on health and education, professional staff adequately provide the asylum seekers' physical and health needs. Given this current level of care, the APOD volunteers are people with particular skills, such as art teaching, that supplement the available welfare and wellbeing programs. The IGNC website posts advertisements for these volunteers.

Volunteers must:

1. Undertake an Australian Federal Police (AFP) check
2. Abide by a Confidentiality clause
3. Undertake an interview with Serco
4. Undertake an induction to the Facility
5. Abide by a facility Code of Conduct

Unfortunately, despite our best recruiting efforts, no volunteers at the facility approached us to be part of this research project. However, we understand from speaking with volunteer organisers that the IGNC process works well. Prior to the establishment of the IGNC there were initial set up issues for volunteering. Not all people who offered to volunteer were able to work in the facility. This was for two reasons:

1. Volunteers need to have specific skills that aren't already being provided – there are lots of life skills programs being run in the centre that are contractually required and therefore provided by professionals – thus the volunteer positions are for people who have skills not already covered.
2. There are also differences in timing of activities in the APOD and volunteer availability. A lot of activities in the APOD are run during the week, whereas few volunteers have time available during the week, only weekends and evenings.

The third way to connect with asylum seekers in the APOD is through events organised by the Inverbrackie Good Neighbour Council. Groups coming in for these events must supply a list of names one week prior to their visit, DIAC run this list through intelligence, they allocate extra staff for that day, the visitors have an induction on evacuation and other important processes, and arrive prior to the time with a photo ID. There are no cameras, no phones, and visiting houses is not permitted.

The fourth way in which asylum seekers and community members come into contact is during excursions and medical appointments. Asylum seekers have been on excursion to: SA Museum, roller skating, Mt Lofty Gardens and Summit and Adelaide Botanic Gardens, the movies, Gorge Wildlife Park, Blackwood Recreation Centre, Amy Gillett Running Track, the Rocking Horse and the pool.

It is also possible for clients to leave the facility with a designated person', someone who is authorised to accompany a client while they are not in the detention facility. For example, the

teachers in the schools hosting Inverbrackie students are 'designated persons'. It is also possible for asylum seekers to participate in volunteer work. They may leave the facility under supervision to participate in community-based volunteer projects, for example clients in Queensland volunteered to help rebuild flood-affected areas after the Queensland floods. At Inverbrackie, there is a proposal for clients to undertake working bees at local school or Landcare, like the tree planting day outlined later in the section on 'Impacts'. However, clients cannot partake in activities that would usually attract a wage.

The fifth place where asylum seekers and community members interact is in the schools. As noted in the section on education, the children from Inverbrackie attend local schools. There are lots of opportunities for interaction in this space: in the classroom, in the playground, at assemblies, sports days and camping trips, and through the buddy system. Parents of the Inverbrackie children and staff interact through parent-teacher interviews and through visits to the school, as well as teachers' reports, photographs and DVDs of their children's experiences. There has also been a cultural night at one school which both parents and children from Inverbrackie were able to attend with local parents and children.

Finally, donating is also a form of interaction, albeit without personal contact. Since the announcement of the APOD at Woodside, a lot of people in Woodside and the wider Hills area expressed their interest in donating goods. The Community Liaison Officers' (CLO) Report <sup>154</sup> notes that almost all of the calls they received were from people who wanted to help. Initially, people were contacting Serco or DIAC directly, or, when the CLOs started, them, as well as established community organisations like the Lutheran Church, to offer donations. There were several instances where people took donations to the facility itself, but were 'turned away'. Goods were being donated but were not needed by the asylum seekers and kept in storage in various places of whoever had room. These refusals have been sometimes been interpreted as a sign that the APOD is '*secretive and inaccessible*' or that DIAC and Serco are '*not providing for asylum seekers needs*'.

However, the donations were refused because DIAC, Serco and IHMS each have contractual obligations to provide all the basic necessities for the asylum seekers. The misunderstanding about donations potentially arose because of a general misperception that the APOD is similar to charities such as St Vincent de Paul, who regularly seek donations of goods and have people from the community volunteer in various capacities. The APOD isn't like that. It is a government-run detention centre where clients' physical, mental and emotional needs are provided in the main by professional staff.

For example, in addition to the programs provided by Serco listed in earlier, they are also contractually obliged to provide:

- a) accommodation including bedding and bathroom facilities;
- b) catering, which includes the provision of a minimum of three meals per day and the accommodation of particular requirements such as halal, kosher, and vegetarian
- c) interpreters
- d) an income allowance program and operating shops and a hairdressing service

---

<sup>154</sup> Adelaide Hills Council, 2010, *Community Liaison Report*

- e) clothes, footwear, toiletries, hygiene products and other personal items.<sup>155</sup>

So, for example, there were several donations of food made to the facility. However, all food for the asylum seekers is purchased through the centre. Clients, in the spirit of self-reliance, order and cook their own food. Small bags of groceries, although a welcome symbolic gesture of neighbourly relations, are not needed at the facility because:

- a) food is provided
- b) the food eaten by clients is, as far as possible, sourced to be culturally specific. Thus, not all ingredients or food stuffs common in Australia are yet part of their daily diet.
- c) there is also an issue of equity – if one bag of groceries, for example, is donated, how can it be decided who gets this bag?

However, gestures of welcome are an important part of establishing community links between the APOD and the community. Thus, although Serco did not have a policy on donations when it first began operations at Inverbrackie, it became apparent that there was a real need for a consistent policy and that it be communicated to the community so that interested residents can make donations that are needed and can be used by the asylum seekers.

This issue resulted in a policy on donated goods, which can be found on the home page of the Inverbrackie Good Neighbour Council (<http://www.inverbrackiegnc.org.au/>). In summary, donated goods must be:

- i. targeted at areas of need
- ii. able to be equitably shared
- iii. culturally appropriate
- iv. clean and in good condition<sup>156</sup>

### *Impacts*

There have been a number of visits and volunteering efforts. There have also been four group events in the facility organised through the Inverbrackie Good Neighbour Council:

1. Refugee Week event 25 June 2011
2. Carnival Day 22 July 2011
3. Tree planting day August 2011
4. Christmas Day 2011

The Refugee Week event and Carnival Day activities included: cricket, basketball, table tennis, coys, tug of war, Pictionary, drawing, a BBQ, morning and afternoon tea, music, singing, and balloon

---

<sup>155</sup> Serco, 2011, Submission to the Joint Select Committee on Australia's Immigration Detention Network

<sup>156</sup> Inverbrackie Good Neighbour Council, 2011, *Guidelines for Donations of Goods*, <http://www.inverbrackiegnc.org.au/getting-involved/donations-1/donations>

animals. were sports, games and activities and eating food together<sup>157</sup>. The tree planting involved eight of the asylum seekers, members of the IGNC and Serco staff planting 100 native trees outside the facility.

People participating in the events described their relationships with asylum seekers in these ways:

*Children from both communities mixed together very well, with Inverbrackie children helping some of the younger GNC members' kids in skills such as batting in cricket.*

*The weather was superb, and it was lovely to see the women sitting outside in the sunshine, as well as the activities. Once again it was lovely to meet with residents. We were able to greet some that we had met on previous occasions there, and also speak to some who were new to us. We were thrilled to be surrounded by children and adults enjoying other games and activities – there was music playing and some were dancing – and food was being prepared inside for a shared evening meal.*

*It was a typical Aussie working bee. Everyone enjoying each other's company, sharing a few jokes and feeling that we had accomplished something worthwhile at the end.*

*...it's an opportunity to interact in a fun and social environment*

*...a way to share ordinary human things*<sup>158</sup>

However, these interactions don't only impact on the asylum seekers and the immediate people who visit them. Through interactions, asylum seekers also become more visible in the wider community. For example, visitors and volunteers contact the wider community through email lists, websites and media articles on their interactions with asylum seekers. Asylum seekers in Inverbrackie are also be represented in the wider community through art. For example, one experienced artist visited the facility with donated art materials, and with the clients did still life acrylic painting, self portraits in collage and peg dolls. The paintings from her visits were displayed in her local art exhibition.

Those who participated in the group events see the potential impact of the events on the wider community as:

*This was not just about planting shrubs. It was about reassuring these asylum seekers that they had friends in the community, and showing the many passers-by that working together for a common purpose is the normal way of doing things in Australia.*<sup>159</sup>

*...we can put a human face on the issue*

---

<sup>157</sup> Detainees enjoy the kindness of strangers, The Courier 13 July 2011

<sup>158</sup> Inverbrackie Good Neighbour Council, 2011, Making home a bit more homely; Inverbrackie carnival; GNC committee and families team up with Inverbrackie residents for Refugee Week events; <http://www.inverbrackiegnc.org.au/news>

<sup>159</sup> Inverbrackie Good Neighbour Council, 2011, Making home a bit more homely <http://www.inverbrackiegnc.org.au/news>



*...there's not a lot of diversity in the Hills, so this is a good opportunity to embrace other cultures*

Future plans for more of these large group interactions include an adult soccer tournament. DIAC and Serco will work with the IGNC and local soccer club to organise external teams. The tournament will be held at Inverbrackie. An internal tournament is planned because if external only a few can attend because of security requirements, therefore matches held in the APOD are more democratic and inclusive. This will follow examples in other facilities, such as Port Augusta, where there is a regular indoor soccer tournament, two teams of clients in the local volleyball tournament, and a bowling competition.

All these interactions, including those created through excursions and interactions with health service providers and educators, have been reported as influential on personal opinions. For example, as noted in the section on health, although there was initial apprehension about asylum seekers expressed by some staff of offsite local health service providers, they report that their personal interaction with the asylum seekers has resulted in a more positive perspective on Inverbrackie clients. One person put it this way:

*They change once they [the staff] see just how grateful these people are for their care*

Further, we heard two stories of contractors engaged at the facility who had previously been opposed to the facility who, after working there, told friends and neighbours

*it's just ordinary people, it's nice.*

The schools have been an important site for connections, and of all the places of contact, possibly the most influential. As an example of their impact, the schools told us about how four hundred parents applauded watching an Inverbrackie child win at sports day. They also shared how parents and students alike were confronted with the reality of the restrictions on movement of asylum seekers and their experiences during the school cultural night and aquatic camp. In their conversations with those who attended, they noted that many people were led to reflect on how lucky they are. Further examples of the wider impact of these interactions are the influence of the school newsletters, which are an important source of information on Inverbrackie, particularly the positive outcomes for the children and staff. Through their school newsletters schools share stories with the wider school community about the Inverbrackie children's progress and what they are learning, like this one:

*We had a departure yesterday and our "own" students impressed with their thoughtful celebration of this student as a House Captain and Bollywood dance leader in the school. Cards and return envelopes presented were a good sign of that student's integration into the school.<sup>160</sup>*

Stories like those presented here reflect how personal interactions, and the wider dissemination of the experiences during these interactions, can influence broader community relationships between residents and the asylum seekers.

---

<sup>160</sup> Uraidla Primary School Newsletter, 25 March 2011

## Conclusion

Facilitating personal interactions can have a positive effect not only for those personally involved but also in the broader community. As demonstrated here, there are a number of ways in which residents can interact with asylum seekers. However, knowledge about these opportunities may still be limited, and further interactions could be supported through ongoing communication as outlined in the previous section.

## Relationships between residents

### Concerns

There were concerns raised that the opening of the facility would or had already split the community.

### Impacts

We assessed the impacts on relationships between residents in two ways:

1. Asking people about the impact on their relationships
2. The formation of interest groups and their long term existence/operation

We asked people how the APOD has affected community, neighbourly and personal relationships.

One resident noted that at the announcement, there were immediate divisions into lines of thought, these lines became firm, and people were identifying each other as 'pro or anti', revealing their political persuasion in a way that they may not have done before. It was felt that this resulted in 'black and white' positions and views.

The letters to the editor and the forums supports this idea about lines being drawn and people taking a stand on either side. There were a number of instances of 'name calling', where people labelled the opposition 'bleeding hearts' and 'racists', 'naïve' and 'hardhearted'. There was a sense that neither side was listening to the other – and that there were no spaces in which to foster a more open, respectful dialogue – letters to the editor and the forums precluding long term and nuanced engagement.

A number of people reported being disturbed by anti-refugee comments, including those in leaflets distributed through the town. One person said *"I feel concerned and upset when I read it"*. Others felt they had been unfairly branded as 'rednecks' and 'racists' and *"learned to keep their opinions to themselves"*.

However, most people said that in the long term, despite this name calling and its effects, the APOD hadn't affected their personal relationships significantly. For many, they rarely speak about the issue with others. For some, this was important where they knew, or suspected, that others may have a different opinion. Mostly, agreeing to disagree was an important way in which people maintained friendly, neighbourly, professional relationships despite potential differences in political opinion. Others felt it was important to challenge negative opinions, but they sought to do this respectfully.

Despite these signs of reduced discord, some residents remain concerned about ‘revealing a position’ on the APOD and thereby re-igniting antagonism. For example, when we were putting up fliers, some business owners were reluctant because they didn’t want to put customers off side on such a “sensitive” or “heated issue”. As noted in the section on health, local health providers organise their appointments to avoid potential conflict. Thus it seems that there is still a perception that there are divided opinions, and that it is best to avoid inflaming these as they may have negative consequences for business.

For employees at the APOD, there were a couple of different themes in their experiences in the town:

1. they didn’t advertise that they work at the facility, e.g. they don’t go out with work shirt or work tag on
2. they are unconcerned and are clearly identifiable as staff of the APOD

In general, there hasn’t been overt hostility towards employees at the facility, though there were several early incidents of direct confrontation, of people yelling things out their car windows as they drive past the APOD, and giving people at the facility the finger. Whether people wore identifiable clothing and tags seemed to depend on whether they felt there was the possibility of ongoing antagonism, and preferred to avoid that where possible. As with the shopkeepers above, whilst there weren’t any discernible conflicts, many were aware of the potential and acted pre-emptively to avoid this.

The formation of interest groups is also indicative of people’s responses to the facility and their ongoing feelings about it. There were two main groups formed in response to the APOD: the Woodside Community Action Group later the Fair Go for Our Communities group, and the Inverbrackie Good Neighbour Council. The first initially garnered a lot of support and they were highly visible in the debates, being members of the Community Reference Group, and travelling to Canberra to speak with the minister against the facility. However, a number of people reported that support for the group has died down, and they are no longer particularly visible in the media or in public forums. They maintain a web presence, but their site hasn’t been updated since April 2011. The formation and goals of the Inverbrackie Good Neighbour Council were outlined in the previous section. They continue to remain a presence in Woodside and have been active in developing opportunities for interactions between local residents and asylum seekers. They continue to have a media and online presence. Prior to the IGNC, there were several groups formed supportive of the APOD, the first being through the local Lutheran Church. As the IGNC grew, these groups channelled their efforts through this organisation.

## *Conclusion*

Whilst members of the community continue to hold strong views about the facility and about asylum seekers more generally this does not appear to have affected ongoing daily relationships for most people in Woodside.

However, the way the debate was conducted in letters to the editor and the forums and in personal communications as well has solidified a view that neither side is willing or able to listen to the other. It has confirmed stereotypes that ‘they’re just racist’ or ‘they’re just bleeding hearts’. Whilst ‘getting

along' is a good strategy that works well in most situations, it also lends itself to the possibility of simmering unaired conflicts. The two sides are unlikely to ever see eye to eye, however it is important that all sides feel heard.

It is thus potentially important to change the way the debate is conducted by reducing the use of stereotypes and name calling, increasing the amount of reliable and accurate information about the APOD and asylum seeking, and opening up opportunities for listening and engagement. It is possible to do this in a group setting, however there are also lots of opportunities to do this in daily life as well. As noted, much of the communication about the APOD is in everyday conversations at the pub, around the BBQ, at sporting events, waiting at the school gates. Below are some recommendations for having conversations that may be more open and less divisive.

**Recommended options for daily conversations:**

These are some suggestions taken from Dr Danielle Every's work on conversations across difference, which is relevant to the current study on Woodside. They are intended for people in the community for use in everyday situations.

1. Always engage with the person with whom you're speaking. In the first instance this can mean asking questions about their position, rather than quickly responding with an opposing view. For example, one person reported being stopped by a woman outside the supermarket seeking signatures for a petition against the APOD. This woman said "They come here and take our taxpayer dollars, then six months later go home for a holiday". However, the person hearing this wasn't sure how to respond, although she had a different view. It is difficult to respond to one-liners like this, they're packed with lots of unspoken assumptions. However opening up a conversation allows for other points to be raised. For example, in response to one-liners you might ask where someone got their information from or what led them to that conclusion. Engaging in this ways opens up the possibility for both people to understand more about where someone else is coming from. It may not lead to agreement, but it will more likely lead to mutual respect and sharing views rather than shouting each other down, or to silence, which can also be unproductive.
2. When people are giving answers to these questions, listen well. One of the primary school principals interviewed for this study shared this advice which she gives to her students: 'You can listen while thinking of your answers so that you can agree/disagree, but its better to listen for understanding.' This latter type of listening opens up the conversation, rather than closing it down into two people merely exchanging opposing ideas. Again, it opens up the possibilities for mutual learning.
3. Critically examine your own views and opinions. Think about where you got your information from, whether it's good information or only partial. Explore whether it is based on hearsay and rumour rather than fact. If it is, then learn more about an issue so that you're more widely informed.



# Part 5 Social Impact Table

The social impact table summarises the concerns, impacts, and recommended options outlined in detail in the body of the report. Also included in the Table are effective interventions already being undertaken. These are included for reference for other communities housing detention centres as examples of best practice.

## Health

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective interventions already in place	Recommended options
The facility will increase pressure on inadequate local services	<p>The local economy: two local business contracts for health services</p> <p>Local employment: one local employee; upskilling for working with diversity</p>	None, there has been no uncompensated increase in the workload for local health service providers	Local health service providers	Small	Woodside and Mt Barker	Ongoing benefits for health service providers	<p>All health services provided onsite using local health service providers where appropriate</p> <p>Where offsite health services are utilized:</p> <ul style="list-style-type: none"> <li>- extra staff and equipment provided where needed</li> <li>- the provider, DIAC and Serco liaised to develop an agreement around appointment times, the number of people at each appointment (i.e. clients plus security, plus interpreters), where and how they may sit and interact with others to ensure they are unobtrusive</li> </ul>	Increase benefits of existing upskilling to work with diverse populations, which is also a goal of the SA Health Plan, by sharing knowledge between IHMS and local health providers/workers through: workshops, work experience, graduate programs

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
The expenditure on, type of, and access to health and wellbeing services in the APOD is greater than that available to Woodside residents		None, the type of and access to services is comparable for residents and people in the APOD, except for mental health practitioners  However, the perception of differences increases negative affect in relation to the facility and asylum seekers				Impact of perceptions on attitudes – ongoing but potentially changeable		Circulate information about health services and expenditure.
The clients have communicable diseases which will spread to the local population.		None, no clients with untreated diseases are sent to the mainland  However, the perception that clients will transmit diseases increases negative affect in relation to the facility and the asylum seekers				Impact of perceptions on attitudes – ongoing but potentially changeable		Circulate information about health checks.

## Education

---

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
Woodside Primary School is at capacity enrolment and does not have the room for the Inverbrackie students	Increase in enrolments for small Hills schools with declining student numbers	None – the students are spread across Hills schools	School community (parents, students, teachers)	Small	Adelaide Hills	Ongoing	Hosting children in schools throughout the Hills. This spreads the benefit more widely, and minimizes impacts on any one school.	
The presence of the Inverbrackie students will require teachers' time and take school resources away from local children	Extra staff members Extra funding utilized for whole of school benefits Enhanced learning through new avenues for critical thinking, engaging with diversity and new language learning	Minimal on mainstream teachers Some increase in workload for principals and administrative staff	School community (parents, students, teachers)	Small	Adelaide Hills	Ongoing	Teaching and support staff are funded by the federal government, with funding allocated for whole-school benefits as well as for the children from detention centers.  There is now continuity in entry and exit processes between host schools and the school which the children attend when they enter the community.	Review the funding agreement as it pertains to principals and admin staff to compensate for any increase in workload



Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
<p>There will be conflict between Inverbrackie and local children, particularly between Inverbrackie students and students from Defence families</p>	<p>New friendships</p> <p>Embodying values of caring and welcome</p> <p>Increasing knowledge and understanding</p>	<p>None</p>	<p>School community (staff, parents, students)</p>	<p>Small</p>	<p>Adelaide Hills</p>	<p>Ongoing</p>	<p>The local children are supported to develop relationships with the children from detention centers through including them in assemblies, some mainstream classes, and buddy systems.</p> <p>The school community is part of the decision-making process around becoming a host school, and is part of multicultural nights, sports days and other events that bring local and detained children together.</p> <p>School leadership that operates from the belief that 'all of the school benefits'.</p> <p>Existing learning about global issues is enhanced, and new learning is added to the curriculum about different cultures and different life experiences.</p>	<p>Local and children from the detention center could display art work outside of the school environment in the local community to give a wider audience the opportunity to see the outcomes of having Inverbrackie children in the local school system.</p> <p>Discussion forums for older children to openly debate asylum seeking with opportunities for both sides to be heard, to put their point of view, and learn from others</p>

## The Local Economy

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective interventions already in place	Recommended options
The APOD will reduce property prices and the attractiveness of Woodside as a place to live	A small increase in rental demand for residences and commercial properties	None, there has been no reduction in prices or demand due to the APOD	Home and property owners, new home buyers, renters	Small	Woodside and surrounding Adelaide Hills	Potentially long term increase in demand		Sponsor information sessions/workshops run by a local real estate agent on buying, selling and renovating in a flat market. This would be part of a community information service that contributes to the town as a whole.
Employment in Woodside is low, and the facility has not contributed sufficiently to addressing this	14 FTE Woodside-specific jobs, and 297 FTE jobs across the region; 37.8% of Serco employees live in the Adelaide Hills	None, though there has been no specific impact for young people	Labour force of Woodside and the wider Hills	Small	Woodside and the surrounding Adelaide Hills	Potentially long term increase in employment across the region	Targeting local employment through advertising in local media	A stall for employment at the APOD at the Hills Youth Expo during Youth week held each April.  A specialized extension of the Graduate Program for local graduates.  Options for job sharing and part time work.
Not enough businesses have benefitted	Approximately 35 local and Hills-wide contracts including waste removal, building and repairs, fencing, labouring, firewood delivery and cleaning	None, however there are ongoing perceptions that there has been minimal benefit to local business which continues to underlie negative affect towards the facility	Business owners	Small	Woodside and surrounding Adelaide Hills	Long term increase in business  Ongoing negative perceptions of business contributions, but potentially changeable	Meetings between DIAC and members of the Woodside Commerce Association  DIAC's contracted targets for local business contracts	A local strategic business plan complementing the RDA Strategic Plan that supports further local business development  Communicating benefits to business throughout the community

<b>Community concerns</b>	<b>Positive Social Impact</b>	<b>Negative Social Impact</b>	<b>Affected groups/individuals</b>	<b>Scale</b>	<b>Geographic boundaries</b>	<b>Duration</b>	<b>Effective interventions already in place</b>	<b>Recommended options</b>
Indirect expenditure should benefit the town	Indirect expenditure on food, services and gifts has flowed into the town	None	Business owners in these three areas and the local economy generally	Small	Woodside and surrounding Hills	Long term increase in indirect expenditure		

## Services and Facilities

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
The library potential expenditure on a mobile library or other resources for the APOD	Local library as a place of community education especially for school children	None – local library services have not been, and will not be, impacted, nor has expenditure on the local library been reduced	Clients of the APOD  Library users	Small	Woodside	Long term		
The Woodside public swimming pool: a) closed to locals, b) diseases	Increased business for the local pool	None, the pool is used outside of opening hours	Pool owner, pool users	Small	Woodside	Long term	Using the pool outside of regular pool use hours	
The CFS: a) no evacuation plan; b) pressure on CFS equipment and fire fighters; c) clients will start fires	Establishment of an evacuation plan  Serco employees volunteer for CFS  Fire safety education for adult and young clients of the APOD	None, evacuation site is the Mt Barker YMCA; 2 callouts; fire safety part of induction	CFS  Woodside and surrounding residents	Small	Woodside and Adelaide Hills	Finalised	Serco employees are CFS volunteers	Involvement in pre-season fire prevention activities, which both employees and clients could potentially join as volunteers.
Woodside Barracks: a) closure; b) loss of facilities	DSG housing stock has been upgraded and is now in use, preventing break-ins and other illegal activities  New hall/crèche for Defence families	None, the Barracks are not closing and the lost facility has been replaced	Woodside Barracks and defence families	Small	Woodside	Long term improvement in housing stock and hall/crèche facilities	Ongoing communication channels with the Barracks  Financed new hall/creche	
Damage to local roads		Increased use of Riverview Road	Local road users	Small	Woodside	Long term	Discussions between DIAC and the AHC about the impact on the road and the financial contribution to this	

## Security

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
<p>The asylum seekers will escape and commit crimes in the local area</p> <p>The asylum seekers will stage violent protests and riots</p> <p>Asylum seekers are terrorists and threaten national security</p>		3 incidents classified as attempted escapes – no criminal activity arising from them; one onsite demonstration – no property damage; no terrorist activity	Residents concerned about security	Small	Woodside	Concerns and negative affect potential long term but also potentially changeable	Preventative security measures including health and wellbeing provisions	Countering common beliefs about asylum seekers, crime and terrorism
<p>The local police station in Woodside provides a single patrol response only and does not operate on a full 24/7 basis</p> <p>The APOD is on Federal land and the protection the local police can provide to the community in the event of an incident is limited</p>		Minimal – callouts to the APOD represent 2% of the workload of the local SAPOL	Residents concerned about security  SAPOL	Small	Woodside	Long term	<p>Existing communication channels with police</p> <p>Existing communication with concerned residents such as DIAC speaking at the Rural Watch meeting</p> <p>Security incidents are handled in the first instance by Serco, DIAC and IHMS using preventative measures, where necessary the AFP</p> <p>AFP and State policing services undertaking a risk assessment and developing a Memorandum of Understanding</p>	<p>Establish a contact person for security incidents</p> <p>Keep the local community informed about security</p>
Potential and actual incidents are being kept secret from the community.		A general climate of distrust and suspicion	Residents concerned about security	Local	Woodside	Concerns and negative affect potentially long term but also potentially changeable	<p>Existing communication channels with police</p> <p>Existing communication such as the DIAC meeting with rural Watch</p>	Communicate on security to residents through established and new communication channels

## Community Relationships

---

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
The announcement and the town forums		<p>Delays in providing comprehensive and accurate information has led to feelings of mistrust, and the proliferation of rumours and myths in the absence of reliable facts</p> <p>Some members of the community more supportive of asylum seekers feel alienated from their community</p>	All residents, both supporters and opposers	Small	Woodside	Political positions on asylum seekers potentially long term, but the effects are not constant, but sporadic and reactive, and partially open to change		<p>Well informed, well prepared and experienced set up team</p> <p>Send information packs via fax, email and phone to all key stakeholders and groups in the community at the same time the announcement is made</p> <p>Information session/s should be immediately established, both large and small.</p> <p>Establish and widely advertise various contact points for people to access accurate information: in person, online, on the phone, in the media.</p>

Community concerns	Positive social impact	Negative social impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
Communication between the CCG and the wider community	Good forum for obtaining relevant and up to date information that has been used to allay concerns in the broader community	Confidentiality agreement has been reported in the media and by local politicians as 'secretive', undermining trust in the CCG. This has been exacerbated by few conduits for communication from the CCG to the wider public, and vice versa, from public to CCG	Woodside residents	Small	Woodside	Ongoing	<p>The development of the Community Consultative Group</p> <p>Including community representatives on the CCG</p>	<p>Include information discussed in CCG minutes in the Woodside Informa column</p> <p>Access to the minutes online and in hard copy at the local library.</p> <p>More avenues to access community representatives: a collection box in the library for written submissions, an advertisement in the local paper and on the Inverbrackie Good Neighbour Council website.</p> <p>Access community concerns through other channels: media, letters to the editor, websites and meetings of local groups</p> <p>Information for CCG members to stay abreast of news, developments and facts about asylum seekers</p>

Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
Communication between the IGNC and the wider community	<p>Non-secular, non-political body that promotes good neighbour policy.</p> <p>Streamlines the volunteering and donations to the APOD.</p> <p>Has been part of positive stories about asylum seekers published in the local newspaper.</p> <p>Has facilitated interactions between some residents and people in the APOD which have been reported as positive.</p>	<p>The role of the IGNC, or even its existence, is not widely known. People who are supportive of the APOD and asylum seekers and who are interested in donating and volunteering aren't aware of the Council and aren't connecting with other likeminded people through the Council, or taking part in important events run by the Council, e.g. the Refugee Week celebration</p>	Woodside residents	Small	Woodside	<p>Negative is likely to be resolved</p> <p>Positive will be ongoing</p>	<p>Website</p> <p>Group interactions in the APOD</p> <p>Volunteering and donation guidelines and streamlined process</p>	<p>Meet with local community groups, both personally, and in larger workshop or forum-style meetings, to provide information about the IGNC and its role, and to liaise with local groups about how they might become involved.</p> <p>Include a person with media experience on the committee to develop media releases that appeal to the media, and to develop relationships with local media.</p> <p>Develop and distribute a brochure that is available online and also distributed in hard copy offline to people in the community, perhaps as an insert in the Woodside Informa, or as a letterbox flier.</p> <p>In the media releases, brochure and newsletter, include personal stories about asylum seekers.</p>



Community concerns	Positive Social Impact	Negative Social Impact	Affected groups/individuals	Scale	Geographic boundaries	Duration	Effective measures already in place	Recommended options
Other ongoing sources of information	There are ongoing sources of accessible, factual, relevant and timely information that are now starting to be noticed and to have some effect		All residents  Groups that do not have ready access to multiple forms of information but who are targeted by politicians for misinformation, e.g. the elderly	Large	Woodside	Positive will build and be ongoing	Talks to community groups  Column in the Woodside Informa  Newsletter distributed through letterboxes	The Inverbrackie website re-designed to be a one-stop place to access all relevant information from one page  A continuing Community Liaison position with modified job description to reflect the ongoing rather than start-up phase of the facility.  Re-establish regular community forums similar to those run by the Community Liaison Officers  A panel including IHMS, Serco, Ops Team, case managers, and DIAC forms and is engaged to talk about what they do and where volunteers/donations fit within this system.

# Part 6: Recommended options for addressing social impacts

We identified three key areas where interventions for addressing social impacts are best targeted:

1. Building and strengthening local relationships
2. Communicating about the facility and asylum seekers
3. Building social and economic capacity in Woodside

## Building and strengthening local relationships

Recommendation	Actions:	Practical steps	Expected Outcomes
Contribute to the support of disadvantaged groups in the area	Engaging with local Indigenous, disabled and homeless needs	Meet with local groups, identify existing needs and how the APOD might assist, such as sponsorship, involvement in community fundraising, volunteering opportunities for staff and asylum seekers, employment opportunities	Increase support available for disadvantaged groups that builds the social and economic foundations in Woodside in areas where it is needed  Increase community involvement of the APOD in Woodside
Skills sharing between APOD and local health service providers	Establish opportunities for skill sharing, for example through:  Work experience Workshops Graduate programs	Meeting between IHMS, Country Health SA and other relevant health service providers to establish knowledge-exchange/professional development needs and capacity	Further strengthen working relationship between health providers  Increase knowledge and capacity for working with asylum seekers and other CALD groups, which is also a goal of the SA Health Plan  Further strengthening the positive working relationship with the SA Government by supporting the SA Health Plan whilst simultaneously ensuring better health support for asylum seekers

Recommendation	Actions:	Practical steps	Expected Outcomes
Continuing to build the relationship with SAPOL	Actions are already in place	Steps are already in place	<p>Local residents are satisfied that communication is clear between SAPOL, AFP and Inverbrackie staff</p> <p>Local residents are satisfied that their welfare is protected through the MOU</p> <p>SAPOL are satisfied that the MOU adequately allows them to attend to Inverbrackie-related issues in the local community</p>

Recommendation	Actions:	Practical steps	Expected Outcomes
Continue developing the APOD library, building relationships with local libraries and with asylum seeker advocates	Continuing to explore ways for people in the APOD to access the books provided in the Community Languages Service. This might be through a mobile library service, through including these books in the onsite library, and through online services	Meeting with local library and Community Languages Group to exchange ideas and resources	<p>Greater access to books in hard copy or electronically for relevant language groups</p> <p>Asylum seeker advocates are satisfied with the provision of a library</p> <p>Library representatives are satisfied with the support and their role</p>
Continuing to build the relationship with the CFS	<p>Maintain and/or extend the bushfire volunteering at the APOD</p> <p>Take a role in bushfire prevention volunteer activities</p>	Inverbrackie staff volunteer for CFS	<p>Contribute to an important community service</p> <p>Local residents are satisfied that Inverbrackie has up to date information</p>

## Communication

Recommendation	Actions	Practical steps	Expected Outcomes
Put in place a best practice model for announcing APODs and other immigration facilities	Develop a timely, proactive approach which opens the lines of communication via numerous channels	<p>A well informed, well prepared and experienced set up team</p> <p>Send information packs via fax, email and phone to all key stakeholders and groups in the community at the same time the announcement is made</p> <p>Information session/s should be immediately established, both large and small</p> <p>Establish and widely advertise various contact points for people to access accurate information: in person, online, on the phone and in the media</p>	<p>The local community is satisfied that they are informed of the issues in a timely manner regardless of the popularity of the decision</p> <p>The local community are satisfied that they have been adequately consulted at regular intervals</p> <p>The local community are satisfied that they have clear communication paths to access for any issue or query</p>
Establish a contact person for reporting suspected security breaches	Establish a contact person	Communicate their details widely in existing and recommended communication channels	<p>Local residents concerned about security are satisfied they have a point of contact who is well informed and helpful</p> <p>Decrease distrust and suspicion about security at the APOD which has affected how some people in the town have viewed security incidents to the APOD</p>

Recommendation	Actions	Practical steps	Expected Outcomes
<p>Increase communication between the CCG and the community</p>	<p>Develop multiple ways to contact the community representatives</p> <p>Disseminate CCG minutes more widely</p> <p>Community representatives to source information on issues through multiple channels</p>	<p>A collection box in the library for written submissions to community representatives, an advertisement in the local paper and on the Inverbrackie Good Neighbour Council website</p> <p>Include information discussed in CCG minutes in the Woodside Informa column</p> <p>Access to the minutes online and in hard copy at the local library.</p> <p>Access community concerns through other channels: media, letters to the editor, websites and meetings of local groups</p> <p>CCG members to stay abreast of news, developments and facts about asylum seekers.</p>	<p>The local community proactively contact community representatives to represent their concerns at the group</p> <p>The local community is satisfied that they are able to access information about the CCG</p> <p>The CCG continues to act as a forum for participants to engage and with DIAC, its contractors, key stakeholders and each other; to respond to community input, concerns, suggestions and queries</p>

Recommendation	Actions	Practical steps	Expected Outcomes
<p>Increase the profile of the IGNC</p>	<p>Meet with local community groups, both personally, and in larger workshop or forum-style meetings, to provide information about the IGNC and its role, and to liaise with local groups about how they might become involved.</p> <p>Include a person with media experience on the committee to develop media releases that appeal to the media, and to develop relationships with local media.</p> <p>Develop and distribute a brochure that is available online and also distributed in hard copy offline to people in the community, perhaps as an insert in the Woodside Informa, or as a letterbox flier.</p> <p>In the media releases, brochure and newsletter, include personal stories about asylum seekers.</p>	<p>These are already being undertaken, for example the IGNC is developing a list of community groups in the area and establishing contacts with them.</p>	<p>Strengthen and extend volunteering and donation efforts</p> <p>Develop the working relationship with other committed groups</p> <p>An alternative source of information about asylum seekers that can address underlying beliefs proliferated in the media, for example through positive stories</p> <p>Create further opportunities for interaction between the community and the clients</p>
<p>Continue to provide ongoing sources of information via multiple channels</p>	<p>Update and upgrade the Inverbrackie website</p> <p>Conduct a panel on the facility for potential volunteers and donators</p> <p>Re-establish community forums</p>	<p>Except for the website redevelopment, these are already undertaken</p> <p>Have the communications team devote time to re-designing and updating the website</p>	<p>The local community are further assured that there are ongoing sources of information accessible in a number of ways</p> <p>The amount of available factual information is increased reducing rumours</p>

## Building social and economic foundations in Woodside

Recommendation	Actions:	Practical steps	Expected Outcomes
Build more pathways for local employment	<p>Ensure that young people have a pathway to employment</p> <p>Provide options for job sharing/part time work</p>	<p>Stall at Youth Expo</p> <p>Advertise part time positions</p> <p>Local recruitment pathways for Graduate Program</p>	<p>Increase the number of young people and other local residents in the Inverbrackie workforce</p> <p>Youth employment concerns are addressed</p> <p>The community is satisfied that their employment interests are actively addressed</p>
Build more pathways for local business	<p>Collaboratively develop a strategic business plan which incorporates business development strategies for all local business</p> <p>Include quotas for local contracts in Serco's contract</p>	<p>Contact the Regional Development Authority and establish possibilities for developing a strategic business plan with local businesses and the APOD</p> <p>Include quotas for local contracts in Serco's contract</p>	<p>The local business community are assured that their business development is supported and that their potential for business opportunities with the APOD are enhanced</p>
Building property knowledge	<p>Workshop on property values and marketing in a flat market</p>	<p>Contact the local real estate agents to discuss setting up the workshop</p>	<p>Local residents are satisfied their property values aren't affected</p>





## Part 7: Conclusion

---

Following the announcement of the APOD in Woodside, there was much uncertainty in the community about what it would mean for the town. Understandably, in such a new and unknown situation its predicted impacts were often dire - hospitals and schools under pressure from asylum seekers whilst locals were turned away, riots and terrorist attempts, citizens turning on each other. However, these feared outcomes have not eventuated.

There have been no reductions in local health services for local residents as a result of the APOD. All offsite health services for Inverbrackie clients are adequately funded and have not resulted in an unmanageable or uncompensated workload for providers. Local health providers have benefited from the facility through funding for new positions and equipment, new employment opportunities, new supply contracts, increased skills in working with diverse clientele, and personal satisfaction through working with asylum seekers. There is no difference between the amount and type of services available in the local area and in the APOD, except for the residents of the APOD having access to specialised mental health care.

There have been no negative impacts on local schools' space, teacher time and resources, or the wellbeing and achievements of local children. There have been no instances of conflict between local and Inverbrackie children. Local schools also report the benefits the Inverbrackie students have brought: regular funding for schools that can be used for whole school benefits; new knowledge; and new and rewarding relationships.

Property prices have not fallen, nor has property demand, except that which is attributable to the current flat market.

Those local businesses who supply food, building and maintenance, and health services needed by the APOD and who are able to meet supply demands have benefited. The Economic Report also found that of the 463 full time equivalent (FTE) positions created across the region by the APOD, 14 of these will be filled by Woodside residents and 297 by residents of the Adelaide Hills. As there are only 30 unemployed persons in Woodside, this is a significant contribution. Of the 163 Serco employees, 62 or 37.8% live in the Adelaide Hills. However, in our interviews we found that on an individual level, many residents reported that the economic impacts had been less than they had expected, and that they and their friends and family had experienced no direct benefits. Where these expectations haven't been met, people expressed disappointment and anger. This thinking about economic benefits may, however, change through the information from the economic study and this social impact report circulating in the community and providing a new perspective on benefits which was not previously available.

The local CFS has not been affected, and fire safety procedures and evacuation plans are in place.

The operation of the Woodside Barracks has not been affected. A new crèche and hall were built for the army families who previously used the facility which became part of the APOD.

Local access to the pool has not been affected. Asylum seekers from the APOD use the pool outside of the public opening hours.

In terms of security incidents which affect the Woodside community, there have been no non-peaceful protests or escapes resulting in criminal activity from the APOD. However, concerns and predictions that security incidents may or will happen do continue to affect some residents' sense of personal and property security. The police workload has increased slightly, mostly through inquiries; police attendance at the APOD accounts for approximately 2 percent of the workload in the Woodside Police Area. At the time of writing this report, a national Memorandum of Understanding between DIAC, the AFP and state police services was being developed.

The relationship between DIAC/Serco and the local residents got off to a shaky start. A tight deadline meant that a pressured and not yet fully staffed team weren't always able to provide the information local residents wanted or needed. However, after the initial conflict the recovery skills employed in the following twelve months have been commendable. Good communication and relationship-building strategies include: the Community Consultative Group, the Inverbrackie Good Neighbour Council, DIAC staff guest speakers at local clubs and events, and a column in the local newspaper. There remain some residents who report they are not happy with the relationship with DIAC/Serco, but in general people are positive.

The Inverbrackie Good Neighbour Council and the local Circle of Friends have facilitated interactions between locals and the people detained in the APOD. These interactions have been positive for asylum seekers and residents.

Existing differences between local residents on the issue of asylum seeking – and on many other political issues – were exposed by the arrival of the facility. The way this was handled wasn't always conducive to open dialogue and communication, and many personal stereotypes were invoked that alienated others in the town. However, for most people this has subsided, returning to normal neighbourly relations.

DIAC's communication and community engagement, together with the passage of time, the leadership roles of the schools, health service providers, churches and Adelaide Hills Council, and the presence and activities of the Inverbrackie Good Neighbour Council, has on the whole reduced uncertainty and anxiety and resolved conflict for the majority of residents.

The research demonstrates that the most successful interventions for minimising negative impacts are:

1. a sustained focus on building enduring local relationships,
2. communication strategies that are personalised and also those which widely disseminate factual information which addresses residents' primary questions,
3. interventions (not necessarily financial) that contribute to building the social and economic foundations in the town

A number of these interventions have already been successfully implemented in Woodside, for example:

1. Building enduring local relationships
  - a. Working with schools to develop and implement a comprehensive education program for students that benefits the whole school
  - b. Working with local health care providers to develop health care services for people in the APOD whilst avoiding any impact on local health service users
  - c. Speaking at local clubs and schools
  - d. Meetings with the Woodside Commerce Association about getting business with the facility
  - e. Establishing the Community Consultative Group and the Inverbrackie Good Neighbour Council which bring together residents, service providers and asylum seekers
  
2. Building enduring and flexible communication
  - a. A newspaper column in the *Woodside Informa*
  - b. A local newsletter
  
3. Building economic and social foundations
  - a. Funding for schools and local health services
  - b. New facilities for the ADF crèche and hall
  - c. 35 business contracts across the Adelaide Hills
  - d. 14 employment opportunities in Woodside, 297 in the region
  - e. \$40 million increase to regional gross value
  - f. Social and economic impact studies
  - g. A community liaison officer position

This success is the result of the work of both DIAC and other members of the community:

1. The staff at DIAC are enthusiastic, engaged and personable with a lot of experience in the field of immigration.
2. Principals and teachers in the schools and health service providers have pursued 'whole of institution' benefits and provided information and opportunities to interact with the wider community.
3. Local councillors and council staff have also sought 'whole of community' benefits, maintaining a middle path, rather than using the issue to divide the community.

4. Local residents (e.g. business owners, community group members, churches, individuals, members of committees) have facilitated relationships the APOD, the asylum seekers and the community.

Relationship building has been excellent with schools, health service providers and many local groups such as Rural Watch and the Lions Club. We made recommended options for continuing to strengthen the relationship with health providers, the police, the Country Fire Service and the local library.

One issue impacting local relationships raised consistently was the comparison of the facilities for asylum seekers with those accessible by the local Indigenous, disabled and homeless people. As a top priority for continuing to build relationships we would recommend engaging with local Indigenous, disabled and homeless populations to identify key areas of need and how the APOD may contribute to meeting these – for example through sponsorship, employment opportunities, and volunteering.

Communication was difficult to begin with but has improved. Personalised communication has been particularly well done. However, ongoing dissemination of factual material to a wide audience could be improved. We made recommended options for strengthening links between the Community Consultative Group, the Inverbrackie Good Neighbour Council and the community, improving the website and community forums.

One communication issue raised consistently was a concern about security incidents, particularly about who to contact in the event of these. As a top priority for communication we would recommend identifying a contact person for potential security breaches, and advertising their contact details widely, particularly to those people living in the vicinity of the facility.

There have been a number of social and economic interventions to minimise any negative impacts on the town. We made recommended options for continuing to engage with and support local businesses, opening pathways for local employment and engaging with property owners.

Youth unemployment was raised in a number of documents on Woodside as a top concern for people in the area. As a top priority for continuing to support the social and economic development of Woodside, we would recommend liaising with the Regional Development Authority to include a stall for the APOD as a local employer at the annual Youth Week Expo to provide information for young people in the area seeking work at the facility.

The impacts and recommended options identified in this report relate specifically to the situation in Woodside. As noted, the type of facility, characteristics of the local community and the mitigation measures all influenced how the APOD impacted on Woodside.

However, there are a number of tools identified in this report which may also be used in other towns as well. This tool kit includes recommended options for:

1. Identifying the significant factors which will influence the social impacts on host communities.
  - a. The first step is to map existing facilities and services, and any inequities in the delivery of or access to these services.

- b. There are also particular factors that influence host community attitudes towards migration, some of which we have outlined in this report. These potentially include:
  - i. the existing diversity in the area and what the lived experience of that diversity has been;
  - ii. social and economic conditions particularly those that create a sense of optimism and trust;
  - iii. how the media, both local, national and international, reports on migration and asylum seekers
  - iv. the political participation opportunities of people in the town

This list is still only in its early stages. There is little existing work on host communities and the social impacts of migration, particularly on the aspects of the host community which influence these social impacts. More research in different contexts is required to develop a better picture of this.

## 2. Identifying the social impacts

- a. In the research reported here we drew upon interviews, community documents including the local media, and ethnographic observation to identify community concerns. This identifies what is important to the community, which shapes what impacts are analysed, and how the report is written up. They will also underpin the mitigation measures put in place. These methods of scoping community concerns are found in most community development work, including that undertaken by many local councils, and in qualitative research in many fields of inquiry.
- b. We used these same methods to understand social impacts as something which is felt and experienced by people in the community.

## 3. Developing collaborative partnerships that take on board these unique factors

- a. The most effective mitigation measures undertaken to minimise negative impacts and enhance positive ones were those which:
  - i. focussed on building local relationships with a variety of stakeholders – businesses, health and education providers, the police, local council, volunteers and advocates
  - ii. used personalised communication as well as more widely disseminated information: getting to know people at the local shops, giving talks at local groups and clubs, attending community meetings
  - iii. contributed to the social and economic foundations of the town by providing funding where needed to fund any needs on top of those

already existing in the town and also engaging in town volunteer and support efforts

- b. Address particular concerns that the community may have. In Woodside, these were: support for other disadvantaged groups; security breach contact person and youth unemployment. These concerns were identified during the community fieldwork.
4. How to evaluate whether these interventions are working.
- a. Asking people is one good way of doing an evaluation. Evaluation was also done using the three methods of fieldwork data collection: interviews, observation, documents.
  - b. However, evaluation also needs to take into account the political purposes behind people's responses – for example, depending on whether people were for or against the facility they assessed other people in the town as also being either for or against it! Once again, triangulation of data sources is helpful here – drawing together findings from multiple interviews from a variety of perspectives, together with observations and document analysis.

# Further Reading

---

Crawley, H. 2009, 'Understanding and Changing Public Attitudes- A Review on Existing Evidence from Public Information and Communication Campaigns,' Centre for Migration Policy Research, Swansea University

Department of Immigration and Citizenship 2007, 'Detention Health Framework- A Policy Framework for Healthcare for People in Immigration Detention.' Accessible online- <http://www.immi.gov.au/managing-australias-borders/detention/services/health-framework.htm>

Graeme Hugo, 2011, *Economic, Social and Civic Contributions of First and Second Generation Humanitarian Entrants*. Available online: [http://www.immi.gov.au/media/publications/research/\\_pdf/economic-social-civic-contributions-about-the-research2011.pdf](http://www.immi.gov.au/media/publications/research/_pdf/economic-social-civic-contributions-about-the-research2011.pdf)

Joint Select Committee on Australia's Immigration Detention Network Online at: [http://www.aph.gov.au/Senate/committee/immigration\\_detention\\_ctte/immigration\\_detention/](http://www.aph.gov.au/Senate/committee/immigration_detention_ctte/immigration_detention/)

Janet Phillips, 2011, *Asylum seekers and refugees: What are the facts?* Parliamentary Library, Department of Parliamentary Services. Available online: <http://www.aph.gov.au/library/pubs/bn/sp/AsylumFacts.pdf>

Rane, H., Nathie M., Isakhan, B., & Abdalla, M. 2011, 'Towards Understanding What Australia's Muslims Really Think,' *Journal of Sociology*, vol. 47, no. 2, pp 123-143.



# Appendices

---

## Appendix 1: Flier

---



### Woodside Immigration Detention Facility

#### COMMUNITY IMPACT

Researchers from the University of South Australia are evaluating the impact of the new facility on you and your town.

Can you tell us about the impact on you, your family and community?

Can you chat with us in person, on the phone or online sometime in the next four weeks?

Contact us to get involved:

Dr Danielle Every: 0434 217 883 or [danielle.every@unisa.edu.au](mailto:danielle.every@unisa.edu.au)



University of  
South Australia

## **Appendix 2: Library questionnaire**

---

### **Inverbrackie Alternative Place of Detention**

#### **Woodside Community Impact Study**

*Please don't include any personally identifying information in your answers, these questionnaires are anonymous and confidential.*

- 1. Can you tell us your three main concerns about the facility?**
- 2. Can you tell us what the main impact/s of the facility has been on you personally, your family, business or community?**
- 3. Can you give any specific examples of these impacts?**
- 4. Where do you access/how do you receive information about the facility? (e.g. flyers, community/group meetings, media)**
- 5. What would you like to see happen as a result of the facility? (for yourself/family/business/community)**
- 6. Please make any other comments you would like to on the impact of the facility.**

## Appendix 3: Serco employees' questionnaire

---

Questionnaire for Serco employees

Hi My name is Danielle. I'm a Research Fellow at the University of South Australia. I'm conducting the *Social Impact Survey* on the Inverbrackie APOD. For this study, I'm interviewing local residents about their experiences of the facility. I'd like to include your views and experiences as employees at the APOD. Employment is an important part of the impact of the facility on the community and its residents.

Your responses to this questionnaire (or an interview, I'd like to speak with you directly if you have the time) are completely anonymous and confidential. The research is funded by the Department of Immigration and Citizenship. It will be written up in a publicly available report, as well as academic journal articles and conference presentations. Nothing will be identifiable to individuals. The study has been approved by the University's Ethics Committee.

If you have any questions, or you would like to speak with me directly to contribute to the study, please call or email me:

Dr Danielle Every  
0434 217 883 or 83021211  
[Danielle.every@unisa.edu.au](mailto:Danielle.every@unisa.edu.au)

### Questions

Please give as much detail as you can for each of the questions. If you have any specific examples that can illustrate your answer that would be really helpful for me – your stories will help give a sense of the impact of the facility that 'just numbers' never could.

1. What suburb do you live in?
2. What is your role at the APOD?
3. How did you obtain employment at the APOD? (e.g. through a newspaper advertisement, through approaching Serco)
4. What was it about working at the APOD that encouraged you to apply?
5. What was your job/employment status prior to working here?
6. What does this job mean for you financially (e.g. being able to buy a house now rather than rent, expanding a business, paying the bills, supporting a family)?
7. What does this job mean for you in terms of your career (e.g. is it a better job than you had before, more interesting, more challenging, has long term potential for career advancement)?
8. How do you think your employment here has also brought wider benefits to Woodside? (e.g. increased expenditure in the local shops)
9. What are the skills and qualifications that are most important to your role (e.g. enjoys working with people, a certificate or degree in a certain area)?
10. What do you think might help other people become employed here? (e.g. training, graduate programs, career information days)
11. What has been the reaction from family, friends and neighbours to your working at the APOD?

Thank you for your contribution, I really appreciate it. Your participation will help make the analysis of the social impact as accurate as possible, and will help me make recommendations that will be useful to DIAC, Serco and the community and its residents.

Kind regards, Danielle