An evaluation of service effectiveness of selected refugee service providers in urban and surrounding areas of the Cape Town Metropolitan Area

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ABSTRACT

Thousands of refugees fleeing from surrounding war-torn and destitute African countries come to South Africa hoping to live in safety. Refugee service providers play a major role in providing services to help refugees to rebuild their lives and integrate into South African society.

The article investigated issues facing refugees in South Africa, particularly in central Cape Town. It aimed in general to determine how effective refugee service providers, non-governmental organisations (NGOs), namely the Agency for Refugee Education, Skills Training and Advocacy (ARESTA), the Cape Town Refugee Centre (CTRC) and the Scalabrini Centre of Cape Town (SCCT) assist them in overcoming the hardships of being unprepared in a foreign country, and whether their clients are satisfied with their services.

The objectives of the article were to identify the kinds of programmes offered and how they are delivered; to explore refugees’ perceptions about services offered by refugee service providers in Cape Town; to identify the service providers’ strengths, weaknesses, opportunities and threats (SWOT); and to develop and provide a framework for refugee service providers in Cape Town to improve their service delivery. The article also examined how sharing, or not sharing information affects the efficacy of services such as education, vocational skills and self-reliance projects.
INTRODUCTION

Thousands of refugees flee from surrounding war-torn and destitute African countries, coming to South Africa in the hope of living in safety. South Africa is a country with high levels of unemployment and poverty (Tregenna and Tselu 2008:3) and most refugees need assistance with basic necessities such as food, clothing and shelter. Refugees also need to find employment to sustain themselves and their families, and to achieve self-sufficiency. Several refugee service providers in Cape Town aim to assist and support this needy population to rebuild their lives and integrate into South African society, and to make this difficult transition easier. Delivering services to refugees in urban centres involves the interaction of multiple types of services and organisations.

Services provided by refugee service providers include:
- Information, orientation and referrals.
- Accommodation services.
- Interpreting and translating.
- Counselling.
- Lobbying and advocacy.
- English classes and training.

As many of the asylum-seekers and refugees come from non-English speaking countries, English language training is essential for them to be able to communicate and integrate into South African society. Different types of training provide refugees with opportunities to become self-reliant, start-up small businesses and secure other forms of employment, thereby becoming less dependent on relief, and rather contributing to the South African economy (ARESTA 2008:4).

A study by the Community Agency for Social Enquiry (CASE 2003:13) found that a large number of refugees were unaware of refugee service providers, the services they provide and criteria they utilise to provide assistance, because there was no systematic, coherent way of conveying information to refugees upon arrival. Furthermore, CASE (2003:13) found that applicants living in Johannesburg and Pretoria were significantly more likely to know where to go for assistance, whereas applicants in Cape Town were the least to know.

The following questions provide a focus for this study:

The study revealed that the majority of clients (75%) received assistance, and only 6.67% reported not having received the requested assistance. However, some who had received services indicated too few services were on offer for them to choose from. The study also found that the reasons some refugees do not get services include lack of proper documentation and problems related to the non-availability of the services required by refugees. This is largely due to insufficient funding to provide needed services, and results in refugee service providers either serving only a few people or providing insufficient aid. The article highlights good practices, suggests improvements and concludes with recommendations.
What kinds of services do the selected service providers offer to refugees, and to what extent do refugees receive these services?

How do refugees perceive these services?

What capacity do the selected service providers have to effectively deliver the required services to refugees?

What measures could promote better services to refugees in Cape Town?

The article followed a mixed methods approach, implementing both qualitative and quantitative research methods to explore services provided by the three refugee service providers. Quantitative data was collected by administering a survey questionnaire to 120 refugees, all clients of the selected service providers, to obtain their perceptions about the services they receive. Semi-structured interviews with senior staff of two of the service providers provided insight into the services offered and challenges they face in assisting their clients.

CONCEPTUALISING THE REFUGEE PHENOMENON

The United Nations High Commissioner for Refugees (UNHCR 2010) reports that there were 43.3 million forcibly displaced people worldwide at the end of 2009, the highest number since the mid-1990s. Of these, 15.2 million were refugees. UNHCR (2010) estimates that more than half of the world’s refugees reside in urban areas and less than one third in camps. Some of the main reasons that compel people to flee their home countries are among others wars and conflicts, environmental factors and violence against women.

Iqbal and Zorn (2007:200–213) state that civil wars rank high in creating conditions that drive people out of their homes due to fear for their lives during combat, fear of capture by the opposing side or fear of political repression. Some groups fleeing their homes during violent conflict become internally displaced, while others become refugees by migrating to another state. Importantly, in addition to deciding to leave their home states, refugees also have to decide on a destination state. Conditions in the target state, including the presence and degree of civil conflict, affect refugees’ migration decisions. Hamilton (1999:5) agrees that one of the most obvious forms of violent conflict that may generate refugees is international war.

Adding to conflicts and wars, there are also environmental causes. Although environmental factors have produced fewer emigrants and refugees than conflicts, ecological pressures on population displacements cannot be underestimated. The African Union (2008:11) and UNHCR (2010:3) document massive displacement resulting from climate change and natural disasters, in addition to civil war: in the East and Horn of Africa, located in a fragile ecosystem, severe floods displaced more than 400 000 people in Somalia in 2006, and heavy rains caused flooding in several West African countries and a landslide in Uganda, affecting thousands of people.

Attention is also being drawn to serious problems involving rape, beatings, torture and mutilation that women and children around the world are subjected to, including female genital mutilation (FGM). The practice of FGM poses significant harm to women in sub-Saharan Africa and parts of the Middle East and Asia (Rice 1999). Zohry and Hassam-el-Din (1997) argue that FGM is considered as a kind of violence prevailing against females in developing countries. It is an old practice in some African countries, but its history is not clearly known.
Williams (2000:10) states that after being granted refugee status, refugees are entitled to the protection of the government in terms of international human rights law. However, many refugees do not receive material or practical assistance from either the government or UNHCR, which exposes them to extreme hardship and suffering. Finding food, accommodation and jobs is a daily struggle for many refugees.

Main barriers facing refugees

A study conducted in Britain by the Refugee Council of Brent, cited in Peabody Trust (1999:20, 21) identifies the main barriers refugees face in Britain, as highlighted by the refugees themselves, as:

- Language.
- Lack of work experience.
- Racial discrimination.
- Uncertainty of immigration status.
- Lack of information about the labour market and how to find jobs.
- Little or no work available for them.
- Skills not usable without re-training in professions.
- Lack of recognition of qualifications from abroad.

The study also confirmed that although people who spoke English had a much better chance of finding jobs, the unemployment rate of refugees was still 48% (Peabody Trust 1999:79). Jacobsen (2004:58) discussing urban refugees, the reasons they go to cities and the levels of aid to urban areas and camps; states that urban refugees find their way to towns and cities for various reasons. An assumption exists that most refugees originate from urban socio-economic backgrounds and choose to come to towns because they cannot farm or pursue livelihoods in rural areas and camps. Refugees also move to urban centres when food aid is cut off in camps. In countries that permit refugees to live in urban areas, such as South Africa and Egypt, little assistance is provided compared with that available in camps.

Urban refugees

Jacobsen (2004:61) notes that urban refugees face the same economic problems as the urban poor: scarce jobs, housing, no credit and banking services, crime and political marginalisation. However, refugees and asylum-seekers face additional challenges. Having borrowed money to make their journey or because they are living on the goodwill of locals, they often owe large debts to family members or others. The authorities restrict refugees’ right to work, grant little or no public assistance and require documentation. In addition, the local population and law enforcement agencies often react to refugees, as to urban migrants generally, with xenophobia, ranging from ignorance and resentment to harassment and violence. On the other hand, Jacobsen (2004:64) argues that urban refugees can easily be an economic asset, rather than a burden, to cities in the global South and suggests developing countries need to harness the economic power of the informal sector by creating or smoothing the passage of informal sector businesses into the formal sector. Many urban refugees are entrepreneurs whose economic contributions to the city can be
maximised by implementing their right to work and freedom of movement. State authorities that create obstacles to refugees’ livelihoods, through backlogs of status determination or police harassment, not only prevent refugees from pulling their economic weight, but create environments of resentment and rule-breaking (Jacobsen 2004:64).

Buscher (2003:3) recognises there has often been a ‘premise of advantage’ attached to urban refugees. An assumption prevails that as they are in cities; urban refugees have access to money, connections and opportunity and, hence, are in less need of assistance than camp-based refugees. As a result, urban refugees are often under-served and/or subject to inconsistent application of assistance. In fact, Buscher (2003:3) argues that urban refugees are more likely to be detained, face discrimination and racially motivated attacks, be subject to deportation and suffer serious human rights abuses such as sexual violence and arbitrary arrest.

SOUTH AFRICA: FROM THE REFUGEE-PRODUCING COUNTRY TO ONE RECEIVING REFUGEES

Since the advent of democracy in 1994, South Africa has shifted from being a refugee-producing country to one receiving refugees from across the African continent and beyond, because asylum-seekers perceive it as a viable and safe destination (Winterstein, cited by Lanzi Mazzocchini 2008:26).

The UNHCR (2008b:190) reports that in 2008 South Africa was hosting approximately 37,000 refugees, mostly from the Democratic Republic of Congo (DRC), Somalia, Burundi and Angola, and some 137,000 asylum-seekers, the majority of which were from Zimbabwe, DRC, Somalia, Ethiopia and Burundi. It also reports (2008:190) that a significant number of asylum-seekers came from Asian countries such as India, Pakistan and China. A steep increase in the refugee population in 2006 was mainly attributable to Zimbabwean asylum-seekers, a trend that is likely to continue and may even increase given the continuing unstable political situation in Zimbabwe. The majority of refugees live in the main urban centres of Johannesburg, Pretoria, Durban, Cape Town and Port Elizabeth (UNHCR 2008b:190). De la Hunt and Gass, cited by Lanzi Mazzocchini (2008:26), reveal that the majority of asylum-seekers in South Africa are young males between the ages of 18 and 40.

Legal context of refugees in South Africa

The NCRA (2006:2) argues that by signing the United Nations and African Union Refugee Conventions and developing its own Refugees Act in 1998 (promulgated in 2000), the South African government has made important strides in protecting people who have been compelled to leave their countries of origin as a result of fear of persecution, violence or conflict. With this legislation, the following rights are guaranteed by law to refugees and asylum-seekers.

- Not to be returned to their country of origin or any other country, if doing so would place their life or security at risk.
- The right to work and study from the moment they lodge an asylum application.
- Access to health care, public relief, and assistance.
To have their asylum applications adjudicated in a manner that is lawful, reasonable and procedurally fair, which includes the right to appeal a negative decision on asylum claim.

- The right to freedom of movement and not to be arbitrarily arrested and detained.
- The right to legal representation.

However, the NCRA report stresses that accessing these rights is far from easy (NCRA 2006:3).

Refugees’ needs in South Africa

Rather than warehousing refugees in isolated camps or detention facilities, South Africa encourages refugees to live in its cities where they can work and contribute to society. Yet despite South Africa’s relative wealth and development, urban refugees encounter many of the same problems in Johannesburg as in other African cities and cities of the global South (Jacobsen 2004:57).

According to Schreier (2006:47), the lack of material assistance programmes for refugees in South Africa and their inability to access most social welfare grants means that they rely on their own means to support themselves.

Serious impediments to refugees’ integration in Cape Town are highlighted by Kemar (2006:83) of the City of Cape Town:

- Poverty is pervasive, with 115 000 families living in informal settlements in 2006 (up from 23 000 families in 1993); the number of households below the poverty line increased to 38% in 2005 from 25% in 1996.
- Unemployment in the City of Cape Town grew from 13% in 1997 to 23% in 2004.
- The high crime rate causes fear and mistrust that leads to fragmentation and polarisation in the city.
- The apartheid legacy of social and special segregation is pervasive and acute inequality persists.

Kemar (2006:83) recognises that these factors necessitate deliberate and conscious approaches to foster social cohesion and unity. In addition to these impediments, there is a xenophobic attitude among some South Africans. According to McKnight (2008:18), the xenophobic attacks that began on 11 May 2008 in Johannesburg’s Alexandria Township left 62 people dead, and at the time constituted the worst violence in the country since the end of apartheid.

CASE (2003) investigated why applicants lacked knowledge of where to go for assistance and found there were no formal referral mechanisms in place to ensure refugees are able to obtain assistance upon arrival in South Africa. Referral often happens informally, by word of mouth. While some Refugee Reception Offices (RROs) provide information to new arrivals this does not happen in any standardised way. While RROs seem to be the most logical place for refugees to obtain advice or assistance, the actual conveyance of information at RROs depends on individuals and sometimes on whether refugees ask for this information directly. The CASE (2003) report showed some RROs were willing to provide this information, but others did not perceive it to be their responsibility to do so. Applicants who knew where to go for assistance sometimes complained about the poor quality of assistance they received or the fact that they received no assistance, despite asking for it.
CASE (2003) was unable to assess the quality of assistance provided by each organisation, but emphasised that applicants were not aware of the criteria used by different service providers to render assistance. Amongst its recommendations, CASE (2003) suggests that service providers conduct information campaigns, possibly in the form of public meetings, to inform refugees about the services they provide and criteria they use to extend assistance. Service providers within each of the cities of the study should strengthen their coordination of assistance to limit duplication of services and enable a larger number of refugees to be assisted. Working closely with religious organisations might allow them to reach a large number of refugees within a setting they feel safe and comfortable in (CASE 2003:20–28).

Given this background, an updated assessment of how services are perceived by refugees in Cape Town was required to improve service delivery in a coordinated manner. A number of refugee service providers operating in Cape Town attempt to assist refugees and asylum-seekers. Nevertheless, most refugees and asylum-seekers are literally unaware of where to go for assistance when in need; and many do not receive the assistance they require when they do approach refugee service providers operating in their area. In view of this deficiency, this study investigates the provision of services at three refugee service providers in Cape Town, and the effectiveness thereof.

RESEARCH APPROACH, RESULTS AND FINDINGS

The empirical material for this article followed a mixed methods approach by implementing both qualitative and quantitative research methods to explore services provided to refugees in Cape Town. Quantitative data was collected through the administration of a survey questionnaire to refugees, while qualitative data was collected by conducting semi-structured interviews with senior staff at two refugee service providers in Cape Town.

The survey and interviews were conducted in Cape Town at organisations where refugees go for assistance: ARESTA, located in Athlone; CTRC in Wynberg and SCCT in the City Bowl. Respondents included refugees who sought assistance at these organisations, those who did receive and those who did not receive the required services. The survey participants were selected by means of stratified random sampling methods. It is a two-step process that partitions the population into subpopulations, strata or groups, after which elements are selected from each stratum by a random procedure.

The questionnaire was distributed at the premises of the selected organisations which refugees visit daily to seek assistance. The selected service providers identified clients who had received assistance, and some who did not receive any assistance for various reasons. The target number of respondents chosen for the sample was 120 refugees and asylum-seekers; 40 respondents per organisations.

The two interviewees, senior management staff, were based at ARESTA and CTRC. The interviews were designed to investigate the organisations’ perceptions of their clients and what their capabilities to provide services were. It was planned initially to also interview the Director of Scalabrini Centre but time constraints did not allow this.

Data collected was analysed according to statistical principles as contained in the Statistical Package for Social Sciences (SPSS) to generate statistical information, including frequencies, and their significance. Results are presented in both tables and charts.
Demographic profile of respondents

The research focused on refugees who have settled in the Cape Town Metropolitan region and who are clients or prospective clients of three selected refugee service providers.

Table 1: Distribution of respondents across the selected refugee service providers

<table>
<thead>
<tr>
<th>Refugee service providers</th>
<th>Respondents</th>
<th>Percentage</th>
<th>Graph</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARESTA</td>
<td>40</td>
<td>33.33</td>
<td></td>
</tr>
<tr>
<td>CTRC</td>
<td>40</td>
<td>33.33</td>
<td></td>
</tr>
<tr>
<td>SCCT</td>
<td>40</td>
<td>33.33</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>120</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

Table 1 shows that there was an even distribution in respondents’ place of survey. A total of 120 respondents were surveyed, 40 each at CTRC, ARESTA and SCCT. This is because the researcher distributed an equal number of questionnaires at each organisation.

Table 2 shows the gender of respondents who took part in the survey.

Table 2: Gender of respondents

<table>
<thead>
<tr>
<th>Respondents’ gender</th>
<th>Respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>55</td>
<td>45.83</td>
</tr>
<tr>
<td>Female</td>
<td>65</td>
<td>54.17</td>
</tr>
<tr>
<td>Total</td>
<td>120</td>
<td>100.00</td>
</tr>
</tbody>
</table>

The Table shows that 45.83% of respondents in the survey were male and 54.17% were female.

Figure 1: Age of respondents

<table>
<thead>
<tr>
<th>Age</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;20 years</td>
<td>11.67</td>
</tr>
<tr>
<td>21–30 years</td>
<td>39.17</td>
</tr>
<tr>
<td>31–40 years</td>
<td>36.67</td>
</tr>
<tr>
<td>41–50 years</td>
<td>10</td>
</tr>
<tr>
<td>51–60 years</td>
<td>1.67</td>
</tr>
<tr>
<td>&gt;60 years</td>
<td>0.83</td>
</tr>
</tbody>
</table>
Figure 1 displays the age categories of respondents indicating that the majority of respondents (39.17%) were in the age category 21 to 30 years, followed by those between 31 and 40 years (36.67%). The under-20 category (11.67%) placed third, while the last two age categories, 51 to 60 years and older than 60 years constituted 1.67% and 0.83%, respectively. It is clear that the majority of respondents seeking assistance are young adults.

Figure 2 provides the respondents’ countries of origin and shows that respondents came from 12 African countries. The largest group came from DRC (31.7% of respondents), followed by Zimbabwe (20.8%). These were followed by Burundi, Rwanda and Somalia.

Figure 3: Marital status of respondents
which together accounted for 31.6% (Burundi, 10%; Rwanda, 10.8%; Somalia, 10.8%). Other countries represented included Congo (3.33%), Angola (2.5%), Tanzania (2.5%), Cameroon (2.5%), Malawi (1.67%), Mozambique (1.67%) and Uganda (1.67%).

Figure 3 illustrates the marital status of the respondents and indicates that the sample was dominated by unmarried or single (49.17%) and married respondents (37.5%). The remaining 13.33 (8.33+5) were divorced or widowed.

The respondents’ occupational status as illustrated in Figure 4 shows a significant majority (75%) of respondents reported being unemployed, while 15% reported being employed and self-employed. Respondents reporting being students constituted 8.33%, while 1.67% did not disclose their occupation. A possible explanation is that people who visit refugee service providers are normally those refugees who are most
vulnerable; hence most of them are without employment, but some may have odd jobs, such as car guarding.

Figure 5 captures the relevant data regarding documentation respondents held and indicates that among the respondents 61.67% held a Section 22 permit issued in terms of the Refugees Act, 1998 which means they were classified as asylum-seekers; 22.5% had a Section 24 permit, meaning they were recognised as refugees in South Africa, while 12.5% possessed refugee ID books. Other respondents, including those whose applications had been rejected and those who had launched an appeal, had other types of documentation.

Refugees’ evaluation of services received from service providers

The sections below captures the results of the refugees’ perceptions about services offered by refugee service providers (see Abstract).

Respondents’ experience of problems in acquiring documentation

Although this study excluded services offered to refugees by government agencies, because of the requirement of refugees’ documentation to get them other services, respondents were asked if they had encountered any problems in their attempt to secure documentation. 40% of respondents experienced their attempt to acquire documentation at the DHA as being problematic, while almost 60% indicated they had not experienced any problem in acquiring documentation. The fact that 40% of respondents reported encountering problems at the DHA is alarming given that it is critically important for refugees to have documents to access services offered by refugee service providers, government services and private institutions such as banks, and when applying for jobs or enrolment at schools.

The main problem encountered by respondents was the documents issued to them by the DHA itself: 39% of respondents indicated that documents they had been issued were hardly recognised or accepted by third parties, thus preventing them getting assistance from other stakeholders such as schools, employers, businesses, traffic departments and most financial institutions. Almost 16% of respondents reported that the problems encountered related to rejection on grounds of language, while other major problems related to administrative inefficiency and slow service. Refugees’ seeking documentation reported the language barrier to be a major problem as they do not understand the language or the forms to be filled in.

Assistance on respondents’ first arrival and how they came to know about the refugee service provider

Only 32.5% of respondents received assistance when they first arrived in Cape Town, while 67.5% reported not having received any assistance on first arrival.

Respondents were asked how they came to know of the service providers on whose premises the survey questionnaire was administered. The question was intended to assess how prospective clients of the service providers became aware of these organisations, because the literature review revealed that there were no formal referral mechanisms in place to ensure refugees were able to obtain assistance upon arrival.

The majority (78.33%) of respondents learnt about the refugee service provider through referral by a friend. About 8% were referred to the service providers by the DHA, and
another 7.5% indicated they had been referred by other organisations. Some respondents became aware of these service providers through efforts made by refugee organisations at the DHA. A small percentage (0.8%) indicated they had been made aware of a particular organisation from information received at the border, although the source was unknown. About 6% indicated they had become aware of the refugee service providers through other means such as own search, Internet search and other searches.

**Level of assistance respondents had received from refugee service providers**

Figure 6 captures the level of assistance respondents had received from refugee service providers. A majority (75%) of respondents reported having received assistance whereas 6.67% reported not having received the requested assistance. During the period of the survey 18% of the respondents indicated that they were still waiting for the requested services. The following sub-section sheds light on the reasons why respondents would want to attend training provided by refugee service providers.

**Reasons for training**

85% of respondents wished to complete training to obtain a job or to enhance their prospects for a job. A further 6.25% underwent training to improve their ability to perform their current job and 4.17% wished to undergo training for their own personal satisfaction. Other respondents (4.17%) who wished to return voluntarily to their countries of origin in the near future, because of security concerns or dissatisfaction with living in South Africa, wanted to undergo training which would assist them on their return home. Others wished to resettle in a third country and wanted to complete a course which would assist them in a new country.

**Frequency of respondents’ need for assistance**

Respondents were asked how often they needed assistance from the refugee service providers; 55.26% of respondents needed assistance sometimes, while 38.59% were in
need of assistance regularly. Respondents who rarely needed assistance constituted 6.14%.
The results show that refugees who visit the refugee service providers are either always or
sometimes in need of assistance.
Respondents who indicated they only required assistance sometimes included those
who sought guidance for training to acquire vocational skills (to find work or start their own
businesses), while those needing regular assistance comprised vulnerable people such as
refugees with disabilities, the elderly and unemployed parents with children.
Respondents who indicated that they did not receive assistance as requested were asked
the reasons why they think they did not get it.

**Reasons expressed by respondents for non-assistance**
The majority (44.83%) reported they were told by the service providers approached
that lack of funds and resources were the main reasons they were not assisted. This was
followed by those who indicated that the services required were not available (13.78%),
while lack of proper documentation was cited by 10.35% for being denied services. Another
10.35% reported being helped only once while they needed assistance more than once.
The remaining respondents included those who reported they were not helped because that
particular service required payment (10.34%) and one respondent (3.45%) who was denied
assistance for not having a bank account. (Sometimes clients are required to have a bank
account so that money can be deposited into their account).

As already discussed, it is not always easy for refugees to open a bank account as many
banks are uncertain of the validity and reliability of the official documentation. In most
cases, refugees were requested to provide proof of address, which was difficult due to the
nature of their living arrangements or the work they undertake. Some respondents indicated
that because of high rents, they shared crowded rooms, sometimes without the knowledge
of the landlord, hence the difficulty in obtaining proof of residence. This was confirmed by
Lanzi Mazzochini’s study (2008:103), conducted in Cape Town among refugee students,
which showed that 85% shared a one- or two-room apartment. In the majority of the cases,
a minimum of three people shared one room and, in many cases, an average of between five and seven people shared a two-bedroomed apartment. Some male students indicated they slept in their room in shifts and had only one room at weekends as they were absent during the week working night shifts. Others who were also working night shifts stated that they stayed with friends at weekends (Lanzi Mazzochini, 2008:103).

Figure 7 illustrates respondents’ views on the service provided by refugee service providers and the majority (75.43%) of respondents rated the services positively (excellent and good), whereas 18.64% rated the services received as fair. Only 5.93% rated services as poor.

Correspondingly, 64.84% of respondents indicated that the way they were received when they approached refugee service providers was good. Collectively, all the positive responses indicate that the vast majority (92.3%) of respondents rated the way they were received positively. Conversely, only 2.2% of the respondents remained neutral in rating the way they were received, while 5.5% indicated that the reception was negative.

**Relevance of service provided to respondents’ needs**

With regard to the relevance of service provided to respondents’ needs, a slim majority (53.51%) of respondents were of the view that the services provided by refugee service providers were relevant to their needs, while 46.49% thought the services were irrelevant. This latter figure is also significantly high.

**Services suggested by respondents**

Participants proposed improvements to the provision of services, grouped into four categories: Assistance in documentation, enough help, additional services and jobs. Services that were said to be inadequate included rent for the elderly. Respondents explained that most of those receiving this kind of help cannot work because of advanced age and do not have anyone else to support them, but still only receive, at best, a third of their required rental money or school fees for primary and high school for their children or grandchildren. Regarding vocational skills training, some respondents said that the organisation provided full-time training for a period of about three months; but this was problematic because during this period people cannot work to feed themselves or their families. If trainees could not secure financial support for transport and rent during the training period, finishing the course would be difficult.

Another male refugee from the DRC, a 43 year-old carguard at a mall in Cape Town who had been in South Africa for four years, reported how he had been unable to attend English class during this time because he could not afford to miss even one day of work:

“If I miss one day it means I will struggle to pay the rent or to feed my family of five. My wife couldn’t attend English class either or any other training because two of our children are too small and we could not afford the childcare”.

In their case, if the refugee service provider could have assisted them with transport and childcare costs at least his wife would have attended English classes and a vocational skills training programme, which could possibly have led to a good job.

Furthermore, respondents identified financial help, courses and training based on what the clients want, food assistance for new arrivals, housing, income-generating activities, medical help, rent support, scholarships for college and higher institution, speedy translation
services and assistance with SAQA concerning academic qualifications obtained in refugees’ countries of origin as additional services.

The issue of translating degrees or certifications obtained in their countries of origin was very important for respondents. Refugees need SAQA certification mostly to apply to higher institutions to continue their studies or obtain documents when applying for employment. Respondents knew the service existed at CTRC, but they said it was ineffective. As one respondent wrote “you hand in your qualification and you have to wait between eight months and a year; the evaluated documents will come when you no longer need them”. During the interview with the Director of CTRC, she acknowledged that processing qualifications is a long process, but blamed it on SAQA. They had raised the issue with SAQA and hoped that from 2014 things would improve.

Other issues raised by respondents were those of housing or accommodation and that of banking. Several respondents said paying rent was very difficult for them. They were obliged to live in very crowded houses to be able to afford rent.

Regarding training, respondents indicated that they were given very little choice when it came to training. Respondents reported that, in most cases, they do a vocational skills training course not because they like it, but because it is the only one available or the only one refugee service providers can afford. This indicates that most clients approach refugee service providers looking for specific types of assistance. However, when they are told what they are looking for is unavailable they opt for what is available.

**Barriers preventing refugees from using services**

The majority (57.55%) of respondents identified lack of information as the greatest barrier to using services of refugee providers. About 22% indicated non-availability of transport to get to service providers, and 7.55% indicated they were requested to pay or contribute, but could not afford it. Almost 6% of respondents indicated they were not well received when they approached the refugee service provider and decided not to return. About 3% indicated that their employers did not allow time off, and 2% had no one to care for their children.

**Additional comments and details from respondents**

Respondents gave thoughtful insights into how services offered to them could be improved. Most agree that services provided to them are not adequate, and raised the issues of either lack of awareness of availability of services as well as frustrations about being told to come back many times without having received help, or having been obliged to take up available services which were not their primary request. Respondents called for more choices when it comes to services offered to them.

Other respondents ask the government of South Africa to be more involved and create special programmes for refugees.

The issue of communication kept arising. Respondents said that when they arrived as newcomers they didn’t know where to go or who to ask.

Beside challenges, some respondents argue that refugees also need to do their part and cannot expect that refugee service providers will do everything for them.

**Interviews with two senior staff members**

Interviews were conducted with two senior staff members from ARESTA and CTRC to validate the results gathered from the survey.
The two senior staff noted that refugee service providers provide the following services, among others: advocacy; basic education; skills training, self-reliance and income-generating activities, and job hunting skills; temporary accommodation for newly-arrived refugee women and children; psycho-social programmes and social welfare interventions.

Other services are provided by other organisations even though they were not analysed by this study. Those services include support for those with HIV/AIDS, gender equality and human rights workshops provided by Sonke Gender Justice, and legal advice provided by the UCT Law Clinic and Legal Resource Centre.

Priority in providing services is given to the most vulnerable. To be assessed, refugees need to provide proof that they are in possession of valid refugee documentation.

Asked why many people said that it takes long to get help, they replied that it was because of circumstances and non-availability of the services required and budget constraints and the scramble for funds among NGOs as big challenges hindering effective service delivery.

With regard to the issue raised by respondents of not being aware of refugee service providers or where to find them, the CTRC Director admitted there might be people in need who do not know about organisations helping refugees, but thought most refugees were aware. She explained why they do not advertise their services:

“We are struggling to satisfy those who came to us, we try to assist above 10 000 people per year. Imagine if we advertise; where are we going to get help for those who will come as a result of the advertisement?”

She insisted that they render quality services, but they cannot reach everybody and underlined that they will still select the most vulnerable for assistance.

The Director gave examples of the impact on people assisted, such as people having been assisted to do vocational skills who are now working and taking care of their families; children being assisted with school who are graduating; those assisted to start businesses which are now flourishing and becoming sustainable.

The Director acknowledged the dissatisfaction of some respondents as reasonable, but said most of it is related to the fact that people still mistake what services they are able to provide.

The majority (75%) of clients who approached the refugee service providers received assistance. However, some of them indicated that they could only choose among the limited available services on offer, which were not always the services the client needed at the time.

The reasons some refugees do not get services include lack of proper documentation; non-availability of certain services required by refugees and insufficiency of funding, which limits the number of people refugee service providers can serve, and level of material aid provided.

No formal communication channels exist to inform new refugees about refugee service providers and the services they provide. Refugee service providers refrain from advertising their programmes fearing an influx of clients whom they cannot accommodate and serve. While the reasoning behind this may be acceptable, it has the consequence of potential clients being ignorant of services provided.

The majority (64.84%) of respondents indicated that the manner in which they were received when they approached refugee service providers was good.
The referral system was being done poorly and was not structured. Training is very important for the self-reliance of refugees. However, lack of transport, childcare and other complementary assistance impedes their full success.

New technology has a place to improve services delivered: clients requested to be notified by telephone calls, SMS and even by e-mails.

Refugees coming from non-English speaking countries need to learn English first and afterwards undergo other training. Respondents presented a number of barriers to learning English. One was the difficulty of focusing on learning the language when there were a number of competing issues to which refugees must attend. Refugee women, in particular, found it difficult to learn English while they need to take care of small children at home and cannot afford childcare. Some communities, especially the Somalis, do not allow their women to go to school. Also, refugees who have a chance to learn tend to forget easily because they do not practice it.

The majority of respondents (53.51%) think that services provided are relevant to their needs. However, the percentage of respondents (46.49%) who think differently is significant.

Senior staff at two refugee service providers who were interviewed reported that there is collaboration between refugee service providers themselves and with the UNHCR. They meet monthly to share development of their work and try to resolve issues. ARESTA reported that it sometimes co-organises events or programmes with CTRC or SCCT, such as the Refugee Day celebration. SCCT has worked together with CTRC on a number of programmes such as caring for refugees who were affected by xenophobia. All three refugee service providers reported that they refer clients to one another. However, respondents complained that the referral system did not work effectively, for example referring someone without enquiring if the service for which he/she is being referred is available. The problem of funding affects all three refugee service providers.

**CONCLUSION AND RECOMMENDATIONS**

It is recommended that the DHA revise its system to ensure refugees’ documentation is given timeously to all those who require them; resumes the information sessions that were taking place at its reception offices while refugees are waiting for services; and meets with a high-level panel from refugee service providers to discuss ways of ending the crisis in documentation.

It is recommended that service providers meet with SAQA authorities about reducing the delays in evaluating refugee qualifications.

Refugee service providers and the UNHCR must strengthen the orientation and guidance programmes they offer, because weak orientation programmes have a negative impact on the future of people who were not properly oriented in the first place.

Refugee service providers, in partnership with the government and the UNHCR, should find alternatives to bank loans to assist refugees who would like to start businesses.

It is recommended that instead of refraining from communicating and advertising their programmes, as suggested by the Director of CTRC, refugee service providers should improve communication among themselves, their clients and stakeholders.
Other communication efforts suggested by this study that could be embraced to inform refugees about programmes of interest include distributing flyers in schools, agencies, churches and malls; newspaper advertisements and advertisements at bus stops and train stations. All the communication tools should take into account the languages spoken by refugees.

Refugee service providers must seriously consider the situation of refugees who are willing to learn English, but cannot afford to miss work by instituting evening or weekend classes to accommodate them.

Vocational skills training being offered by refugee service providers appears necessary but not effective, because of lack of follow-up and the fact that training and services are, in most cases, offered at superficial levels only. For example, there is a need to rethink the wisdom of paying for a short (two-week long) course in plumbing for 10 clients who will end up not being hired and using the skills acquired because no one believes in the usefulness of a two-week plumbing course. It is recommended that refugee service providers look at the quality of services and the impact such services are making in individuals’ lives. Refugee service providers should be flexible and ready to accommodate individual’s needs.

Financial security is essential for sustainability. As the funding problem affects not only the refugee sector, but the whole NGO sector, it is recommended all service providers look at alternative ways to fund their activities and ensure they have effective mechanisms and techniques in place to enable them to carry on their activities and build sustainability. Fundraising should not be a task for only the Director or CEO of service providers. It is recommended that board members be utilised to assist, or professional fundraising consultants hired.

In addition to securing finances, service providers need to strengthen planning, governance, transparency and accountability.

Refugee service providers should devise ways to limit their reliance on donor funding; for example initiate social enterprises that generate income. Examples include sharing offices, sharing the cost of some staff, getting contracts from the government, using volunteers, targeting individual donors and starting commercial ventures such as fitness clubs, selling art and crafts made by refugees, running computer courses and Internet cafés, establishing catering and restaurant facilities that sell foods from countries refugees come from, engaging in housing projects, transport and other projects. However, refugee service providers need to be cautious in adopting these measures in order not to lose the focus of their main objectives.

The main constraint encountered in the conduct of the study was obtaining accurate data relating to refugees in South Africa and, in particular, in the Western Cape. Time and financial constraints limited the sample size to only 40 clients in each of only three refugee service providers and only two senior staff members.

The article has revealed areas that need further research in the field of refugees’ welfare, and to identify more effective ways in which refugee service providers could improve their services. There is also a need for further studies to assess refugee service providers’ interventions with a larger group, using a bigger sample. For example, a new study could include more refugee service providers and use different methods, including more qualitative methods (interviews and focus groups), to collect data from clients to obtain more insights from refugees.

One of the objectives of this article was to develop and provide a framework for refugee service providers in Cape Town to help improve their delivery of services. Although some
recommendations have been made, more research needs to be done to construct a proper framework. Finally, this research should be replicated with other refugee service providers nationally to reflect the broader situation of refugees living in South Africa.

NOTES

1  Joseph Eliabson Maniragena is a master’s student in Public Management and CPUT.

2  Prof Harry Herbert Ballard is the Head of the Department of Public Management, Faculty of Business at the Cape Peninsula University of Technology (CPUT) and supervisor of JE Maniragena.

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