



EU SUMMARY OF STATE OF ART REVIEW



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1. ANALYSIS OF THE INFORMATION

1.1. SUMMARY OF THE DESKTOP RESEARCH BY COUNTRIES

1.1.1. Definitions

1.1.1.1. Definitions in Italy (Palermo and Perugia)

Immigrants are those going to other country seeking employment. **Migrants**, that is people who move to another country voluntary and whose situation can be regular or irregular, and the term **Asylum Seekers is not used**. A refugee is defined as a citizen who on the basis of well-founded fear of being persecuted for reason of race, religion, citizenship, etc. and who is not in a position to ask for international protection (Geneva Convention 1951). **Not all terms are used**.

Italy is among the few European countries to proclaim a right to asylum in their Constitution. Respecting the law: of a “foreigner who, in his home country, is denied the actual exercise of the democratic freedoms guaranteed by the Italian constitution shall be entitled to the right of asylum under the conditions established by law”.

In relation to migrants: where they are in country without any visa to remain then they will be returned to their country. Italy has many problems with illegal migrants and they are trying to reduce these problems. CIR (Italian Council for Refugees) has suggested that repatriation should be performed in the majority of cases through voluntary or assisted return, with the development of programmes for reintegration. They suggest that processes that respect the dignity of the migrant make return more sustainable and are cheaper than forced returns.

1.1.1.2. Definitions in Ireland

Immigrants are those born outside Ireland, migrating to Ireland. A **migrant is** a person that has engaged a remunerated activity in the country where they not a national. **Asylum seeker** a person seeking to be recognised as a refugee under 1951 Geneva Convention, Ireland uses the definition of refugee from Geneva Convention 1951. **All terms are used**.

The Irish government seems to be taking an active role in updating policies and procedures in relation to migration. Some of these changes appear to be influenced by European Policy, pressure and a ground-swell of public opinion during the current global migration crisis.

1.1.1.3. Definitions in France

Immigrants are those born outside France, even though they obtain the French citizenship they still are classed as immigrants. **Migrants** are people who are born in another country but who have important social links established in that country. **Asylum seekers** are people that fled his country because being persecuted or who fear persecution and are asking for protection, if accepted he/she becomes a refugee and if not accepted an illegal immigrant. France uses the definition of refugee from Geneva Convention 1951. **All terms are used**.

French asylum law is heavily based on international and European law, but is largely codified in the Code de l'entrée et du séjour des étrangers et du droit d'asile (CESEDA, Code of Entry and Residence of Foreigners and of the Right of Asylum).

The CESEDA contains all the legislative texts currently regulating asylum rights in France. In addition, bilateral agreements (most notably with Algeria), multilateral agreements within the scope of the UN and the Council of Europe, and European legislation frame the legal regulations.

The judicial body for appeals in asylum cases is the National Court for Right of Asylum (CNDA). CNDA decisions may be appealed to the Council of State.

Currently, a new law Project « Loi Collomb » : « Asile et Immigration » is discussed by the National Assembly and the Senate.

Read more about the new law project : <https://www.gisti.org/spip.php?article5841>

1.1.1.4. Definitions in Germany

Migrants is used to describe people who leave a country (emigrants) and enter a new country (immigrant). **Immigrants** cover just the people who enter a country.. Germany uses the definition of refugee from Geneva Convention 1951. **Asylum seekers** are people who have applied for asylum but have not yet been granted it.. Asylum is granted for those who are persecuted for political conditions, political convictions. **All terms are used.**

1.1.1.5. Definitions by the UK

An Immigrant is a person who comes to live permanently. A **Migrant** is a person who comes to live temporarily. **Asylum seeker** means a person who has applied for asylum under the 1951 Refugee Convention. The UK uses the definition of refugee from Geneva Convention 1951. There is also a **Victim of Human trafficking** defining someone who suffers from the new form of slavery.

1.1.2. Process the people go through on arrival through being given leave to stay

1.1.2.1. Process in Italy

Sicily is a known hotspot for the arrival of the migrants and refugees, most of them move to other Italian cities or European countries. When they arrive in Sicily, they do not have the right to get beneficiary of international protection. They usually apply for humanitarian protection. Asylum seekers should present their asylum request as soon as possible when they arrive to Italy. Immigration legislation prescribes a deadline of 8 days from arrival in Italy for migrants to present themselves to authorities. Applying for the asylum involves a procedure called "fotosegnalamento".

International Protection Units (CTRPI), these units are located all over the national territory and they are the only authority who are legally able to carry out the substantive asylum interview, no police are involved. The interview with the applicant should be conducted by the CTRPI within 30 days after asking for asylum and then the decision is made within in 3 days. When the CTRPI is not able to make a determination within this time limit and needs to acquire new information, then the examination procedure is concluded within six months of the submission of the application. Normally, this takes between 6 to 9 months and in some cases 2 years.=



1. Hotspots. Actually there are Lampedusa, Taranto, Trapani e Pozzallo, soon there will be also Crotona, Reggio Calabria, Palermo, Messina and Corigliano Calabro. They identify, screen and filter the newly arrived men, women and children.

2. From Hotspots people are sent to First Aid and Reception Centres (CPSA) created in 2006 for the purposes of first aid and identification before persons are transferred to other centres.

3. First reception centres are: governmental centres for accommodation of asylum seekers (CARA), accommodation centres (CDA); Temporary Reception Centres (CAS), implemented by Prefectures in case of unavailability of places in the first or second accommodation centres.

4. Second-line reception is provided under the System for the Protection of Asylum Seekers and Refugees (SPRAR). The SPRAR, established in 2002 by L 189/2002, is a publicly funded network of local authorities and NGOs which accommodates asylum seekers and beneficiaries of international protection.

The migrants at the centres are stuck in bureaucratic limbo as they wait for their asylum applications to be processed, which takes anywhere between 12 - 18 months, therefore, people living there are very frustrated, feel isolated and frequently suffer from mental health problems. Some of them refuse to live in the accommodation offered and move to Rome hoping that when they are there, living on the streets, their asylum applications will be processed quicker. So, there are different NGO-s and local social workers who try to convince them to go back to the accommodation centres. Once the refugee status is granted, a renewable five-year residence permit is issued. After 10 years of residency in Italy, refugees may apply for citizenship. NGOs are helping them to resettle in communities in Italy

Refugees and protected persons have the right to the same treatment afforded to Italian citizens in matters of social and health assistance, including psychological treatment for previous torture and suffering experienced by them.

1.1.2.2. Process in Ireland

Resettlement is overseen at a national level by an Inter-Departmental Group chaired by the Office of the Promotion of Migrant Integration (OPMI) in the Department of Justice and Equality (DJE). The Irish Naturalisation and Immigration Service (INIS) was established in 2005 to provide a one-stop-shop for asylum, immigration, citizenship and visa services.

The whole resettlement application process is viewed by many as being very fragmented with seemingly little coordination between the various departments involved, many of whom are housed in the same building. Each month the Irish Reception and Integration Agency (RIA) publish statistics to show current flows and levels. They regularly inspect the various accommodation centres which are often privately owned.

1. The selection process - 'dossier method'. The politicians involved organise in-country visits and decisions are typically made within three months (Government of Ireland, 2013) however this fact has been debated after many months of delays in 2016.

2. The Preparation Process, involving medical screening, preparing visas and making travel arrangements, etc. This process typically takes a few months (Office of the Minister for Integration, 2008a) and has been the subject of much discussion during 2016/2017.

3. The Reception and Orientation process, which involves housing resettled refugees in reception centres for a minimum of six weeks where they undertake an orientation programme and health screening.

4. Resettlement and integration in a local receiving community, including preparing the receiving community nine months prior to the refugees' arrival.

5. Targeted integration support is available for one year to the refugee.

Ireland also has a Syrian Humanitarian Admission Programme. Many of the reports have been critical of the lack of resources and cohesion in the services provided through the programme thus far, and people migrating to Ireland are experiencing many different issues as they try to become settled in the new environment.

1.1.2.3. Process in France

People arriving in France they should register onto the Platform for Asylum Seekers (PADA) According to the law, it should be done within 3 days and processed within 10 working days. If there are no vacant place, the person will be oriented towards a PADA again that will "domiciliate" the person (so she can have an address), orient them towards emergency or other housing, help them with the completion of their demand of Asylum seeker to be addressed to the OFPRA.

The asylum seeker is given the "Asylum Demand File" that needs to be completed and sent to the OFPRA within 21 days. The non-profit organisations often support asylum seekers to complete the Asylum Demand File. This document needs to be written in French. Following this there will be a delay of about six months (average delay in April 2016) for them to have an interview of about 45 minutes to 2 hours

during which the Asylum seeker will have to answer questions about his identity, his family, his journey, and the reasons of his asylum demand. The OFRA has six months to then take a decision about the application, this time period can be increased to nine more months in complex case .

1.1.2.3. Process in Germany

Asylum Seekers whom border authorities permit to enter the Federal Republic of Germany or who are found in the country without a residence permit are transferred to the nearest reception centre of the relevant state. Using the nation-wide system for initial distribution, they are assigned to reception centres of the individual. German states according to a formula defined in the Asylum Procedure Act. Asylum Seekers receive a certificate of permission to reside which grants a preliminary right to stay in the Federal Republic of Germany during the asylum procedure.

If the asylum application is accepted, persons granted asylum status and those granted refugee status receive a temporary residence permit and are given the same status as Germans within the social insurance system. They are entitled to social welfare, child benefits, child-raising benefits, integration allowances and language courses as well as other forms of integration assistance.

As a rule, asylum seekers whose applications have been rejected are required to leave the country.

1.1.2.4. Process in the UK

When an individual makes a claim for asylum within the UK, they must first either make a claim at a Port of entry (airport) or in country (claiming directly in person at the Home Office in Croydon). Once a person has made the claim, the Home Office will arrange for a Substantive Interview to be done with the person seeking asylum to determine their claim. This interview date can be anytime between 6 months to 2 years. Accommodation is given on a no choice basis anywhere in the UK. Cash payments are 70% value of welfare benefits, which is about £37 per week for an asylum seeker.

Individuals and families who are considered 'high risk' will be put into a Detention Centre upon claiming asylum. These individuals may be people who have entered the UK on false passports - this is not uncommon. Individuals considered high risk may also be put in a prison under 24-hour lock down alongside known criminals resident in the UK. This can be a terrifying experience and extremely disturbing for the individual.

Legal Aid is generally withdrawn if an asylum seeker fails their claim after this. The asylum seeker has the option to pay for private legal representation at all stages. If someone fails, there asylum claim they have to find new evidence to create a new asylum application. This is often difficult as most people submit all of their evidence in their first application. The individual can be granted some money for resettlement in their country of origin, but this is minimal and often flight costs are taken from this amount.

There are two types of Leave to Remain mainly used namely a short term Leave to remain which can be anything from 6 months to 5 years and then Indefinite Leave to Remain.

-A person can only apply for Indefinite Leave to Remain (meaning they can stay in the UK for the remainder of their life so long as they commit no serious crime which would render a deportation action) once they have had Leave to Remain continuously for 5 years.

-Indefinite Leave to Remain costs £1,856 for an individual. Legal Aid is difficult to access for this type of application. A Life in the UK Test also needs to be completed successfully as well as English Speaking and Listening Tests in order to achieve indefinite Leave to Remain.

1.2. SUMMARY OF THE FOCUS GROUPS INFORMATION BY COUNTRIES

1.2.1. Focus groups information by Italy (Palermo and Perugia)

Participants in Palermo suggested from their experience, services address the issues they experience through integration, work experiences, opportunity to learn the receiving countries language, giving them the possibility to contact other associations and people.

However, according to the second group of participants in Palermo, felt that the best help they could receive is from people from their community who have experienced the same situation as them. This division was interesting because it showed how different the situation is and how the system and services available for migrants and refugees in Sicily has changed during the last decade.

Participants in Perugia suggested services don't address their main issue which is their future in Italy. Many of them have no permit to stay or a 6 month permit to stay. They do not know what will happen when this ends and if they can remain in Italy or not. This uncertainty, and security with them not having a job is their biggest problem.

Palermo participants also suggested they received help when they first arrived from family and friends who had arrived in Sicily before them. Legal assistance, church and hospitals were the only statutory support available, but they faced a lot of cultural and language difficulties because services do not have cultural mediators and translators working for them.

"New arrivals" find themselves living a totally different situation. They are hosted immediately inside centres, where they receive languages courses, legal assistance, health aid, employment and school integration. Also, most of them mentioned that they took part in local, mobility and European projects promoted by local NGOs such as CESIE.

In Perugia they receive basic services: hosting, food and pocket money. They attend Italian language courses as this is essential or successful integration.

In Palermo new arrivals think some services are still missing, and this situation could be improved by facilitating mobility actions (opportunities to participate in

training courses, workshops and events in other countries as part of European projects) in order to understand other cultures. There was a feeling about a lack of information they expressed that sometimes they do not know their rights and duties. Therefore, the most important need is to know where they are and what they can or cannot do.

Perugian participants suggested if they could work, it would be much easier. They need services that help them to get to know the place they live, to develop relationships and mutual trust with locals.

In Palermo Creative and Art Therapies are not familiar to participant. However, they were aware of some practices involving creative methods and some of them experienced other social interventions using arts, music, dance or drama, but never therapeutic interventions. Participants think “Creative Therapies” would support smooth resettlement, because people need to communicate, but they do not know language, and they can recall and share information about their own cultures, needs and feelings using art.

Some barriers were identified that might stop migrants and refugees taking part in art therapy, for example the fear of not understanding **the language** or to be judged by their peers. Also, **religion** could be a barrier in some cases because their beliefs forbid them to do some specific things. To overcome these barriers, “information” is again the keyword.

Perugian participants do not have any knowledge or experience. They think art might be useful to get to know each other and express ourselves. In their Countries almost everybody practices music, dance and arts are important parts of their cultures.

1.2.2. Focus groups information by Ireland

Services and supports known to migrants are few and not felt to be meeting their needs in most cases. They find a greater chance of acceptance in more rural and residential areas. This causes migrants to feel less trusting of services overall, but especially inner-city centres, expecting to be palmed off or let down.

Citizen’s Information. The aim of this service is to support knowledge and understanding by providing comprehensive information on ‘how things work’ in Ireland, what rights and services are available, are 2 main that are included. All participants felt that this service is not effective and have found staff are not knowledgeable or helpful, and many offices are understaffed and busy. The desire for a comprehensive information service is extremely strong, but this doesn’t deliver the desired support.

Organisations focused on integration. A handful of organisations that host events and activities for migrants, refugees and asylum seekers were discussed. These events often have an Irish cultural focus and aim to help people feel more connected to Irish culture and to create a social space. For those who had discovered an organisation like these the feedback was very positive, but many were unaware of these. Some examples of organisations like this in Ireland are: • JRS, Change X, Culture.

Volunteer bureau. This service was discussed positively overall, but only satisfies a small part of the desire to work. Migrants from all backgrounds take independent action to try and support their own mental wellbeing.

Independent action is the main support that the majority of participants identified, with 3 common themes in terms of aims: Keep busy, meet people, feel a little bit of home. **Volunteering:** popular with asylum seekers as it is one of few things they are permitted to do with their time. **Studying:** is also most popular with asylum seekers. Where possible they try to engage with study opportunities to further develop themselves and their skills for when they are allowed to work. For example trying to interact with locals: by attending an Irish church, by socialising with work colleagues, or choosing to live with Irish people, in order to feel more integrated, connected and to learn from native knowledge. **Involving themselves in Irish activities:** most people we spoke to had been involved in a St. Patrick's Day parade, and some attend Irish churches or cultural events in order to feel more connected. **Talking to family and friends from home:** helping people to feel less alone, and less homesick. **Bringing habits from home:** whether this is following a similar routine or volunteering in an area connected to their job from home, it can help them to feel more comfortable and feel normal.

The most prominent need or desire expressed across the board is the one for information which is; clear, detailed and comprehensive. This is not something anyone felt they had access to in Ireland, and the lack of knowledge they come with, combined with the lack of accessible information causes some intensely negative feelings.

Refugees and asylum seekers: Most had not accessed a service providing professional therapy support and didn't feel this was something available to them. Those who had accessed any kind of therapy support had done so only through medical referral based on acute stress and psychological trouble. This is a service with great value to them.

Other migrants: A small number have accessed therapy support, but not within Ireland, with the trend being Skype/phone therapy with someone in their home country. There is a feeling that the cost of therapy support in Ireland is restrictive to them, and that an Irish therapist may not understand their problems, either culturally or because of a language barrier.

Most feel that they are discriminated against by mainstream services in Ireland, with many struggling to get financial support to study, or fearing to ask legal questions in case they draw an investigation on themselves. There is a substantial service gap in terms of services tailored to migrants, down to the simplest things like having a multi-lingual team on phone support services like "The Samaritans". Many feel they wouldn't approach the services available because of this gap, and some actually prefer to connect with services in their home country over trying to engage with them in Ireland.

The idea of creative art therapies is not well known to this audience for the most part, with none having truly experienced this and most never having heard of the

concept. Upon learning about the topic, reactions are vastly varied, but often most similar amongst people in the same situation. The most positive reception is amongst asylum seekers, partly seen to be a way to keep busy, but also at a deeper level as a way to escape and have some fun, to socialise, and enjoy something. This feels like a powerful concept to people in this situation.

The reaction to creative art therapies is also much more positive with females than males, with many of the males stating they would prefer sport or social activities. While reception is positive, for many this doesn't feel like something that will cause a major shift in their psychology. It isn't seen as therapy that will help them deal with serious and deep-rooted problems, but more like a way to express and feel free for a time.

This feeling of being part of something inclusive is even more important than the therapy aspect for most.

Not being close to people's homes, being too costly, not being professional-led, and being restricted to one time in the week.

To be truly useful to this audience the project would have to be accessible widely across Ireland, in rural neighbourhoods and inside the centres/hostels as it's important to have a strong presence outside of cities and urban areas as many migrants have learned to expect poor service from centres in these areas. Costs would have to be minimal overall and with free access for asylum seekers, in order to be accessible. In order to draw the audience, there is a big education job to be done; most have never heard of creative art therapy, let alone engaged with it.

1.2.3. Focus groups information by France

Interviewed people were for most of them asylum seekers and refugees who were offered accommodation and support in centers run by NGO's. They were satisfied with the services provided by those NGO's in relation to how their addressed or address their issues and problems. Generally, they felt those services responded to their needs, they felt that they were listened to and helped by competent and available persons. People also talked about "moral support" they received or receive from those organisations.

In relation to the state services (OFII, OFPRA) interviewed persons stressed The length of the procedures was mentioned as being difficult ~~by some of them as well~~, as well as the difficulty to talk to someone in order to get information about your demand.

Some of the asylum seekers felt they should have the right to work in order to be financially independent, create more social links, and feel better. They feel that this would facilitate their integration but also would be benefit for their wellbeing ("to go out from the stress of the night"). Others mentioned the lack of activities other than administrative procedures. Non-French speaking persons also talked about the difficulty of the language barrier. The integration by the language seems to be very

important and maybe not enough taken into account during the asylum demand process. Refugees also mentioned the difficulty to really do what they would like to professionally for economic reasons (getting a job rather than studying on University for example...), talking about choices that are not real choices.

Generally, people do not have knowledge of Art Therapies. Nevertheless, the majority proposed, by inference, their definition of Art Therapy as the use of art to “heal” or to “feel better” (only one participant talked about a form of psychotherapy). After a brief description of what Art therapies are, some of the people said they have experienced theatre workshops that they have experienced as having been “therapeutic” or as “making feel better. Factors which are important to this goal were identified as, going out, and meeting other people, and all interviewees agreed that people understanding and connecting to other people as being very important in their situation and art therapies were seen as a possible way of doing this. It was also important for them to meet people that are not refugees/ asylum seekers.

Some **shortcomings** would be: the fear or the shame being seen, listened to by others, the fear of bringing out emotions, the apprehension of the process of Art therapy itself, the language barrier, lack of self-confidence.

Some **solutions**: explain to people what Art therapies are, how they function, etc. an individual approach to each person to explain this so they can feel considered and respected, help people gain self-confidence by bringing out their qualities and skills, to propose a free space where people can express themselves without boundaries.

1.2.4. Focus groups information by Germany

All interviewees agreed these offers are helpful in a pragmatic sense, but often confusing, humiliating, arbitrary. Many have the feeling of being at the mercy of an inscrutable and incomprehensible bureaucracy.

Interviewees have the feeling that they cannot fulfil expectations made of them, often simply because the structure of education, training, employment and administration in the countries of origin is not compatible with German requirements and structures. Some individuals do not feel that they are in the psychological and physical condition needed to meet the demands made of them and feel under pressure to: learn the language, find accommodation and get work. They provide a way to make social contacts with members of the German society on a more equal footing. Native speaking counselling and care were found to be very useful.

Cultural differences (religion, gender roles, values and social norms) are not be taken into consideration, unrealistic cultural adjustments are demanded. These feeling vary depending on the level of education, age and gender. Older and / or less educated men seem to have most problems. The interviewees reported that psychiatric aid consisted of work with drugs, dialogue and light group sports.

State institutions initially **take care of basic needs** (a place to live, food, survival) at a very simple level: communal accommodation little privacy and insufficient sanitary facilities, no chance to choose where to stay, canteen food or cooking facilities with

food vouchers or food provided by the state, basic medical care for serious illnesses. **Further basic needs** (orientation, contact with others, and perspectives for the future) are partly taken care of by state institutions - clarification of the residency situation, chances of bringing over the family, language and work (obligatory language courses, help via the jobcentre and explanations of unemployment benefits, school attendance and training) – and partly by NGOs and voluntary helpers.

Some interviewees have attended courses such as counselling, (for example, dealing with sleep disorders, nightmares, family and / or parenting problems) as well as relaxation, sports or handwork courses. Making social contacts and the feeling having something useful to do are considered the most helpful aspects of the courses. In particular, German "sponsors were perceived as indispensable helpers on learning to live in Germany. One interviewee described a sponsor as "like a mother to me".

Only a few of the interviewees had made use of psychotherapy. They reported on consultations as well as short hospital stays. To what extent these were helpful the interviewees couldn't say.

Access to housing, satisfactory work, acceptance and, above all, family reunification. Their own mental or physical well-being does not matter to them as long as they are separated from their families and they do not know if they are safe. To meet people as equals, not to be reduced to the role of "refugee" or perceived as a "problem".

Community activities, excursions, cooking, festivals, cultural exchanges, but also being able to communicate something about themselves. Many would like to tell Germans something about their own language and culture.

With one exception, respondents had no experience with creative/art therapies. The concept was unknown to them.

Most interviewees could not imagine getting any benefit from art therapy. Only one interviewee could imagine (from her own experience) that theatre could help her to become more self-assured and confident.

Interviewees reported that in their countries of origin (Syria, Iran, Iraq, Somalia) the word 'therapy' generally has a stigma. Therapy assigned to people either crazy or weak. For many, the suggestion of therapy is an insult. Respondents who have participated in conversation psychotherapy report frustration and incomprehension that the therapist knows nothing of their cultural backgrounds. **The language barrier is also an obstacle.**

The women emphasised that they can only imagine themselves working with art therapy if they have a chance to get used to it. It is important for the women interviewed to "be among themselves", they cannot imagine working with a mixed group together with men.

1.2.5. Focus groups information by the UK

One person replied that due to having limited English skills, they felt isolated, unable to access community services or have no awareness of services, hence their

issues are not addressed. One person who has been in the UK for a number of years, had become integrated into the community and was accessing many services in the community (NHS treatment, local community help groups, volunteering in the community), and felt that the services on offer could assist with their issues better in comparison to other countries. Respondents cited the need for more opportunities to volunteer or gain work experience in order to occupy time and improve their skills. Generally, people commented that they had no issue with how they are treated as people when accessing services.

All respondents replied that they access services which afforded the person space away from the identity and stigma of being labelled a 'migrant', 'asylum seeker' or 'refugee'. Respondents also said that language support or interpreting in accessing services helped their decision on whether to access services in the community.

Counselling and Psychotherapy provision was widely accessed by people consulted, services like SOLA ARTS and Family Refugee Support Project, which enabled people to obtain crucial support with any mental health or wellbeing issue within the community. People replied that having the opportunity to get help with their emotional wellbeing was key to their ability to cope in the community.

Many individuals were active volunteers with local organisations in the community, which enabled them to gain new skills, socialise with other people, contribute to the community, do something useful and improve their self-confidence. Most respondents were aware of a range of services available to them to access although some respondents had very limited knowledge and many respondents used SOLA ARTS as their main support. Information about services available would either be passed on by word of mouth or people would be referred onto specialist provision by accessing statutory agencies.

People having access to information related to their welfare rights in the community languages would better enable them to resettle in the community. Over half respondents cited SOLA ARTS having a specialist worker (Transitions Worker) as being particularly beneficial for resettlement in terms of key needs in assisting and empowering them to negotiate resettlement such as housing, benefit claims, accessing education courses or training, understanding energy and utility bills, liaising and referring to other specialist services such as CAB for debt or finance management etc...

Training and educating to UK standards for migrants and refugees who have relevant or desired skills was mentioned as a way for people to get into the jobs market easier – people from abroad may have different qualities to their training and education standards in comparison to the UK standards.

Over half of the respondents are aware of Creative/Art Therapies as being recipients of such services by SOLA ARTS. Some of the respondents were aware of how being 'creative' could be further construed as a creative therapy. The respondents who replied that they are aware of Art Therapies made comments about how effective or how it affects them going through Art Therapy. It seemed that people who had experience of Arts Therapies were clear that it was a positive experience and gave

individuals the ability to cope with the future. Limited time of Art Therapy professionals, transport and travel costs, language barriers, health problems, not knowing that the service exists, people not wanting to admit they have problems, people feeling judged for accessing a mental health service (stigma).

2. SIMILARITIES AND DIFFERENCES BETWEEN COUNTRIES

2.1. SIMILARITIES AND DIFFERENCES IN DESKTOP RESEARCH

All the partner countries but one (Italy) use all of the terms showing a better social consciousness regarding to migration and refugees field. They all accept the definition of the Geneva convention in 1951 to the term “**Refugee**” and **asylum seeker** for those who applied for asylum and have not been recognised yet as refugee. **Immigrant** is a term generally used to describe those who were born in a different country and went to another for different reasons, although in the case of France this term is employed even if they obtain the citizenship. There is no trend respecting to “**migrant**” since it is related with social skills (France), remunerated activity (Ireland) or even if its stay is temporarily or not (UK).

Taking into account that in general the process is similar between countries because they all have organisations that carry out this process the similarities and differences focus on the efficiency of the different countries.

In Italy it takes 30 days to be interviewed in case of demanding asylum and the decision is published in 6-9 months and in some cases 2 years. This amount of time forces the migrants to do desperate things, such as going to Rome to live on the streets, in order that their demands are considered quickly. This situation is similar to the UK, where the time needed for the interview to take place is up to 2 years and obviously that does not include the time required to make the decision. During this time, they are given a small amount of money per week. After this time, they can be required to leave the country if the request for asylum is not accepted. This is different to what happens in Ireland and France where the applications are dealt with and process much faster.

2.2. SIMILARITIES AND DIFFERENCES IN FOCUS GROUPS

In France the people that were interviewed were given the opportunity to access accommodation and support to live there, and though there are a large number of homeless refugees in France the partnership did not consult with them. In relation to the people that we did consult with, services provided by NGOs were discussed in a positive way, however services provided by public sector bodies were always not seen as effective or satisfactory.

In Italy people prefer help from other immigrants that got to the country before then and in Ireland there is no trust in services. In contrast to all of this, in France they feel satisfied with the services.

Issues are often related to the language barrier. Also, this barrier involves a lack of information for example in Ireland, sometimes not knowing their rights and duties.

This barrier has been broken in the past few years in Italy by introducing mediators and translators to the services. Furthermore, the partner countries show other barriers like religion or cultural barriers that, together with language and information, lead the refugees and asylum seekers feeling isolated and discriminated against.

When they were asked about new services that could help those participants mostly suggest establishing relationships with the locals, so they could show themselves and stop people from relating refugees to problems. Those relationships may be originated in work or workshops involving locals and refugees.

With the exception of the UK, Creative Therapies were unknown for most of them. The main thought was that Creative Therapies (CT) could be helpful. However, there are some cultural differences that may affect this, for example, drama therapies are negatively perceived if performed by men, in other words, Creative Therapies would be a women's thing. Germany is the country where Creative Arts are worst perceived, where CT are related to crazy people because of the word "therapy".

3. CONCLUSIONS

This project by itself has been able to not just focus on how Creative Arts could be applied to Europe, but also study and compare the services that are currently being offered to refugees and asylum seekers.

One of the key findings of the research and consultation has been that European awareness of refugees and asylum seekers is high in general, but this has not necessarily translated into good and effective statutory services. This may be to do with public and media opinion in relation to support given to refugees and migrants. Efficiency and effectiveness of services varies, a common theme within the partnership that services which refugees consulted with were provided by NGOs and voluntary sector organisations, and services which were thought of as less effective were statutory services.

This could be down to the nature of the services i.e. NGOs tend to provide more supportive services as opposed to those that assess application etc. but also we can infer that any new services related to the CREATE methodology is likely to be better placed in the Community (Third) sector rather than public services

One of the most repeated issues is the **language barrier**. The **Create** project was partially originated because of it, aiming at finding a way to help people with whom communication is not possible. Through creative therapies would allow to help people without speaking any language. But, this great idea has shortcomings, basically these therapies would be used with people from completely different cultures from European culture and that leads to the following barrier.

The **cultural barrier**. It not only makes feel refugees and asylum seekers isolated but also is an enemy of the establishment of Creative Therapies in Europe. The importance

of the cultural barrier relies on the predisposition of the people to Creative Therapies, arriving to relate them to women and to crazy people or relate CT with women only. For a good performance of the project, that point of view must be changed, otherwise it only would make a difference in a small way in fact leads to the following topic: **education.**

As said before, changing their view about creative therapies is crucial for the good development of these. If they consider that these techniques are for men and women and that is no need to be crazy to go to therapy, CT would have a great impact.

Last but not least, there is a common need among the countries that have participated that is the communication and contact between locals and refugees and asylum seekers. This is because of the stigma of those people that very often leads to the isolation and discrimination. That is a good point to start a new project, being bridge builders between the two islands.

CREATE - Creative Therapy in Europe

Partnership



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For more information about the Project and to learn more about the CREATE method please visit www.create-eu.com



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