

DÁIL ÉIREANN

AN COISTE UM ACHAINÍOCHA ÓN BPOBAL

COMMITTEE ON PUBLIC PETITIONS

Déardaoin, 8 Iúil 2021

Thursday, 8 July 2021

Tháinig an Comhchoiste le chéile ag 12.30 p.m.

The Joint Committee met at 12.30 p.m.

Comhaltaí a bhí i láthair / Members present:

Teachtaí Dála / Deputies	Seanadóirí / Senators
Pat Buckley,	Jerry Buttimer,
Cormac Devlin,	Eugene Murphy.
Brendan Griffin,	
Pádraig O'Sullivan.	

Teachta / Deputy Martin Browne sa Chathaoir / in the Chair.

Business of Joint Committee

Chairman: I welcome everyone to our public virtual meeting using Microsoft Teams. Apologies have been received from Senators Fintan Warfield and Gerard Craughwell. We have heard that Senator Craughwell had an accident this morning so we wish him all the best.

The Ceann Comhairle, Deputy Seán Ó Fearghaíl, and the Cathaoirleach, Senator Mark Daly, have appealed to everybody in the parliamentary community to continue to follow public health advice, wear masks and maintain social distancing. I request that members, witnesses and staff use the wipes and hand sanitisers provided to clean shared seats and desks to supplement regular sanitation. This will help mitigate the risk of Covid-19, including the Delta variant, spreading among the parliamentary community.

I propose we approve the minutes of the private and public meetings held on 22 June, which have been approved in virtual private meetings. Is that agreed? Agreed.

Direct Provision Policy and Related Matters: Discussion

Chairman: I will read out some formal notices. I remind members of the constitutional requirement that they must be physically present within the confines of the place at which Parliament has chosen to sit, namely, Leinster House, and-or the Convention Centre Dublin, to participate in public meetings. I will not permit a member to participate where he or she is not adhering to the constitutional requirement and, therefore, any member who attempts to participate from outside the precincts will be asked to leave the meeting.

I will explain some of the limitations to parliamentary privilege and the practices of the House regarding references members may make to another person in their evidence. The evidence of witnesses physically present, or who give evidence from within the parliamentary precincts, is protected pursuant to both the Constitution and statute by absolute privilege. However, they are giving their evidence remotely from a place outside the parliamentary precincts and, as such, may not benefit from the same level of immunity from legal proceedings as a witness physically present does. Witnesses may think it appropriate to take legal advice on this matter.

Members are again reminded of the long-standing parliamentary practice that they should not criticise or make charges against any person or entity, by name or in such a way as to make him, her or it identifiable, or otherwise engage in speech that might be regarded as damaging to the good name of the person or entity. Therefore, if their statements are potentially defamatory in relation to an identifiable person or entity they will be directed to discontinue their remarks. It is imperative that they comply with any such direction.

This is our third meeting on direct provision. We have met the Ombudsman, Peter Tyndall, and the Ombudsman for Children, Dr. Niall Muldoon. I am delighted to extend a warm welcome to our witnesses today: Mr. John Lannon, chief executive officer, CEO, of Doras and Mr. Nick Henderson, CEO of the Irish Refugee Council. We have received an apology from Ms Aideen Roche from Doras who cannot attend. Before we hear from our witnesses, I propose we publish their opening statements on the committee's website. Is that agreed? Agreed.

The committee also welcomes the recent White Paper on Ending Direct Provision published by the Government. Our witnesses should confine their opening statements for five to ten min-

utes. We will then have questions and comments from members. Each member will be given approximately five minutes, which will give them a chance to come back in with a second round of questions if they wish. Members may speak more than once.

I invite Mr. Lannon to make his opening statement. As we cannot hear him, I will ask Mr. Henderson to make his opening statement. There seems to be a technical problem in the committee room. I propose we suspend for five minutes.

Sitting suspended at 12.37 p.m. and resumed at 12.43 p.m

Chairman: Apologies for the delay. There were gremlins in the system in the committee room. I will ask Dr. John Lannon, CEO of Doras, to please make his opening statement.

Dr. John Lannon: I thank the Chair. I am glad you can hear me now. We thank the committee for the invitation to discuss issues relating to direct provision. For committee members who do not know us, Doras is an independent NGO that works to promote and protect the rights of protection applicants and migrants. We do that through direct support and advocacy. Our work covers immigration, international protection, refugee resettlement, anti-trafficking, integration, and anti-racism. We support more than 1,200 people a year through our advice and information centre in Limerick. The majority are either in the international protection system or from a refugee background.

In my opening statement, I will focus primarily on current issues but, first, I will say a few words on the White Paper on ending direct provision. We have welcomed this. As the committee members will know, it outlines a two-phase system with people spending up to four months in a reception centre, before moving to own-door or own-room accommodation in the community. We welcome the limits on stays in reception centres, the emphasis on early integration supports, and the focus on the needs of children, families, and people with particular vulnerabilities. It is important to note that the White Paper recognises the importance of fair and fast international protection procedures. This puts the onus on the Department of Justice to ensure adequate steps are taken to reduce the time spent in the asylum process. Mr. Nick Henderson will speak more about the unacceptably long delays at present.

For the White Paper implementation to be workable there also needs to be a clear plan to deal with the large existing backlog in protection cases. At present, there are close to 7,000 people in direct provision, including those in emergency accommodation. We call for leave to remain to be granted to anyone who has been in the system for two years or more, as recommended in the report of the advisory group, which was chaired by Ms Catherine Day.

We are aware of how widespread the violations of human rights are right now in direct provision. The length of time spent waiting for an International Protection Office, IPO, decision is unacceptable. So are the conditions in many centres today. Less than two years ago we published a report highlighting the appalling conditions in Mount Trenchard direct provision centre. While Mount Trenchard was closed in early 2020, some or all of the issues we raised on that centre still apply to centres around Ireland. Because of this, independent human rights-based monitoring of all centres is long overdue. In October, the Department of Children, Equality, Disability, Integration and Youth announced that the Health Information and Quality Authority, HIQA, would do this. To date, this has not happened. The Minister for Children, Equality, Disability, Integration and Youth, Deputy Roderic O’Gorman, said that agreement has been reached with them in principle. Yet, HIQA is still not expected to undertake its monitoring role until the end of this year. The likely need for legislative change to put this in place has not

been addressed. This is worrying.

As was highlighted in the recent Ombudsman for Children's report, direct provision is particularly unsuitable and unsafe for children and families. The same is true for victims of trafficking and victims of other forms of domestic, sexual, and gender-based violence. Another major area of concern for us is mental health. It has been found that protection applicants are up to 15 times more likely to be diagnosed with depression, anxiety or post-traumatic stress disorder, PTSD, than the majority of the population. They have to cope with experiences of forced migration, which can include trauma, torture, the consequences of war and conflict, and human trafficking. The impact of these are worsened by living in direct provision. The effects have been particularly acute during the Covid-19 pandemic. We produced a report on this towards the end of last year. Some issues that we highlighted in that report are, first, congregated accommodation. Single adults have to share bedrooms with others, which is a cause of conflict, fear, anxiety, and distress. This, along with the length of time spent in the system, exacerbates pre-existing mental health conditions. Second, substance misuse and addiction are a reality for many people in direct provision. This is linked to social exclusion; long-term unemployment and forced idleness; stressors associated with migration; and traumatic experiences. However, the substance misuse and addiction services that are available to people in direct provision are inadequate. Third, not having on-site, targeted supports have been a key failure of the direct provision system. Staff in centres generally do not have adequate training. In principle, mainstream mental health services are available to people in direct provision. In practice, however, there is limited knowledge of how to access these services. Access is further diminished by cultural barriers and the lack of multilingual mental health services.

Another area we have looked at recently is access to employment and decent work for protection applicants. Many, but not all, have the right to work. Our report highlighted a number of key issues that impede their labour market integration. This report was published in March. Some of the issues included factors such as the locations of direct provision centres, which are often remote; language; lack of recognition of skills and qualifications; problems accessing services to address other needs like housing, healthcare and education; employer engagement; and administrative barriers, such as work permits and not being able to get a driving licence.

I will finish this opening statement by noting that essentially this once again highlights how implementing the White Paper and ending direct provision is a complex body of work. It requires a whole-of-government approach. It has got to be done. Direct provision is an abuse of human rights and it has to be ended.

Mr. Nick Henderson: We thank the committee for its interest in this issue. I will speak on three matters: the state of direct provision as we gradually emerge from the pandemic; delays in the system; and alternatives to direct provision. As Dr. Lannon set out, and as I am sure the committee will have gathered from its interactions with other important actors, we believe the system is at close to breaking point. All the indicators are flashing red. Approximately 5,000 people are awaiting a first instance decision. The medium length of stay in direct provision is 27 months. There are approximately 1,800 unrelated people who are sharing bedrooms. There have been more than 670 Covid cases in direct provision. There are more than 80 locations across the country where people have been accommodated. Delays in the system are chronic and almost as bad as ever. We are at a very serious and grave moment in the long history of direct provision and our international protection process.

Yesterday, Doras launched a report on delays. I thank the Deputies who came to meet us outside the convention centre. We greatly appreciate that. We did a small survey of people

we are working with to hear directly from them, as people in the system with lived experience, about what the impact is on them of delays. There were feelings of stress, frustration, wasting of skills and quite devastatingly there were feelings of suicidal ideation, family break up and divorces. Delays undermine the integrity of the system. There is a perfect storm of a pre-pandemic backlog which, combined with Covid-19-induced closures of decision-making bodies, has caused delays to shoot up to the point where if a person applied for asylum today, without a serious reduction in waiting times and additional resources, it is likely that they would wait two years for the first decision alone and might then have to appeal. The system is in a really bad place and this matters not least because of the White Paper and the shared collective aim of ending direct provision. It is much harder to create a new system with 7,000 people in it, as Dr. Lannon said, compared with one of 3,500 people, for example. We do have a road map out of that. Dr. Lannon has pointed to the recommendation by Catherine Day's advisory group on this. It was not picked up in the White Paper, which we think is an omission in that document.

We know what is wrong with the system. We have had multiple reports. If we put the reports on direct provision one on top of the other, we would probably reach the ceiling of a standard room. What do we do about it? There has been a crucial moment in that the White Paper refers and gives an intent to end direct provision. I hope and believe that all of society across the political spectrum is committed to ending the system. There is no doubt that it will be hugely challenging. We have done some research on alternatives to direct provision. We began this a couple of years ago. In January, we produced a report compiled by an organisation Campbell Tickell, a UK housing consultancy on how to implement practical alternatives to direct provision, in which we made several recommendations. First, that different streams of accommodation should be created. There cannot be one type of accommodation. Some should be developed by approved housing bodies, AHBs. We need to build accommodation and to explore community-led alternatives. We should consider creating a new approved housing body dedicated to this kind of accommodation or consider pivoting an existing body. We need to think in an agile and dynamic way so that we can use large and small AHBs. Many smaller AHBs across the country could be engaged on this. There has to be state-built accommodation. We believe there is significant power in community regeneration schemes. I can share a seminar we did in June with some housing experts. Orla Hegarty, an academic and architect at UCD, spoke on the huge untapped pool of vacant urban accommodation across the country that could be used for this. We need to think about removing barriers to independence. People do come to this country and seek protection and asylum but they do not enter direct provision because they may be able to live independently or they have family they can live with. If we can increase independence, that group of people can grow and there is less need for accommodation. We recommend that the Department of Children, Equality, Disability, Integration and Youth maintain responsibility for this issue in the short term but that said responsibility should eventually move to the Department of Housing, Local Government and Heritage.

There needs to be more urgency in White Paper implementation. We recognise there will be a period of thinking but the deadline is 2024 and we are already half way through 2021 and are yet to see much if any tangible change. Budget 2022 will be extremely important. We are trying to prepare a submission on this. All stakeholders will have to watch the budget carefully to see what is dedicated to the area. There must be a continuation of the system and a whole-of-government approach. We feel it is notable that the Taoiseach gave a foreword to the White Paper. Although the White Paper has omissions and deficits, it sets out the theory, desire and intent. What we need now is implementation. We could take various strategies about closing down existing direct provision centres, identifying the worst ones. Dr. Lannon spoke about the centre in Limerick. We recommended closing emergency accommodation but that has been

particularly difficult. It has to be done sensitively. People have built up lives. We need to think better about how we engage our communities. There is great power in local communities in Ireland. The welcome local communities have given to people seeking asylum has been incredibly positive in the vast majority of cases but we need to work better with communities and help them to prepare to give the welcome that they can.

Ending the system and implementing both a new type of accommodation and a new system presents major challenges but we believe the weight of history against direct provision, and all its problems, compels us to do so. Of all the reports on direct provision, the one launched recently by the Ombudsman for Children is the most devastating and should compel us all to do as much as we can to end the system.

Chairman: I thank Mr. Henderson and Dr. Lannon for their opening statements. I wish to ask a few questions of both of them to start and then I will ask members to indicate or put up the hand signal and I will let them in.

I will start with Mr. Henderson of the Irish Refugee Council. I would like to speak for a moment about the council's report on implementing alternatives. We cannot allow ourselves to sit back and wait for that to start. Once a new model has been identified, as it has been in the White Paper, that transition process should begin immediately. In the council's report on implementing alternatives, it asks five critical questions. One related to timing and how we transition to these models. What has to occur for them to become live, and at what point do they start to deliver accommodation, in Mr. Henderson's view?

Mr. Nick Henderson: The fundamental idea here is that if we were to build accommodation, which we recommend, there would be a long lead-in time. Therefore, the groundwork for that has to be done today or very shortly for it to bear any fruit within a couple of years or even as far away as 2024. It is for that reason that we recommend different models of accommodation, including block-leasing accommodation, which the Government has already used but where there could be improvements. We recommend block-leasing and the use of private accommodation in the short term, not as a long-term measure. The benefit of that is that it is accommodation that can be drawn down sooner rather than later. As for private company and social enterprise use, there are examples of different types of accommodation being provided already. One criticism we are aware of from providers is that there is not enough clarity on what funding is going to be provided to bodies that have accommodation in this area. There needs to be greater clarity from the Department of Children, Equality, Disability, Integration and Youth or the Department of Housing, Local Government and Heritage.

Regarding the regeneration and community-led schemes, and speaking in particular to Orla Hegarty's point about the considerable pool of vacant urban accommodation, her point is that turning that over will take considerably less time than new builds. As for AHB delivery, it would be a matter of working with existing projects to try to identify whether there is a possibility for a particular project of providing a small portion - a small portion, I emphasise - to protection applicants. The point we are trying to make is that we have a shared desire to end direct provision. We recommend that different accommodation streams be used but that for each stream the accommodation will become "on tap" or live at a different point in time.

Chairman: This is in the McMahon report. That report dealt with making changes to the current direct provision system but it can also help with the transition out of direct provision by starting to improve conditions immediately. Given that many of the recommendations of the report have not been implemented, which is acknowledged in the White Paper, is there a danger

that we are already setting back our plans and not acting immediately or decisively on this?

Mr. Nick Henderson: Is that question for me, Chair? I just missed you at the beginning.

Chairman: Yes. I am putting three questions to you first, Mr. Henderson, and then I will move on to Mr. Lannon.

Mr. Nick Henderson: What the Government would say is probably that the pandemic has put it back. I do not deny we are all in a very challenging position in that regard, but we believed and stated in the report we published in January that 2021 would be a year for action, not necessarily a year for thinking, or at least that the two would be done in parallel. If we are to get the interest of, say, approved housing bodies, which are a big provider of accommodation and very much a potential provider of accommodation for protection applicants, they need clarity on what funding arrangements for building, servicing and supports would be provided to them, and they do not have that. If we do not have that now, the lead-in time to create such funding streams will take time, so every moment we wait or do not implement something, the ball is being kicked further down the road.

Chairman: For the sake of context, could Mr. Henderson outline what it is like for an individual or a family seeking refuge? Perhaps they have mental health issues that are going largely unaddressed, and they can be stuck in the system for years.

Mr. Nick Henderson: I will speak not from lived experience, obviously, but through our service's work with people. You enter a system where, as I said, you may not get a decision for two years. You will be accommodated in Baleskin, probably, but in recent years, because of capacity issues, people may go into emergency accommodation. After being in that initial form of accommodation, you will be dispersed. You will not necessarily know where you are going and you will not have a choice as to where you go. Previously, up until 2017, you would not have had the right to work, but the Supreme Court case changed that. Now you can work if you have been waiting for six months for an initial decision. The quality of accommodation can vary hugely. There are 80 accommodation locations across the country and they really are the good, the bad and the ugly. There is a huge degree of lottery in that respect.

Doras's report, which Mr. Lannon may speak to, covers mental health issues in a lot of detail. I think we would both agree that there has been a huge deterioration in mental health supports. We are noticing that through our services. That goes as far as suicidal ideation and is something we are really concerned about.

The committee has spoken to the Ombudsman for Children, whose report makes clear that direct provision as an institution is not capable of providing for the best interests of the child. The ombudsman's previous report about racism and direct provision found that almost the fact of living in direct provision exposes children to stigma and racism.

Chairman: I have two quick questions for Dr. Lannon and then I will let in other members. I will start with the same question I asked Mr. Henderson on mental health. Regarding health services' capacity with Covid, the provision of mental health services in this country is well known to be far below what is needed. Doras has noted that people in direct provision are 15 times more likely to be diagnosed with depression, anxiety and post-traumatic stress disorder, and the Ombudsman for Children has identified a dreadful failure to provide proper supports for people in direct provision. That must have been made even worse throughout the pandemic. Are genuine efforts being made to address this since the ombudsman published his report?

Could Dr. Lannon outline his view on how best we can ensure that the needs of the people in the new system are met?

Dr. John Lannon: We do not see any immediate improvements or changes. As Mr. Henderson said, there are 80 centres around the country, and the standards in those are very varied and the access to services really varied as well. We highlighted a number of key issues regarding mental health difficulties and direct provision. One of them was the unsuitable accommodation. Another was the delays in case processing which, as Mr. Henderson outlined, has exacerbated and contributed to what is in effect re-traumatising for many people who have been living in direct provision centres for years. Substance misuse and addiction is an area of particular concern to us. This was highlighted by the College of Psychiatrists of Ireland in a 2009 position paper. We have found testimony from people who have said they have become brain-dead while living in direct provision. It will not be fixed or changed immediately. There are major problems in accessing services. We welcome that a pilot project has commenced on vulnerability assessments. However, it is all very well to do vulnerability assessments but we would emphasise access to supports and services required in the follow-up are essential, particularly for people who have experienced trauma. That is not happening now. We found people who self-declared as having mental health challenges when they initially came to the reception centre in Baleskin were still transferred to centres where they did not have adequate access to services. There are a number of issues involved. As I said with substance misuse and addiction, there is a cause and effect factor, with mental health problems. Regarding access to services, mainstream mental health services are in principle available to people in direct provision but, as the Chairman said, they are stretched, strained or inadequate for people in general in Ireland. On top of that, there are language issues and the fact people do not have any awareness of the mainstream services. The lack of access to multilingual services is a big issue. We have been contacted by people working in crisis intervention support services who said they do not know how to support people. The use of interpreters is problematic and there are cultural barriers. A great deal of work needs to be done in this area. Because of the length of time people have spent in direct provision, some of them are in really bad places and, as Mr. Henderson said, in many cases, they are suicidal. Organisations like ours are trying to do their best to stem the tide in many cases by providing people with access to minimal supports and services.

Chairman: I have one final question and then I will bring in other members. I will and come back in at the end. Drug addiction and mental health issues among people in direct provision were mentioned. How prevalent is that? What has been the impact of the pandemic on people in direct provision? If treatments were more available does Dr. Lannon think that may be another element of dealing with the connected areas of mental health issues and addiction?

Dr. John Lannon: I will address the Chairman's second question first. We have engaged with the HSE to attempt to get better supports and services for people in centres. A phrase I have used is "forced idleness", which is a reality for many people in direct provision. Access to work is available now for anyone who has been six months in the country. A person can apply for a work permit and he or she would then be fortunate to get work. A person living in the direct provision centre in Limerick city has a much better chance of work than a person living in a far remote area of County Clare or some other counties. Sitting idly without access to employment or education, having been traumatised through displacement, persecution and perhaps oppression prior to coming to Ireland has meant the problematic nature is exacerbated by resort to substance misuse. We do not have research on that. There is limited research on the prevalence of substance misuse among protection applicants but many risk factors such as social exclusion, long-term unemployment and stresses associated with previous experiences

are evident. We need a proactive approach to ensure supports and services are available to people in centres right across the country. There are 80 of them. We note and welcome the promise by Government to start closing the emergency accommodation centres. However, as Mr. Henderson said, there needs to be a plan for how to respond to the closure of those centres. We need to ensure accommodation is available, that the backlog is cleared and, most importantly, we want to avoid returning situations where there is not only over-crowding but more overcrowding in centres where people are sharing, which, in itself, is contributing to even more distress and anxiety for people.

Chairman: I will come back in later. Deputy Pádraig O’Sullivan wants to come in and he will be followed by Senator Eugene Murphy.

Deputy Pádraig O’Sullivan: I confirm I am in the convention centre and hope I can be heard. I thank Mr. Henderson and Dr. Lannon for their presentations. I apologise as I have two Zoom calls running at the same time and it is quite difficult. I listened with interest to both presentations. As alluded to by both speakers, the Ombudsman for Children appeared before the committee a few weeks ago and his presentation was stark. I have a number of questions and I would appreciate a response to them. Dr. Lannon referenced the Ombudsman for Children’s report. From the perspective of my own interaction, there are two direct provision centres in my immediate area and I would have had much interaction with them during the years having been involved with community and sporting groups and so on. It was stark to hear all the people who were involved in those sporting and community groups had been Garda vetted and would have had clearance to deal with younger people in particular. I was quite aghast when I read in the Ombudsman’s report that this was not necessarily the case. Is that widespread across the direction provision system as a whole?

My second point is a comment on the White Paper. It is great it has finally been published but we cannot let it become an excuse for our work being done. The work is only beginning. What reforms would our guests propose we need to take in the interim?

My third point relates to deaths in direct provision centres. There have been numerous newspaper articles and reports over the past few years on the number of people who have died in centres in recent years. The number who have died is contested. Do our guests have any data or reports on that or can they bring any clarity to the number of people who have died and the nature of their deaths?

My fourth point relates to unaccompanied minors and children’s issues. There have been newspaper reports that many children seeking direct provision would be under the age of 18 and once they turn 18 years of age they are removed from foster care and brought into the direct provision system. What are our guests’ thoughts on that? How many people does that affect? I read newspaper reports that it involved more than 50 children.

My fifth point relates to reports from the Department of Public Expenditure and Reform of officials who have allegedly said direct provision targets are unrealistic, which was a headline in the *Irish Independent*. In particular, they flagged the concerns they had with respect to funding, decongregation of the setting and funding for housing, which was mentioned earlier. What are our guests’ views on that and the challenges we face us in that regard.

Dr. John Lannon: I can respond to a number of those points and Mr. Henderson might deal with some of them. The Ombudsman for Children’s report is quite stark. Some of the issues highlighted in it chime with us and, more importantly, with the people we support, particularly

the problematic nature of the lack of inspections and the need for an independent complaints procedure. Those issues date back quite a few years. The ombudsman and others have highlighted there is quite a degree of widespread fear among people of coming forward or highlighting issues related to conditions or lack of access to services in direct provision centres. The ombudsman clearly said that, essentially, it did not have the best interests of children at its core. I would say the situation is better in some of the centres that have been opened in appropriate locations that have fully own-door access and accommodation, where families can themselves look out for the best needs of the children. That is better than the congregated settings and situations where children are really suffering and in particular, their development is suffering. We see that across the board.

I will comment on something the Deputy mentioned with regard to community support. Community support has, by and large, been wonderful around the country for people and families who are in direct provision. I do not know of a centre in the country in which there is not someone in the community who could be called upon to give a hand or to help out if necessary. That is in stark contrast, I must say, to much of what would have hit the media with regard to protests on the opening of direct provision centres in communities. Communities are, by and large, very welcoming and open to having protection applicants or others living in their community.

I will address some of the other questions on unaccompanied minors and the numbers affected. We do not have tracking. One of the issues and problems here is that the people disappear out of the system when unaccompanied minors come in and we do not know where they end up. They have disappeared after coming into the country. This is a problem. We should not and do not have situations where people are recognised as being under 18 and are unaccompanied in direct provision centres but we have had a number of cases of people whose age was disputed and there was evidence to strongly suggest they were less than 18 years old. They were, however, accommodated in direct provision centres and that is really problematic because of the special reception needs they would have. Again, that was highlighted by the Ombudsman for Children's report.

Perhaps Mr. Henderson would be best placed to speak about the targets and the Department of Public Expenditure and Reform. He might like to comment on that and then I can come back to some of the Deputy's other points.

Mr. Nick Henderson: I can come back in on that. In the *Business Post* a couple of weeks ago, officials from the Department of Public Expenditure and Reform stated that the time target, that is, 2024, and the amount of money allocated, were underestimated. I do not disagree with either of those points necessarily but without being slightly trite, if we disagree with them, what will it cost? As I said, we would expect all Departments to input positively into this process. The Department of Public Expenditure and Reform and the Department of Finance are really crucial actors in this in terms of the budget that will be required to go to a new system of accommodation.

In terms of budget, to be very brief on it, we have spent almost a quite obscene amount of money on this system of accommodation, which has accommodated people. I think something like 60,000 people have been through direct provision over 20 years. There is nothing there for the taxpayer, however. There is nothing there for Government in terms of any buildings or properties or use. When we talk, therefore, about an alternative to direct provision, sure, there will be the creation of a new budget line. With the two systems in parallel, that is, the existing one, which is being wound down and the new system, which is being created, there may be two

budget lines. If done properly, however, we believe that in the long term, this is better for the public. That would include the public from the perspective of the Department of Public Expenditure and Reform as well.

I can come in on the short-term points to that question and then I might hand back to Mr. Lannon. The advisory group on direct provision and the protection process, chaired by Dr. Catherine Day, published its report in October. That made various recommendations and has a list of issues that could be immediately implemented. The White Paper picked up on some of those things but some still have not been implemented. It is frustrating, not least for people in the process, that some things, which should take no time or a little time to implement or change, are slow. One example is drivers' licences. It remains the case that somebody would have difficulty or just could not apply for a driver's licence, which would allow for some sort of independence. There is still no provision for that as far as I understand. I can come back on another couple of points, for example, deaths in direct provision. I will hand back to Mr. Lannon.

Dr. John Lannon: I thank Mr. Henderson. I will come in again on the question about the reforms. One comment I would make is that we have moved now with the White Paper from discussions about reforming direct provision to a clearly-stated recognition that it is not fit for purpose. That is really positive and welcome. Reform has not worked nor can it work, given the fundamental nature of direct provision. A few things need to be done now. We need HIQA inspections to provide proper oversight of direct provision centres. That is something on which I would be happy to come back to speak further, if the committee wishes. We also need vulnerability assessments across the board.

The Ombudsman for Children's recommendations are a good starting point. It said the International Protection Accommodation Service, IPAS, should put in place a procedure to identify children with special reception needs, which is really positive. This should include a vulnerability assessment. Recognising the vulnerability is crucial, as it has pointed out. This is something that goes across the board as well. Recognising the vulnerabilities needs to be considered in the planning and provision of accommodation needs because accommodation needs will vary. As Mr. Henderson said already, with the right approach, many people - the vast majority of people - who come to Ireland seeking international protection can live independently and can live in the communities with proper access to social welfare, education, employment, etc. Some will have special needs, however.

One of the things we have seen that is particularly problematic is the lack of on-site collaboration between agencies when it comes to preventive supports or early interventions. We have seen situations where parents are struggling. When these situations are allowed to fester and develop, things become more and more difficult.

Even with regard to how IPAS operates at the moment, sometimes we will intervene and request a transfer because we feel it is in the best interests of the individuals but that is not done or we are told that it cannot happen for a variety of reasons. Much more, therefore, needs to be done with regard or in response to residents' plights and situations. The first thing is that they need to be listened to and this comes back to HIQA inspections. At the moment, inspections, such as they are in direct provision centres, do not take into consideration or even listen to the people who are most affected, that is, the residents. If I may, I will hand back to Mr. Henderson on the deaths if he wishes to speak on that.

Mr. Nick Henderson: I will comment quickly on things that could be implemented quickly. Figure 6.1 on page 83 of the advisory group report contains a list of things that could be imple-

mented. It is literally titled “Recommendations that could be implemented quickly”.

In terms of the number of people who have passed away or died in direct provision, there is a very topical article in the *Irish Examiner* in which Mr. Lannon is quoted by Mr. Mostafa Darwish. I think the figure in that is around 84 people who passed away or died in direct provision. We are aware in the last year, very sadly, of at least two suicides. The main point that organisations have been making is that there is a need for greater transparency. There is also a need for better co-ordination between the Garda, the International Protection Accommodation Service, IPAS, and also the body that investigates deaths here, the Coroner Service. There needs to be more transparency and communication. There was a case in Galway of somebody called Sylva Tukula who passed away and there was a terrible mix-up in terms of her remains. I will finish there.

Senator Eugene Murphy: I thank Dr. Lannon and Mr. Henderson for their presentations. I know Dr. Lannon for some time and he has gotten to know me. His commitment to support those people over a number of years must be acknowledged. At a time when many did not stand up for such unfortunate people, he and Mr. Henderson did.

The Chairman asked a number of questions I intended to ask. We have had experiences in County Roscommon and not too far from there with centres. What often concerns me is the integration and support. It is very good initially, but as time goes on it disappears, although not fully. I fear there is a gulf developing between local communities and people in such centres. Is that something either of the witnesses has come across or is concerned about?

Regarding individuals who complain about their accommodation or food, I am aware of one case going back some years. We all accept that things have improved considerably. We have the White Paper. We need to get the recommendations of the White Paper implemented as quickly as possible. A person was brought to me who could not adapt to Irish food and the person was tossed out on the street. I accept a lot has changed but that was the reality. We have moved away from that. Do we have any similar situations at the moment? I believe that sort of outrageous carry-on has disappeared.

Regarding integration and the availability of crèches and playschools in towns, I do not think a realistic effort is being made to integrate children from those communities into local crèches. In some cases, people locally in the community were prepared to do it, but the State was not always prepared to go for that option. The preference was to provide a crèche within the accommodation rather than in the community. Surely integration is the way to do it, to bring refugee children into the local creche or playschool where they can interact with the local children. Those type of bonds are great. If we look at people from other communities who come here because of war or whatever else, sometimes they are talented sportspeople and they get into a local girl’s or boy’s football team and that is fantastic integration for them. Is that an area where we still have to do an awful lot of work? There is no point in people saying they will help people when they arrive in a town or village and that they will do this, that or the other, but as time goes by the support wanes.

The Chairman has asked the other questions and they have been answered fairly well. I did raise driving licences at a meeting previously. There are significant issues in that regard. In general, improvements are taking place. I am very much of the point of view that if we give commitments to take in those unfortunate people, we should look after them to the very best of our ability and not leave them suffering in any way because they have gone through an awful lot.

Dr. John Lannon: As Senator Murphy said, we know each other all right. I am happy to say that.

In terms of integration, the difficulties for international protection applicants begin with the fact that they are trying to survive on €38 a week, living in institutionalised settings, often in remote locations that do not have adequate supports or services. In some of the communities and locations that we both know where there was discussion about setting up a direct provision centre, there was clearly a need that had not been addressed to engage in discussion and dialogue with all stakeholders – the people who would be expected to live in the congregated settings but also the local communities - in terms of ensuring adequacy of services and supports. The chances are that in many cases the local GP, crèches and everything else are already stretched so this is something that we need to recognise and understand.

We have some wonderful experiences in Limerick of children from the direct provision centres going to the same crèches as others and now going to the same summer camps. We are happy to see that we have children whose parents may have come from Syria, Afghanistan or other parts of the world that are likely to be playing Gaelic football in another few years. This is something that we do have to work on. We must ensure that any elements of systemic or institutional racism that might exclude people who are international protection applicants are addressed. We have a number of initiatives that are happening. The consultation in the national action plan against racism is something that is of relevance here as well.

Food is often an issue in direct provision centres. In many cases, people have own-door access and they can cook their own food. In other cases, we have what is called “independent” living, which is not what we would understand as independent. It refers to a centre that has a food hall or an accessible shop where people can buy a limited amount of food and cook that in a shared kitchen. In other places, people are queuing up in a canteen to get food that is not appropriate, not only to their culture but to their dietary needs, which are often not addressed. That is problematic. We find that children are not eating, and adults are unable to eat. This is also exacerbated by the stresses, strains and anxiety that people are suffering as a consequence of their experiences before coming to Ireland and having to live in direct provision.

We often find as well that communications between centre management and IPAS is not as immediate or fluid as it should be. That can result in misunderstandings in some cases and people not being given access to centres or, as Senator Murphy stated, in effect being tossed out on the street. There have been cases of that, which is extremely worrying. We have quite a bit of work to do as we look forward with the White Paper, which gives us an opportunity to put proper measures in place to ensure that communities across Ireland where protection applicants or anybody else will be living have adequate supports and services that are appropriate to the needs of the people who will be using them.

Mr. Nick Henderson: I was just checking on the national childcare scheme. My understanding regarding people in the protection process is that an asylum seeker who is working can access the national childcare scheme but somebody who is not working cannot do so. Programme refugees, who are resettled refugees, can access it but people in the protection process who have arrived spontaneously cannot do so. We have an integration strategy in Ireland but it does not include asylum seekers. It does not include people seeking protection. It starts upon being granted status. This is in contrast to Scotland, which has a new Scots integration from day one strategy. Looking at the Scottish experience, we believe it makes sense to support people in integration from day one even though people who come here may not stay and even though the Government may intend to deport or remove those who are unsuccessful in their applications.

Dr. Lannon hinted at this next point earlier. We have worked with people who have come here with huge enthusiasm, skills and optimism but this has deteriorated. The delays in the asylum process in this regard are crucial to this. We can do all these things and, as we have recognised, communities have huge power and ability. Ultimately, when it comes to the crunch, it is somebody simply waiting for a decision that does not come. People may deteriorate. Their mental health may deteriorate. People can also close up.

Deputy Pat Buckley: I thank the witnesses. Much has been covered. I want to go back over a few issues. We are having a conversation about conditions in direct provision. I have spoken to Mr. Henderson and a few of the people who were outside yesterday. Let us be honest. The majority of these people come from very bad situations. They come here hoping for sanctuary. We have a reputation of being an open and welcoming society. There is still a perception that these people are free loaders who should not be coming here. We also hear all these horrific stories of overcrowding and what the witnesses have covered today.

The witnesses spoke about strategies and White Papers. I have seen too many of them in the short few years I have been a Deputy. I am speaking about implementation. I am a massive fan of NGOs. Believe it or not, they are one of my favourite groups. We need to get the information out to the general public on how these people came to be here and what were their options in their own countries. When we educate people and give them the key to opening up to people, they might understand why they are here. They might be more not so much sympathetic but empathetic to the fact we should not be criticising these people but supporting them.

When we sit down and have a conversation with somebody, we learn from them and they learn from us. I am a massive fan of integration. We have a food festival every year - bar the Covid years - in Midleton. We bring all the nationalities that have come through the asylum process and they show off their national foods. The way Irish people interact with them on these two days is absolutely amazing. People make friendships and understand each other's culture. To get the information out, how do we educate people who are uneducated when it comes to knowing what is happening? They then make a judgment without having proper information.

A point that was touched on was deaths and suicides and how suicides are reported. I am very curious about this. We have a similar issue in the prison service. Bodies are removed from the prison and taken to the coroner's office. In the same way, the bodies are no longer in the centre but in the coroner's office. This is where the suicide is determined. How do we get positive figures?

Several weeks ago, the Ombudsman for Children came before the committee. He was very critical but very honest about what is happening. The Doras report does not spare much either. It shows the position and that is the way it should be. We keep speaking about things that are broken but nobody wants to fix them. Is it an issue with money? Is there European money we can access?

While I say all of this I have to be conscious that some people, because they are not educated enough, do not want these people in their communities. However, as the witnesses have mentioned, many of them are qualified doctors, dentists and engineers. Others are very badly traumatised and need help. Mental health services were mentioned. Mainstream mental health services are diabolical so I do not know how we will get anything into these centres.

The witnesses referred to places not being fit for purpose. It is amazing that other systems, such as the HSE, can deal with such an issue in months. In my town, we have the Owenacurra

health centre. It is not fit for purpose so it is going to be shut down in October, which is pretty fast. All of the people will be moved out and the services will be relocated. This can be done. We do not want this to happen in our town but I am giving it as an example of how quickly things can be done.

I have one simple question for Dr. Lannon and Mr. Henderson. On a scale of one to ten, if they had to be totally honest, with one being very good and ten being absolutely diabolical, when it comes to providing the services for the most vulnerable, how bad is it?

Mr. Nick Henderson: On public communication, we would put our hands up and say there is always room for doing more. In our experience contact matters. Two people having a conversation can change perceptions and stereotypes. Over the past year, the Black Lives Matter movement has come to the fore. We should recognise that racism exists in Ireland. This has to be acknowledged and dealt with.

In terms of trying to give a score it is very hard to do but I suppose I would give a four. Some people are given some support. What we sometimes hear from Government representatives is that we are not like Italy or Greece. Our response to this is that they are dealing with different scenarios and different numbers of people. We also say we should judge ourselves on our own history, experience and standards, for example cherishing all children of the State. We are demonstrably not doing that at present and this is a problem.

Dr. John Lannon: I would not disagree with Mr. Henderson's assessment. For me, the starting point is always that we have responsibilities under international legal instruments with regard to providing the opportunity for people to seek asylum. We look at instruments such as the reception conditions directive at EU level under which we have obligations regarding what we do. In terms of what Mr. Henderson was saying, I guess we could do more, but we are doing what we can with very limited funding for the NGO sector. We are absolutely stretched when it comes to trying to do what we are doing. In my opening statement, I mentioned a whole list of areas that we are working in or trying to work in at Doras. We are trying to do that on a shoestring.

The State has a responsibility here, whether it is in terms of ensuring that there is funding at local and community level for initiatives that are appropriate or in terms of ensuring that there is proper and appropriate information for people so that we do not, for example, have far right elements coming in and spreading misinformation and lies in relation to immigration. We need to ensure that we are out in front of that in terms of getting the right information to people.

Mr. Henderson mentioned the national integration strategy. There are deficiencies in that. Taking the example of Limerick, where there is a local integration strategy, we have an integration working group. Under that, there are a number of elements, including a child and family support network. There is a lot of work that is being done at a local level to be proactive. In fact, we, as an organisation, were set up at the same time as direct provision was introduced around 21 years ago. We have maintained the work that we are doing to try to ensure that what the Deputy is speaking about in terms of getting the information out and educating people is happening in Limerick. However, I do accept that we have a lot more to do.

Deputy Pat Buckley: I thank Dr. Lannon for his honesty.

Chairman: Is Deputy Devlin there?

Deputy Cormac Devlin: I am in the convention centre, so apologies for all the bells. At

the outset, I wish to thank both Mr. Henderson and Dr. Lannon for their presentations. Apologies for not joining the meeting earlier; I was in the Chamber. I ask the witnesses to forgive me if I go over questions that have been covered. I heard some of the questions being asked, but I have a few of my own. As others have said, the Ombudsman for Children appeared before the committee previously and we had a good discussion around the White Paper. The witnesses have referenced that in many of their replies. It is important to have that tangible document to work towards it in a speedy fashion.

Protection accommodation, and specifically, AHBs, were mentioned in the opening remarks. I ask the witnesses to go into more detail on their thinking on those as specific bodies for accommodation. Equally, I heard the witnesses speak of the issue of individuals sitting idly. I am very aware of that. Dr. Lannon mentioned Doras being in operation for 21 years. I recall that perhaps 18 years ago, accommodation was provided for minors who were coming into Sandycove in my constituency of Dún Laoghaire. Local people set up a football club for those minors. It created a great sense of integration between local teen, early teens and many of the unaccompanied minors. When we speak about activities, entertainment and genuine integration, there is nothing like sport, music and other similar activities. That brings me onto my next question. What type of activities and entertainment are available for those who are in many of these centres? I am aware that the witnesses have said that there is a hierarchy of needs and there are needs that are greater than that.

The witnesses have mentioned mental health and suicide, which is extremely worrying. I believe I heard them say that some applicants are 15 times more likely to be diagnosed with mental health problems. That is a staggering figure. Do the witnesses have statistics on the age range of individuals that we are talking about, and equally, what services are available for them?

The witnesses mentioned HIQA and the need for HIQA inspections. Obviously, if the White Paper takes off, many of these issues could fall away. However, there will need to be a system of inspections in place. I was a member of the Special Oireachtas Committee on Covid-19 Response last year. We heard about the lack of inspections in some accommodation centres. That, in itself, is worrying. We have seen other issues in relation to nursing homes. From the witnesses' perspective, what needs to change in that arena?

Senator Eugene Murphy mentioned integration and Deputy Buckley mentioned food and culture. I recall being at a school fair a few years ago. What struck me was that the food and elements of the culture of all nationalities represented in the school were on display. Again, that sent a signal of true integration. These children were celebrating their cultures and being proud of where they are from, yet they were loving living in Ireland. That is what we need to embrace. In referencing my own constituency, we used to have a festival of world cultures, which was extremely well publicised and known right across the world. Unfortunately, it grew too big for one local authority area to take on. It pointed to the need to celebrate culture, diversity and integration.

My final question concerns education. The issue is one that comes up now and again and I am sure both organisations are well aware of it. It concerns individuals who are in education and are told one day that they are being relocated to perhaps another part of the country. That obviously has a huge and devastating impact on those individuals. We spoke of mental health problems earlier on. I can only assume that such instances of relocation would compound such problems. The Department has acted compassionately in some cases, but I am sure the witnesses are aware of others where that did not happen. Perhaps they might touch on that in their

responses.

I thank them both for their presentations; they were most interesting.

Chairman: The Deputy was plugging Dún Laoghaire as a staycation destination.

Dr. John Lannon: I can speak about the HIQA inspections, Mr. Henderson can speak on AHBs and I can go over some other points after that.

On the inspections, we have been talking about the problematic nature of inspections for years, since 2006 or 2007. The International Protection Accommodation Service, IPAS, is supposed to carry out inspections using its own staff and the staff of a private company, QTS Limited. The inspections are supposed to monitor compliance with the rules and things like food hygiene, water supply, general safety and that sort of thing. In terms of inspections, very little has changed over the last decade and a half in respect of the types of problems being reported.

To explain why we feel the HIQA inspections are particularly important, currently, three inspections are supposed to be carried out per year. That was not even happening in all centres pre-Covid, but it certainly has not been happening since the onset of the Covid pandemic. The current inspections essentially monitor the contractual obligations of the contractors, building maintenance and that sort of thing. As I said, there are supposed to be three inspections per year.

HIQA inspections would be different. They would aim to improve generally the quality and safety of health and social care services. They would do a lot more than just focus on the buildings. They would focus on the quality, safety, person-centred care and that sort of thing. Essentially, they would or should consult and assist people using the services to understand what they should expect and they should develop guidance for staff in order to make improvements. Reading the current inspection reports and looking back over the years, we see that residents are not consulted. They are not even being considered. Current inspections are, at best, about buildings and kitchens and things like that. HIQA inspections would be more about people. From a human rights perspective, that is really important. We have talked about children. It is also vitally important from a safeguarding perspective. Indeed, the Ombudsman for Children has highlighted that the current inspection regime does not take into consideration the supports needed to meet children's physical, mental and social development.

It has been delayed. The Minister has said that progress has been made. There has been engagement with HIQA on getting inspections up and running. There is a question mark over whether legislative change is needed. I believe that it is, but the Minister said in May that that had not yet been determined. This uncertainty is worrying given the very dire need for inspections. The Emergency Homeless Accommodation and Direct Provision Independent Inspections Bill 2018 sought to amend the Health Act 2007, but it was never enacted. It would have granted HIQA the power to inspect direct provision centres. It is a vital area in terms of ensuring that the services are appropriate, not just for children but everybody.

I will hand over to Mr. Henderson now to deal with the questions on the approved housing bodies, AHBs, following which I will come back in again on some of the other issues.

Mr. Nick Henderson: On the inspection issue, it is worth looking at the difference between the current inspection reports for direct provision and a HIQA inspection report for a nursing home or another type of institution. They are two different things entirely. Dr. Lannon said it all in that respect.

On the approved housing bodies, our report looked at this in detail and it found that there are many advantages in using approved housing bodies, including that they are non-profit and they can provide wraparound supports. There are currently over 500 AHBs in Ireland, ranging from the very large to the very small. The advisory group report published in October and the White Paper both recommended that more vulnerable groups may need different types of accommodation. Our report also looks at how we could use smaller proportions of accommodation from existing or forthcoming developments. It suggests a pivoting of existing approved housing bodies, taking them back to some of their origins where there were huge challenges around accommodation and housing, such that they are purely devoted to this issue.

On the other hand, there are barriers and disadvantages that we would have to surmount. In the seminar we held in June, there was input around the lack of clarity thus far on how an AHB could get involved in this type of accommodation. We have not yet spoken about the current challenge of the housing crisis and the fact that AHBs are embroiled in trying to deal with that challenge. There is also the issue of scale and bringing accommodation on stream. The report does not recommend AHBs as the exclusive accommodation stream, but it is one of several. The report projects that by 2024 this stream will be providing 25% of the accommodation. I will hand back to Dr. Lannon to address the other issues.

Dr. John Lannon: On the types of activity and entertainment available to people, by and large, communities are wonderful in terms of their engagement and openness to new cultures, experiences, food and so on. For people living in direct provision accessibility is the problem. If you cannot get a driving licence and you live miles outside of the nearest town it is really difficult to even join the local GAA or soccer club and to attend training. We are currently trying to find ways to facilitate access to training with one of the local soccer clubs for some people who have just arrived into the direct provision centre. As a number of members have said, it is a wonderful way of engaging and integrating.

On individuals' mental health and the age range of individuals, we are supporting people aged 17 to 70 in direct provision who are struggling with mental health issues. These centres, in many cases, are managed by private contractors with staff that have insufficient experience or training to provide supports or to refer people to the appropriate support services. This is a huge issue. Some members asked about our recommendations. We made a number of recommendations in our report on mental health as a short-term and urgent priority. We recommended single occupancy rooms be made available to people who self-identify or are identified by the health services as particularly vulnerable or at risk. That is critical but that does not happen in many cases. We need to listen to and follow up on recommendations with GPs and psychiatric services and other qualified health professionals. In almost all cases of which I am aware, a health professional has identified the vulnerability and signposted to what needs to be done but the follow-up has not happened. In many cases, the default is the prescription of drugs. Yesterday, I spoke with a man who lives in a direct provision centre and he told me that he is on, I think, 11 different forms of medication. He does not need to be taking that medication, but that is the consequence of the lack of other supports or services for him. We need to ensure that mainstream support services, including targeted outreach services, are available and accessible to people. The vulnerability assessments and effective independent monitoring and oversight by HIQA are important. Allowing people to be able to move out of the system is also important. The issues in regard to the backlog were referenced earlier by me and by Mr. Henderson. These issues have been highlighted by professionals, such as the College of Psychiatrists of Ireland, as far back as 2009. We need to take action.

The lack of multilingual mental health support services is a real issue. When it comes to interpretation services, this is problematic as well. We need to do more in Ireland to ensure that there is an effective accreditation system for interpreters to ensure that the services are professionalised to a high standard, appropriate and compliant with all the necessary legislation.

Chairman: With the agreement of the two remaining contributors, we will take their questions together. The first contributor is Senator Jerry Buttimer, followed by Deputy Brendan Griffin.

Senator Jerry Buttimer: I will allow Deputy Griffin to go first.

Deputy Brendan Griffin: I thank the witnesses for their contributions. I would like to take up a couple of points. The number of people who tested positive within the direct provision services was referenced. For information purposes it might be helpful for the committee to have the stats on the percentage of the overall number of residents versus the percentage in terms of the general population. At the start of the pandemic, a very serious situation arose in the Cahersiveen centre, which was mishandled. There are lessons to be learned from that if we are to avoid a repeat of that situation.

I want to raise an issue that has come to my attention in the past 24 hours. I am sure it has been brought to the attention of many other Deputies. I know it has been raised with my colleague, Deputy Michael Creed. I refer to the situation in regard to the direct provision centre in Macroom, County Cork, where a number of residents have been informed that they are to move to County Donegal. This is very concerning. There are people who have come to Macroom, settled well into the community and are happy where they are. They enrolled their children in local schools and those children have settled in and made many friends in their classes. I have been informed of families who bought uniforms for the new semester, starting in September, and who are being moved to Donegal. My understanding is that they will be moved to own-door accommodation. That is an improvement, on first look, but some of those families have put down roots in the town and are being asked to move to the northernmost part of the island of Ireland. Children and adults are being separated from their friends. What are our guests' views on that? Should there be an opt-out for people? I am also concerned about the amount of notice that is being given to people. In this case, the notice period seems to have been particularly short. It is surely no way to treat people. I am keen to hear our guests' views on that matter. I again thank Mr. Henderson and Dr. Lannon.

Today's meeting needs to be about the direct provision service and everything we have discussed. However, it would be remiss of me, as a member of the committee, not to question the Chairman's recent remarks where, as a Member of the Oireachtas and as the Chairman of an Oireachtas committee, he failed to condemn the killers of a member of An Garda Síochána on active service. The Chairman needs to explain his position to this committee or to Dáil Éireann. Does he or does he not condemn people who kill members of An Garda Síochána in cold blood, people who left a wife widowed and children without their father? Is this something with which he agrees or not? He should explain his position to this committee or to Dáil Éireann. The Dáil is sitting again next week and the Chairman will have the opportunity to explain his position. He should do that. We have not been able to sit in person since the first meeting of this committee and the Chairman has got off the hook on a number of occasions. He needs to make his position clear to Dáil Éireann. That is the very least he should do as the Chairman of an Oireachtas committee.

I thank our guests for their contributions. They are doing an important job and I am sorry

that the other matter I have raised has overshadowed the important matter we are here to discuss. I have raised a number of points and would be interested to hear our guests' views on those specific cases relating to direct provision.

Mr. Nick Henderson: I can take up the points the Deputy made about Covid-19. I am just getting the data. I understand that 670 cases were involved. Direct provision was the second most likely location of infection, second only to accommodation within the Traveller community. The final statement was that people living in direct provision were at greater risk of infection because of their location but not because of their personal profiles. I will get that information and come back to the point.

The Deputy also raised the issue of people being moved at short notice. That has always occurred. It is important, on one hand, to close emergency centres because they can be plainly unsuitable and are likely not to have support networks for their residents. At the same time, however, the closure of emergency centres must be done in a sensitive way so that people who may have built connections within the community are not simply removed at short notice, which was the point to which the Deputy referred. I will pass across to Dr. Lannon. I am getting the data on the Covid infection point and will come back to it shortly.

Dr. John Lannon: I will come in on the point the Deputy made about Macroom. The scenario outlined is exactly why we need own-door accommodation for families who are seeking international protection in communities in Ireland, including integration from day one after the initial period in the reception centre. I would have to say that the answer to this issue often lies in consulting with the residents and rights holders themselves. If the only options that are available at the moment are own-door accommodation in Letterkenny or continuing with something less than that in Macroom, and taking a human rights-based approach, we should ensure participation in the decision-making process by the rights holders. We put a lot of emphasis, through our human rights based approach, on issues such as accountability, non-discrimination, equality, empowerment and legality. Those are all crucial matters. It has been welcome that the Minister for Children, Equality, Disability, Integration and Youth, Deputy O’Gorman, and the Government have emphasised the need for an alternative to direct provision that is human rights compliant in the future. We need to do that now because we cannot allow ongoing failures in the provision of human rights to continue within the system when there are ways in which we can address them, albeit in a limited capacity with the constraints imposed by the institutionalised congregated living.

Deputy Brendan Griffin: Everyone agrees that own-door accommodation is a better option than the direct provision system as it has existed to date. I am concerned, however, about circumstances where the residents would be happier to remain with the status quo, as distinct from an own-door scenario so far away. I have called for this decision to be reviewed to allow for time to see if alternative accommodation is available in the immediate vicinity. Should there be some sort of a formal opt-out arrangement? Has the Department communicated with our guests about anything along those lines?

Dr. John Lannon: I do not want to underestimate or dismiss the challenge of providing accommodation for all the people who are in the system that IPAS is facing. There are too many in the system and IPAS has a backlog that has not been addressed by the Department of Justice. Flexibility is needed, however, and we have always called for that. There are many moving parts involved. There are people who need to move and people who want to move but who, very often, do not get the opportunity to do so. On the other hand, there are people who are being asked to move and might ultimately prefer not to do so. There is an opportunity to look at

and understand the needs of the individuals and families. That is critical. I am often concerned that transfers or the rejection of transfer requests are made without understanding and without looking at the particular needs of the families or individuals concerned. Those decisions are just made and those families and individuals are moved. There is a risk that people are being moved solely on the basis of numbers and bed allocations rather than being assessed as human beings who have particular needs and vulnerabilities, and also have human rights.

Mr. Nick Henderson: I will come back in on the Covid point. I have checked that out. There was a report from HIQA in March which provided thorough data. I got the information slightly wrong. The Travelling community, followed by the Roma community and direct provision centres were the sites with the highest rates of infection. The 670 cases in direct provision centres represented an 8.1% infection rate and a 2.8% hospitalisation rate. The report stated: "Residents and staff of accommodation centres for international protection applicants and programme refugees presented with an increased risk of infection, but comparable rates of severe disease relative to the general population." We published the Powerless report on Covid and direct provision in August. The main feedback from that report was that people could not socially distance themselves and felt powerless to control their circumstances. Where I or the committee members can work from home and shut the door, people in all congregated settings cannot do that.

Deputy Brendan Griffin: Is Mr. Henderson talking about approximately three times the rate of the general population?

Mr. Nick Henderson: Yes. It would be that.

Chairman: I am conscious of the time. Has Senator Buttimer any questions?

Senator Jerry Buttimer: Yes. I thank both witnesses for their presentations and ongoing work. All of us are deeply conscious of the real need for reform and, ultimately, action to be taken in ending direct provision. In the context of the legislative foundation for proposed reform and the fact that the Department of Children, Equality, Disability, Integration and Youth may be stating that we do not need that legislative framework, does the whole reform process stop if that framework is not there?

My second question is in the context of the proposal from the Government and the Minister, Deputy O’Gorman, to close 24 emergency accommodation centres throughout the country and feeds into what Deputy Griffin said about the need for real consultation. Dr. Lannon stated that one of the things we must do in a multicultural Ireland if we are serious about it at any level, whether it concerns the GAA, civil society or schools, is to have integration and consultation. Consultation means real dialogue. In my native city of Cork, we have seen a lot of great work being done by many different organisations and we had a very strong city council integration policy. As Dr. Lannon stated, there are multiple moving parts but the fundamental thing is that we are dealing with human beings. As politicians, none of us looks at the person who walks into our office as a voter. We look at them as a person who has come to our country looking for help and international protection.

My third question concerns the international context. How stands international protection for people who cannot necessarily leave their countries now because of the Covid-19 pandemic? What should the committee do to prioritise and promote equality and human rights now that Ireland has a powerful seat at the UN? Deputy Griffin posed a question we need to answer in the context of the remarks the Chairman allegedly made. If we are talking about the upholding

of human rights, and this is not for our two witnesses today, then the Chairman needs to address matters relating to the killing of a member of An Garda Síochána.

I thank Mr. Lannon and Mr. Henderson for being here today and for their ongoing work. Many of us who have an open door policy, as all of us on this committee do, recognise the importance of giving the witnesses a platform beyond a wider remit to educate and bring people on a journey. It is through education, schools and sport that we can bring profound and real change. I am conscious that the McMahan and Catherine Day reports have given us a roadmap. The Law Society made a very interesting submission recently to the Government on that. We might look to bring representatives of the Law Society before the committee in future.

Chairman: I ask Dr. Lannon and Mr. Henderson to quickly answer Senator Buttimer. I am conscious of the time. We are coming to the two-hour mark and the committee still has some work to do.

Mr. Nick Henderson: On the issue of the legislative basis for reform, the civil society concern, and the Movement of Asylum Seekers in Ireland made this point immediately upon publication of the White Paper, is that unless change or prospective change is put into law, then a change of Government, public opinion or political will means it would not happen. I agree with that. I am not quite sure how we translate what is quite a wide-ranging list of changes and reforms, including housing issues, into statutory form but it could work, for example, in terms of the asylum procedure. I just checked and I think either the Netherlands or Switzerland - I can update the committee - requires decisions to be made within a certain time. That may compel decision makers to act within that time.

On the international point, Ireland has quite an incredible record in respect of the Naval Service saving lives in the Mediterranean. Some 18,000 people were rescued in previous missions but since 2018 there has been a change of mission within the European Union, which has shifted more to identifying arms smuggling from Libya as opposed to saving lives. We have an incredibly proud experience and history in the Mediterranean, which was very rewarding for the Naval Service. We continue to recommend it as a tangible thing it could go back to. It is not without its challenges and other member states need to be brought on board but the record there is a very positive one.

Dr. John Lannon: I will add to that. In addition to the great record Ireland has in saving lives in the Mediterranean, we also need to ensure that we in the European Union are not blocking routes and opportunities for people to seek sanctuary and safety in Europe if that is something they need to do.

Chairman: I ask both Dr. Lannon and Mr. Henderson to make a few final comments. It is a pity we did not have more time because I had more questions.

Mr. Nick Henderson: I thank everybody for their interest and I ask the committee to remain engaged with us. It is building a good track record of witnesses, expertise and knowledge. The really hard work is ahead of us. At present, the one exceptional thing we have is there seems to be very broad agreement on the need for change, when previously it was about whether we should change or not. As we are now agreed on the need for change, let us move towards it.

Dr. John Lannon: I also thank members of the committee for their time today and for the attention it is giving to direct provision at this time. Ireland, collectively, needs to move speedily towards the implementation of the White Paper, notwithstanding the fact that some aspects

of it are still open to discussion and need to be addressed. Broadly speaking, we need to ensure we get to a point where our treatment of international protection applicants is human-rights compliant. We also need to ensure that we do not leave the 6,500 people who are currently in direct provision in limbo while we are waiting two and a half or three years for an alternative to be implemented. I again thank members for their time and consideration of these matters.

Chairman: Everybody will agree the discussion was beneficial and informative. On behalf of the committee, I thank both Dr. Lannon and Mr. Henderson for coming before it today even if it was only virtually. I hope at some stage in the future they will be able to appear before the Oireachtas committee again in person. I wish them both a good summer.

Decisions on Public Petitions Received

Chairman: The first petition for consideration is No. P00007/21, from Ms Nathalia Nogueira, which concerns the third level graduate programme, stamp 1G, visa extension. The petition states “As a result of the events of 2020, the year 2021 remains uncertain on a global scale.” The petition seeks:

to extend the visa of all graduate students for one more year. This would give us a more realistic chance of successfully securing [or] seeking ... a sponsorship. This extension will not only be beneficial for students, but also for the Irish market for retaining a qualified workforce in the Country.

The reply from the Department of Justice in the advice note has been circulated to committee members. I propose that the petition and the reply from the Department are published, the departmental correspondence is sent to Ms Nogueira and she is asked if she is satisfied with the reply.

Do members have any views on that or is it agreed?

Deputy Pat Buckley: It is agreed.

Chairman: Petition No. 9/21 is on an unauthorised development. The petitioner’s name is Mr. Michael Barrett. This petition concerns unauthorised development and the role of certain State and official bodies. Petition No. 23/21 concerns the unauthorised development on the River Shannon. The petitioner’s name is Mr. Jamie Forde Kelly. These two petitions are similar. I propose that, in accordance with the powers given to the committee by Standing Orders, the committee consider both petitions at the same time. Do members wish to comment?

Deputy Pat Buckley: I agree that these are fairly similar petitions but Senator Buttimer might remember something similar came up in a previous petition.

Senator Jerry Buttimer: Yes.

Deputy Pat Buckley: I am shocked that we are back to it in 2021. I note a number of recommendations there as well. The first petition, that the secretariat advises is similar to a petition that was submitted, is the one the Chairman covered to make the two the same petition. However, it was what has been alleged here, on, I suppose, the Shannon Estuary. It says here that there are currently legal proceedings, and the club mentioned is under investigation by both Waterways Ireland and Westmeath County Council. We never got an update on that on the

previous petitions committee because the Government fell. On that basis, I appeal to the rest of the members to have a look at the two recommendations. If we are joining the two of these together, my personal view is that recommendation 1 is the more proportionate and proper one to get responses to see what is happening with it.

Chairman: Does anyone else wish to comment? Is Deputy Buckley suggesting that we do both separately or together?

Deputy Pat Buckley: They are fairly similar. This is what I am afraid of. I would go with the recommendation on the first one of Mr. Jamie Forde Kelly. On the recommendation, as one can see, there has been a considerable amount of work undertaken on this petition and the secretariat advises in respect of the report received on unauthorised developments by Mr. Forde Kelly that Portaneena Marina is currently the subject of legal proceedings. It goes on to say that the petition case manager also suggests that follow-up responses be sent to the Department and Westmeath County Council for an update on legal proceedings. They are more or less the same recommendations. I have no problem. It is the same issue. They are two separate petitions but it is the same recommendation. If the rest of the committee is in agreement, recommendation 1 would be the one that I would be in agreement with. This is normally how it works.

Chairman: I propose that the report from the local authority be sent to both petitioners for their views and that the official bodies be asked for an update on the current situation. Is that agreed? Agreed. I also propose that both petitions be published.

Petition No. 10/21 is entitled “Abolish the restricted dogs list in favour of Deed Not Breed”. The petitioner’s name is Mr. David Ward. A reply was received from the Department of Community and Rural Development. I propose that the petition be published; that the reply from the Department be published; and that we send the correspondence from the Department to Mr. Ward and ask him if he is satisfied with the reply. Is that agreed? Agreed.

Petition No. 12/21 is in the name of Mr. Niall Campbell. I suggest that this petition is inadmissible as it contains the name or names of individuals, contrary to Standing Order 127(d). I propose that the name of the individual be redacted from the petition when published. Is that agreed? Agreed.

Next on the agenda was the election of the Vice Chairman which we agreed at the earlier meeting would be put off until after the recess.

We are well over the time. On any other business, would any member like to make any final comments as this is our last scheduled meeting?

Senator Eugene Murphy: Chairman, it is not usual for me to make a comment such as this. Indeed, when you became Chair of this committee, I was one of the people who urged members to give you a chance to proceed. I have to say - I do not go into rhetoric against any members - I was very disappointed to read about yourself and the comments that were attributed to you in relation to the death of Detective Garda Jerry McCabe. I am just doing this because I am thinking of Mrs. Ann McCabe, her five children and her family. I would ask you, without any further delay, to clarify your position on this so that we can move on because many of the members of the committee are quite upset about it. I will not say any more about it. Thank you for letting me in.

Deputy Cormac Devlin: On the same issue as Senator Murphy, as you are Chair of this committee and since we serve on the same committee, I did not hear the radio interview but

I read about it in a newspaper recently. I have to say I was shocked by your alleged remarks. As I said, I did not hear them. I would like you to clarify them, be that here today if we have time or, certainly, in a public forum. The article I read is unsettling and the matter needs to be addressed, obviously, by yourself, because the article related to you. I am sure you know the one I am talking about.

Other members have spoken on it as well. I await to hear from you on that, Chair. Thank you.

Deputy Pádraig O'Sullivan: I reiterate what previous speakers have said. Like Senator Murphy, I suppose, when you initially took up the job as Chair, my viewpoint was to get on with the work and crack on, but in light of these alleged comments - like Deputy Devlin, I have not heard the interview - and that article, I would appreciate it if you could clarify the situation, whether at this meeting or at a future one. Thank you.

Chairman: Anybody else? To clarify, I appreciate that people did not hear the interview. Let me start.

The killing of Detective Jerry McCabe was unjustified and I condemn it unreservedly. It was a reprehensible act. I condemn everything about it, as my party leader made clear - the act and what they did. I made it clear in a subsequent statement to Tipp FM last Friday in the interview. We have consistently apologised to Mrs. McCabe and the McCabe family and Detective Garda Ben O'Sullivan and his family as well.

I do not know why this arises. It was made clear last Friday, with my answer on Tipp FM. That is my position.

Deputy Brendan Griffin: Do you condemn the killers?

Chairman: I will not go into it any further, Deputy Griffin. We are over time.

Deputy Brendan Griffin: You will not, though.

Chairman: I unreservedly, like I said-----

Deputy Pat Buckley: With all due respect, through the Chair. The man has apologised and you are at character assassination here.

Senator Jerry Buttimer: Who is assassinating, Deputy Buckley?

Chairman: Sorry, I have been asked to make a statement and I have made it.

Senator Jerry Buttimer: That remark has to be withdrawn by Deputy Buckley. In the context of what is being discussed, it is unnecessary language by Deputy Buckley.

Deputy Brendan Griffin: That is grossly insensitive.

Senator Jerry Buttimer: We in this committee have always worked on issues but as Members of the Oireachtas we are held to account. I know that better than most. It is up to us to hold each other to higher standards and if we cannot have a debate without that kind of language, it says a lot about us.

Chairman: Sorry, I have made a statement there. I am conscious that we are over time under the instructions from the Ceann Comhairle.

Deputy Brendan Griffin: Chairman, I will ask you a question. It is black and white. Do you condemn the killers of Detective McCabe?

Chairman: I have made a statement, Deputy Griffin, and we are leaving it at that. Thank you very much.

Deputy Brendan Griffin: Do you condemn the killers, Deputy?

Chairman: The rest of the meeting is-----

Deputy Brendan Griffin: It is a disgrace, Chairman. It is an absolute disgrace that you, as a Chairman of an Oireachtas committee and as a Member of the Oireachtas, will not condemn people who killed a garda.

Chairman: I will not politicise the situation, as Deputy Griffin is trying to do. I have made a statement. Like I said, I unreservedly condemn the actions that they have done.

Deputy Brendan Griffin: There is a glaring omission from that statement. The Chair and people of Ireland know that.

Chairman: I have made that clear. My sympathies go out to the McCabe and O'Sullivan families.

Deputy Brendan Griffin: They are empty, meaningless words.

Chairman: You have asked me to make a statement and I have made a statement. The committee is adjourned until 11 a.m. on Thursday, 16 September, for a virtual private meeting to be followed by a public meeting at 12.30 p.m. As we discussed earlier, the executive will contact some of the other ombudsmen to check whether they can attend on that date. We agreed to hold a private virtual meeting at some stage during the summer. Once the secretariat gets back to us, we will inform the members. If not, I wish you all a happy summer and will see you after the recess.

The joint committee adjourned at 2.41 p.m. until 11 a.m. on Thursday, 16 September 2021.