

BY THE COMPTROLLER GENERAL

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Report To The Congress

OF THE UNITED STATES

Indochinese Refugees: Protection, Care, And Processing Can Be Improved

The continuous exodus of refugees from Communist Indochina in 1979 strained the willingness and the ability of Asian asylum countries to accept refugees and to assist in providing protection and temporary care. GAO reported in 1979 that because of political restraints and the humanitarian plight of these people, the Department of State should seek more active participation of international and voluntary agencies in refugee resettlement. In the past year, conditions at the transit centers and resettlement camps have improved somewhat.

GAO makes additional recommendations to alleviate the continuing problems associated with refugee protection, care, and resettlement.



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COMPTROLLER GENERAL OF THE UNITED STATES
WASHINGTON, D.C. 20548

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To the President of the Senate and the
Speaker of the House of Representatives

In April 1979, we reported on the nature and growth of the Indochinese refugee problem; how the problem was being addressed by the United Nations High Commissioner for Refugees, first-asylum countries, the United States, and other resettlement nations; and the U.S. program for selecting and resettling refugees.

This report updates that information and describes (1) changes that are needed in U.S. procedures for refugee processing, (2) improvements needed in the protection and care of refugees, (3) obstacles being encountered in implementing an orderly departure program, and (4) the establishment of refugee processing centers.

We are sending copies of this report to the Secretary of State; the Attorney General; and to cognizant congressional committees.


Comptroller General
of the United States

D I G E S T

Since the Communist governments were established in Indochina in 1975, more than 1.2 million refugees have fled their homelands to other Asian asylum countries due to political persecution, human rights abuses, warfare, and famine. The refugee exodus reached a peak of 58,000 a month in June 1979, but has since subsided to about 3,100 a month. In April 1979, GAO reported on the international efforts to resettle these refugees; this report describes the current situation.

CURRENT RESETTLEMENT CONDITIONS

Although conditions had improved slightly, approximately 284,000 refugees remained in camps at the end of 1979 despite extensive international efforts at resettlement. Over 254,000 refugees have been resettled since August 1977--mostly in the United States, France, Australia, and Canada. In addition, international and voluntary agencies are more involved in refugee care and resettlement. Following the unexpected surge in the number of people fleeing Indochina in early 1979, however, camps became overcrowded. As a result, refugees were not adequately cared for or protected. A doubled U.S. commitment to refugee resettlement--from 7,000 to 14,000 refugees a month--and the use of questionable processing procedures, combined to intensify existing problems. (See p. 9.)

The refugees' medical conditions and delays in treatment further impeded resettlement. Because of language barriers, incomplete and/or inaccurate documentation supporting refugee assertions, problems were encountered in applying the provisions of the Immigration and Naturalization Act to the increased number of refugees scheduled for resettlement in the United States.

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Monthly quotas of refugee movements were frequently shifted between asylum countries, further complicating resettlement. GAO questions the applicability of certain processing procedures and cites examples where abbreviated procedures could speed resettlement. Streamlining security verification procedures by the Department of State is especially needed. (See p. 27.)

THE ORDERLY DEPARTURE PROGRAM

To curtail the large number of refugees fleeing Vietnam by boat, Vietnam and the United Nations High Commissioner for Refugees (UNHCR) reached an agreement in May 1979 for a direct emigration or orderly departure program. The program was intended to allow persons "who want to work abroad or for the purpose of family reunification" to legally travel to resettlement countries.

Although the United States and other countries welcomed the program, difficulties have arisen that are hampering its implementation. By early 1980, only 226 persons had departed Vietnam for the United States under the program. (See p. 29.)

Success of the orderly departure program is essential if the inherent risks and hardships experienced by the 1979 boat people are to be avoided in the future. A number of obstacles must be overcome, particularly those imposed by the Socialist Republic of Vietnam. The Secretary of State should give special attention to resolving these problems and seeking ways to guarantee the success of the orderly departure program. (See p. 30.)

REFUGEE PROCESSING CENTERS

The 1979 GAO report pointed out the need for additional temporary care facilities. Two refugee processing centers are now under construction to accommodate 60,000 refugees. Moving refugees to these centers will relieve some of the burden on asylum countries. (See p. 36.)

Because most center inhabitants will be refugees guaranteed U.S. resettlement, these centers may lose their intended international character. In addition, those refugees guaranteed resettlement in the United States are not included in the current commitment to resettle 14,000 a month, and their subsequent resettlement could potentially increase future U.S. funding and commitments to resettlement of Indochinese refugees.

GAO recommends that the Secretary of State take a lead role in assessing the manner in which the centers are being established and the extent to which the United States and other countries are expected to use and financially support the centers. (See p. 39.)

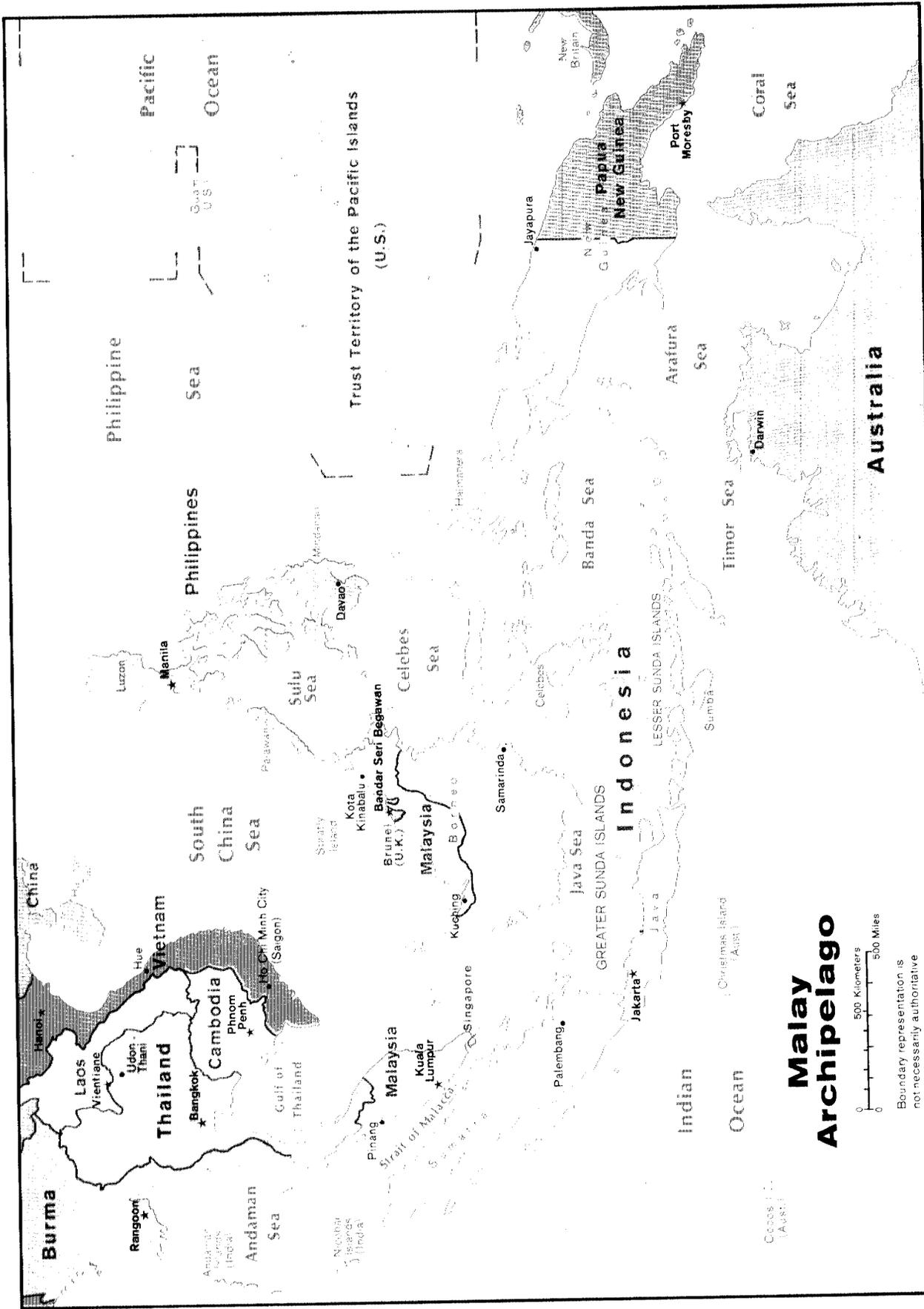
PROTECTION AND CARE

Although conditions have improved since the 1979 GAO review, in many cases camps and transit centers are not adequately protecting refugees from crime and abuse. In addition, not all the camps are providing adequate care, including: food, medical care, shelter, water and sanitation facilities, supplies, safety, education, recreation, and self-reliance projects. (See p. 40.)

The absence of these essential services creates discontent among refugees, severely hampers resettlement, and may make other solutions, such as voluntary repatriation or local integration, impossible. Accordingly, GAO recommends that the Secretary of State encourage the United Nations High Commissioner for Refugees to provide better protection and care for these people. Monitoring the expenditure of funds for refugee care also needs to be stepped up to make sure that funds are used as intended. (See p. 55.)

AGENCY COMMENTS

GAO requested the Secretary of State and the Attorney General to comment on a draft of this report on May 19, 1980. They did not provide comments within the 30-day time limitation allowed under the GAO Act of 1980 (Public Law 96-226) and did not request an extension of the time period. Accordingly, there are no agency comments in this report.





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ABBREVIATIONS

GAO	General Accounting Office
ICEM	Intergovernmental Committee for European Migration
INA	Immigration and Naturalization Act
INS	Immigration and Naturalization Service
JVA	Joint Voluntary Agency
OAR	Office of Asian Refugees
RPC	refugee processing center
SRV	Socialist Republic of Vietnam
U.N.	United Nations
UNHCR	United Nations High Commissioner for Refugees

OM VIETNAM AT WESTERN QUARANTINE ANCHORAGE, HONG KONG, JUNE 1, 1979. (SY OF THE HONG KONG GOVERNMENT.)



CHAPTER 1
DEVELOPMENTS ON THE
INDOCHINESE REFUGEE PROBLEM

The flow of refugees from Vietnam, Kampuchea (formerly Cambodia), and Laos into other Asian countries is continuing although in substantially lesser numbers than in early 1979. Although the flow has lessened, there are still thousands of refugees in countries of first asylum awaiting resettlement. In addition, the United States and the international community continue to share the burdens associated with refugee protection, care, and resettlement.

In our April 1979 report,^{1/} we described the nature and growth of the Indochinese refugee problem. Our report outlined how the problem was addressed by the United Nations High Commissioner for Refugees (UNHCR), by first-asylum countries, by the United States, and by other resettlement nations. The U.S. program of refugee selection and resettlement was also described in our 1979 report. This report is an update, describing some current problems in the resolution of refugee resettlement and asylum. The massive influx of Kampucheans into Thailand in October 1979 is not, however, discussed in this document.

REFUGEE EXODUS AND RESETTLEMENT

Since the Communist governments were established in Indochina in 1975, more than 1.2 million refugees have fled their homelands in Indochina due to political persecution, human rights abuses, warfare, and famine in their countries. After 1977, the number of refugees increased substantially because of increased restrictions on civil and personal liberties in all of the countries, accelerated arms conflict in Vietnam and Kampuchea, and economic and political measures in Vietnam aimed at forcing the departure of unwanted citizens. Because of these conditions, refugee populations in first-asylum countries increased from about 200,000 to about 385,000 from January to July 1979.

The exodus of large numbers of refugees from Indochina reached a peak of 58,000 a month in June 1979. By December 1979, however, the number of refugees from Indochina greatly declined

^{1/}"The Indochinese Exodus: A Humanitarian Dilemma," (ID-79-20, Apr. 24, 1979).



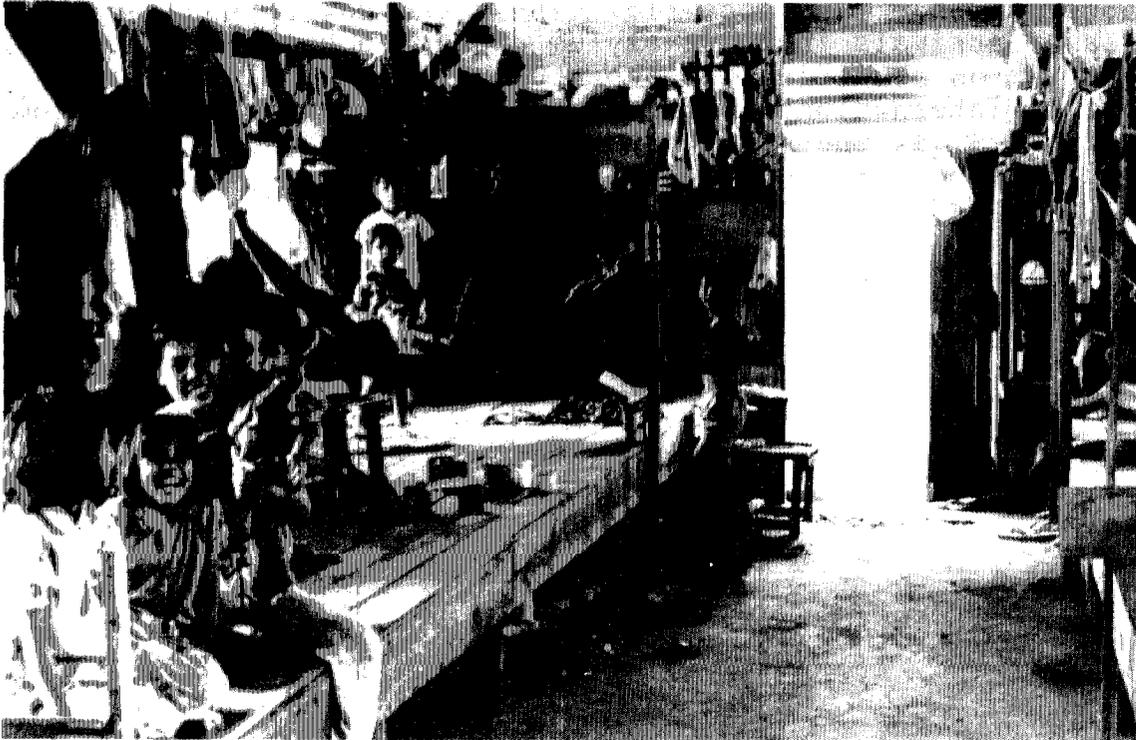
GOVERNMENT DOCKYARD, HONG KONG, JULY, 1979. (PHOTO COURTESY OF THE HONG KONG GOVERNMENT.)

to about 3,100. (See app. II.) The principal reason for the decreased arrivals in first-asylum countries was the Vietnam moratorium on assisting the departure of its people, as a result of international criticism and concern which culminated in July 1979, at the U.N.-convened international conference on Indochinese refugees in Geneva.

Despite the extensive international efforts of resettling over 254,000 refugees since August 1977, over 284,000 refugees remained in camps of first-asylum countries at the end of 1979. International organizations and third countries are still attempting resettlement for those remaining in the camps.



**SCENE INSIDE LIVING QUARTERS, CHERATING REFUGEE CAMP, MALAYSIA
NOVEMBER, 1979.**



INTERIOR SCENE OF LIVING QUARTERS AT GALANG REFUGEE CAMP, INDONESIA. NOVEMBER, 1979.

ATTITUDES OF COUNTRIES OF FIRST ASYLUM

The principal countries to which Indochinese refugees flee are Thailand, Malaysia, Indonesia, and Hong Kong. The attitudes of these countries about receiving and providing temporary asylum, or resettling refugees has varied widely. Although some countries viewed the large number of arrivals as a threat to their security and racial balances, others followed a policy of according temporary asylum largely on the strength of the humanitarian aspects of the problem.

During the major influx of refugees during early and mid-1979, refugees were often denied entry to some of these countries. In some cases, boats carrying refugees were pushed off and towed back out to sea. Although the total number of those refused entry is not known, a UNHCR official estimated that between January and October 1979, some 17,000 were denied entry in one country. In mid-1979, these countries relaxed their no-admittance policies, largely due to the decrease in the refugee population that resulted from increased resettlements and fewer arrivals.

Attitudes toward refugee resettlement within first-asylum countries also vary. Fundamentally, the countries of Southeast Asia do not accept these refugees for resettlement except

in limited numbers and under unusual circumstances--reunification of families or religious links. These attitudes are influenced largely by consideration of racial balances and population levels within these countries.

Indonesia does not accept refugees for resettlement but does afford temporary asylum for refugees pending their onward movement to resettlement countries. Hong Kong has resettled less than 300 refugees and has no plans to settle more. Unlike the other countries, the Hong Kong Government has substantially funded the cost of caring for its refugees--spending \$14 million for this purpose between January and October 1979. Of the Indochinese refugees reportedly resettled between August 1977 and December 1979, over half went to the United States, as indicated below.

<u>Country</u>	<u>Refugees</u>	<u>Percent</u>
United States	143,202	56
Australia	27,224	11
Canada	26,489	10
France	25,585	10
Others	<u>31,577</u>	<u>13</u>
Total	<u>254,077</u>	<u>100</u>

Refugees entered the United States primarily under two provisions of the Immigration and Naturalization Act (INA): conditional entry and parole. The conditional-entry provision authorizes the annual admission of a maximum of 17,400 refugees who flee from Communist countries or the Middle East because of persecution or who are victims of natural disasters. The parole provision authorizes the Attorney General, at his discretion, to temporarily parole aliens into the United States under prescribed conditions. The parole provision can be used in emergencies or for reasons in the public interest. Refugees entering the United States on parole are selected on the basis of a priority system. Because of its flexibility, it has been used on many occasions to admit groups of refugees who would otherwise be ineligible for admission because of limitations of the conditional-entry provision.

Two actions under the parole provision were authorized during 1979. On April 13, the Attorney General authorized the parole of 40,000 Indochinese refugees to be admitted through September 30, 1979. In July 1979, the United States announced that it would admit 14,000 Indochinese refugees a month--or 210,000 for the 15-month period from July 1, 1979,

to September 30, 1980. The Attorney General authorized the parole for the announced 14,000 monthly rate on October 18, 1979.

The Refugee Act of 1980 (1) raises the annual limitation on conditional-entry refugee admission to 50,000; (2) redefines and clarifies the application of the term, "refugee"; and (3) provides procedures for meeting emergency situations if resettlement needs cannot be met within the 50,000 ceiling.

ROLE OF THE UNHCR

Since July 1975, the UNHCR has been the international focal point for mobilizing resources and for efforts in resolving the Indochinese refugee problem. One of its most important responsibilities is the international protection of refugees. The UNHCR encourages governments to follow liberal practices in opening their frontiers to refugees and in granting them temporary asylum. Stressing that the problem is one of international concern, the UNHCR also encourages other nations to provide contributions and resettlement offers.

The UNHCR also provides financial assistance for the care of refugees through governments of asylum countries and voluntary agencies. This assistance includes support for food, water, shelter, medical care, supplies, education, and self-sufficiency projects. In addition, the UNHCR coordinates assistance from voluntary agencies which provide relief supplies and services. The UNHCR follows three basic approaches to solving the refugee problem: (1) voluntary repatriation, (2) local integration in first-asylum countries, and (3) resettlement in third countries.

Voluntary repatriation is the most desirable solution to the refugee problem, provided conditions in countries of origin make it possible. Repatriation to Kampuchea and Vietnam is not viable at present because of government hostility in those countries to the refugees. However, the UNHCR is exploring such a program with Laos. As noted earlier, first-asylum country governments are not generally receptive to local integration.

Since the Indochinese refugee problem began, permanent resettlement has been the most workable solution. The UNHCR has sought to bring the Indochinese refugee problem to the world's attention in the hope of finding new homes for the refugees. In the asylum countries, the UNHCR coordinates and assists the resettlement efforts of the United States and other nations. For permanent resettlement in most countries

other than the United States, the UNHCR provides funds to the Intergovernmental Committee for European Migration (ICEM) for the transportation of refugees from asylum countries.

The UNHCR will also administer the refugee processing centers (RPCs) planned for construction in the Philippines and Indonesia. These centers will hold refugees who may have to wait up to 3 years to resettle in the country which has accepted them. Moreover, the UNHCR coordinates a program which provides for the departure of persons directly from Vietnam--"the orderly departure program"--to resettle in other countries.

The UNHCR believes that increases in third-country resettlements are essential before resettlement in first-asylum countries can occur. Third-country resettlements pledged at a refugee conference in Geneva, Switzerland, in July 1979, resulted in some 260,000 resettlement opportunities in almost 30 countries. The conference did not generate commitments from countries that had not previously agreed to accept refugees, but countries which had made prior commitments increased their quotas.

COST OF REFUGEE ASSISTANCE

Refugee assistance is provided by the UNHCR, ICEM, various voluntary agencies, and the governments of asylum and resettlement countries, in the form of land for camp sites, protection, care (food, water, shelter, medical care, supplies, and education), resettlement, transportation, etc. The United States and other nations contribute to the UNHCR, ICEM, and voluntary agencies to provide relief and resettlement assistance.

During 1979, the UNHCR estimated that general program expenditures for assistance to Indochinese refugees were about \$109 million. (This amount includes the former special program for Indochinese refugees which was incorporated into the general program after February 1979.) Of the \$109.0 million, the United States has contributed about \$23.5 million--about 22 percent. In addition, the UNHCR estimated that it would spend an additional \$10.5 million on special programs related to the Indochinese refugees. This includes \$10.0 million for the planned construction and operation of the RPCs and \$.5 million for implementation of the departure program.

For 1980, the UNHCR general program expenditures for the Indochinese refugees are estimated to be about \$133 million. Its special programs are estimated to be \$62 million, of which \$60 million is for the planned construction and operation of the RPCs; \$2 million is for the departure program.

During 1979, ICEM spent about \$83 million to arrange transportation, medical examinations, and to provide other services for Indochinese refugees. Of that amount, ICEM received about \$68 million from the United States for refugees being resettled there. The United States also contributed an additional \$3.5 million for the ICEM administrative and operations budget. ICEM also received about \$7.8 million from the UNHCR. The United States paid about \$2.3 million of that amount which was based on its share of contributions to the UNHCR. For 1980, the ICEM estimated budget for the Indochinese refugee program is about \$113 million.

CHAPTER 2
CHANGES ARE NEEDED IN
PROCEDURES FOR REFUGEE PROCESSING

The United States did not see an immediate need to change its procedures for processing Indochinese refugees when its resettlement commitment was dramatically increased in 1979. The existing procedures were adopted when refugee movements were about half of this new commitment. Emphasis was placed on meeting the increased quotas but the procedures did not always permit efficient and speedy refugee processing. For instance, undue emphasis has been placed on a priority category system resulting in much time being spent in proving or otherwise verifying refugee assertions. Also, circumstances surrounding medical examinations, diagnosis, and treatment contributed to delays in refugee processing. Difficulties were experienced in applying the INA provisions to the increased number of refugees that had to be resettled in the United States.

The frequent shifting of monthly quotas between refugee offices in first-asylum countries took place in an attempt to meet the increased quotas and to maximize refugee movements out of high-priority countries of asylum but added to the frustrations of managing larger numbers of refugees.

INCREASED REFUGEE RESETTLEMENTS
CAUSED PROCESSING PROBLEMS

In July 1979, the United States doubled its commitment for resettling Indochinese refugees--from 7,000 to 14,000 a month--during the 15-month period from July 1, 1979, through September 30, 1980. Past experiences disclosed that between the spring of 1976, and June 30, 1979, only about 74,000 refugees--an average of 1,900 per month--had been moved to the United States. During the 3 months prior to the increase, a monthly average of only about 4,500 had been achieved.

Even in light of this earlier refugee movement experience, the State Department Office of Asian Refugees (OAR), attempted to meet the quotas by utilizing existing procedures and by rapidly building a refugee case load pipeline to sponsoring voluntary agencies. This ambitious attempt to achieve a goal of processing and moving 14,000 refugees a month--without simplifying its procedures--created a crisis situation.



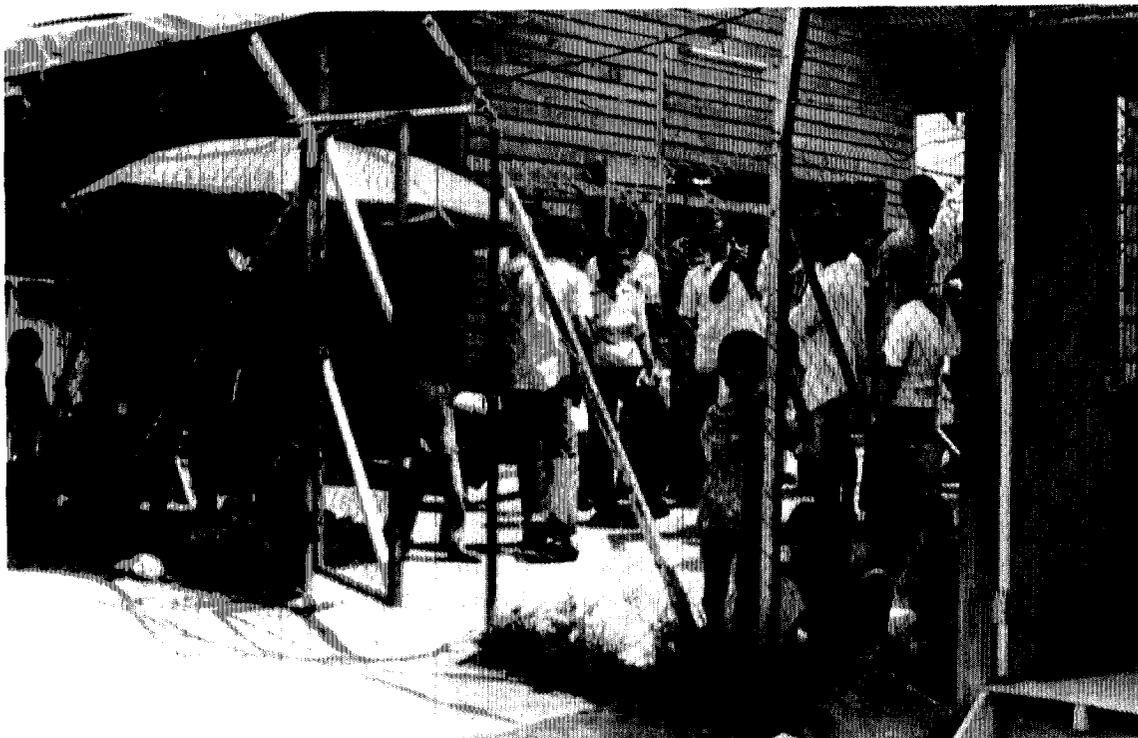
REFUGEES AWAITING PROCESSING AT UBON REFUGEE CAMP, THAILAND.
NOVEMBER, 1979.

Monthly refugee movement quotas were tentatively allocated to the various first-asylum countries by OAR. When these allocations were first made, however, some refugee offices were unable to meet their quotas at the increased levels. As a result, OAR shifted quotas between the country offices in an attempt to achieve the overall monthly goal.

The OAR requirement to rapidly increase direct departures to the United States precluded any meaningful managerial analysis and treatment of existing problems associated with the movement of the large number of refugees. Considerable time was spent trying to document and assign categories when, in reality, the categories did not always apply to the order in which refugees were selected and processed. Further, the capability to conduct medical examinations and arrange transportation to final destinations was, in the short term, affected. Agencies often duplicated each other's efforts and records. On occasion, refugees were shuffled back and forth between camps and transit centers. During the start-up, inadequate notice was given to ICEM to prepare for and schedule medical examinations.

In its quest to meet its quota, for example, the refugee office in Thailand allowed over 4,000 refugees to be brought to a 750-person capacity transit center for medical examinations and transportation arrangements. The facility was, therefore, greatly overcrowded and processing became virtually chaotic. An additional 1,000 refugees having Canadian destinations, further increased the already crowded conditions there. Although the refugees were only intended to spend a few days in the transit center, many were there for months.

Some refugees who did not pass their medical examinations were transferred to a camp about 150 miles away. That camp was not able to handle the sudden influx. Food, shelter, and medical care were inadequate. Refugees with identified medical problems were not always treated, and records of those treated were not maintained.



STOCKADE APPEARANCE OF CHERAS TRANSIT CENTER, MALAYSIA. NOVEMBER 1979.



TENT SHELTERS AT CHERAS TRANSIT CENTER, MALAYSIA. NOVEMBER, 1979.

Scheduling transportation was often hectic. Inadequate notice was sometimes given in transferring refugees from camps to transit centers. Refugees were booked on outgoing flights, and sponsors in the United States were advised of their arrival times before refugees were given medical examinations. If the refugees did not pass the medical examinations, the transportation bookings had to be canceled, and the U.S. sponsors were sometimes not notified. Refugees were also placed in a standby status for flights in the event that other refugees were unable to travel at the last minute. If those on standby departed, their sponsors sometimes received less than 8 hours notice before their arrival. Because of these last-minute changes, some refugees were reportedly not met at their destinations by their sponsors.

The refugee coordinator for Indonesia, for example, continually exhorted those involved in the refugee program to do more to reach their quotas. When only a portion of their quotas had been met, crises occasionally occurred. Numerous requests were made to obtain assurances of additional sponsors, and ICEM was under pressure to process medical examinations and to arrange transportation as quickly as possible. The first month this office met its quota was November 1979 when it reported that 3,014 refugees had departed. However, at the end of November, 846 refugees that had been reported as having departed, were still in transit camps in Singapore. We were advised that all of them did depart within a matter of 1 or 2 weeks.

Each office was advised of its movement allocation for an ensuing month. However, these numbers were frequently changed during the month. Indonesia, and Malaysia, for example, had their quotas changed three times. In one month, Thailand had its quota changed five times. OAR maintains that adjustments in country allocations were necessary not only due to the relative size of refugee populations in first-asylum countries, but also due to the political, economic, and social pressures caused in those countries by the sudden influx of large numbers of refugees. However, officials more directly involved in processing refugees told us that the numerous changes were very disruptive and adversely affected their ability to process refugees. They told us that staffing levels established to handle projected processing loads were at times found to be either insufficient or excessive. The voluntary agencies which locate refugee sponsors in the United States told us that the shifting of quotas between countries also disrupted their operations.

QUESTIONABLE APPLICABILITY OF PRIORITY CATEGORIES

Existing procedures were difficult to apply in the selection and processing of large numbers of refugees. They were intended to serve as a means of identifying and moving refugees on an equitable basis, from the thousands awaiting resettlement. The procedures require refugees to be designated in one of four principal categories which are supposed to resettle refugees by priority.

The four priority categories are as follows:

Category

- I Refugees with close relatives living in the United States.
- II Refugees who were former employees of the U.S. Government in Indochina.
- III Refugees who were closely associated with U.S. policies or programs because of previously held positions in the former Indochinese governments or armed forces, employment with American firms or organizations, or training received in or by the United States.
- IV Refugees not accepted by a third country--not within Category I, II, or III--and because of obviously compelling reasons, should be granted parole on humanitarian grounds.

Note: Some of these categories had sub-components which allowed refugees to be assigned to 1 of 13 categories within this priority system.

In actual practice--before the July 1979 resettlement increase occurred--the priority categories were not systematically adhered to in some instances. Priorities were applied more on a country-by-country basis and, as a result, boat refugees with lower priorities were processed faster than land refugees who had higher priorities and who had also spent more time in camps. As noted earlier some of this may have resulted from OAR decisions that were influenced by conditions in asylum countries.

After the 1979 increase in the U.S. resettlement commitment, the priority categories played a lesser role in determining the order in which refugees were processed. In addition, getting access to some remote refugees camps was difficult and necessitated selections that might not otherwise have been made.

Of the thousands of refugees departing Thailand, Hong Kong, Malaysia, and Indonesia, only an estimated 25 percent or less were in the two highest categories. In Hong Kong, where most of the refugees are from North Vietnam, over 70 percent of

those leaving for the United States were in the lowest category. An estimated 88 percent of the refugees from Thailand and 76 percent from Malaysia were in the two lowest categories. Most refugees moved from Indonesia were also in the lowest two categories, however, that refugee office did not maintain statistics showing the exact percentage.

During their discussions with refugees, the Joint Voluntary Agency (JVA) personnel (under contract with the Department of State) involved in processing stressed the importance of priority categories. Their basic approach was to place refugees as high in the priority system as possible. Because the refugees themselves believed that priority categories were important, they made every effort--even to the extent of being dishonest--to be placed in higher categories.

STEPS INVOLVED IN PROCESSING REFUGEES

Several steps are involved in processing refugees for resettlement and although they may differ between locations, the objectives are the same. The majority of the processing effort involved determining assigned categories for individual refugees and in documenting those assignments through the following steps.

1. JVA staff members screen the refugees through interviews at the camps. During the interviews, biographical information--including language capabilities, education, and work experience--as well as information about relatives in the United States and other third countries is also obtained. Based on the data gathered, tentative priority categories are assigned. The prescreening interview data is then returned to the refugee office for further processing.

2. Cables are sent by JVA staff members to various organizations in the United States to (1) verify any relationships claimed with persons residing in the United States for refugees in Category I, (2) obtain security clearances if the refugees are 14 to 16 years or older (the age varies between refugee offices), and (3) to verify claimed employment with the U.S. Government for refugees in Category II. U.S. refugee officers also review the accuracy of information provided to place refugees in Categories II and III. JVA staff members assemble gathered data in refugee files and the case files are then returned to the camps.

3. JVA staff members or U.S. refugee officers conduct pre-INS interviews to assure that the information contained in the refugee files is accurate and complete.

4. Refugee cases are presented to INS officers who are responsible for assuring that the refugees are admissible under the INA. The INS officers test the accuracy of the file information by interviewing the refugees. The INS officers then either approve or disapprove the cases and determine the assigned priority category number.

5. Refugees are interviewed again by JVA staff members. The purpose of these interviews is to obtain information required by the U.S. voluntary agencies who locate and assure sponsors for the refugees.

6. Refugees receive medical examinations after sponsors are assured.

7. Transportation is arranged, refugee belongings are packed, and necessary documents are assembled. Refugees depart on scheduled or chartered aircraft.



REFUGEE PROCESSING AT KUKU REFUGEE CAMP, ANAMBAS ISLAND, INDONESIA. DECEMBER, 1979.

Refugee categories
prolonged processing

Program personnel told us that concern over categories prolonged the processing of some refugees. They said higher categories required more work and processing time to develop than those in the lower categories. They described the case processing and development as perfunctory, time-consuming, and sometimes unnecessary, because lower category cases frequently left for the United States before the higher ones did. We were also told that Category I and II cases required affidavits, documents, and data verifications which caused delays, while the lower Category III and IV cases required minimal documentation and encountered few delays. While acknowledging that lower priority categories are less troublesome to process, OAR contends that documenting the cases, to the extent presently done, is to satisfy the requirements of the voluntary agencies and INS.

For example, in December 1979, there were some 1,200 refugee cases in Thailand that were deferred because of category-related problems. We were told that if the categories were eliminated, most of the deferred cases could be processed without delay. Caseworkers said their only alternative was to either wait for required documentation or to reclassify the cases to a lower category. We noted that this had been done in some instances to meet quotas.

All of the refugee offices attempted to process refugees with higher priorities first. The Malaysia and Hong Kong refugee offices attempted to move refugees in order of priority. In Malaysia, for example, files were prepared first for refugees in Categories I and II. In Hong Kong, refugees in the first three categories were processed before those in Category IV. The Hong Kong office also requested assurances of sponsors for the refugees in the first three categories before the cases were presented to the Immigration and Naturalization Service (INS). Sponsors for those in Category IV were requested after INS had approved the cases. In both countries, cases were presented to INS in the order of priority. However, because the number of refugees with high-priority categories in both of these countries was limited, many refugees in lower-priority categories were processed just as fast.

Refugee processing in Indonesia and Thailand contrasted markedly with the efforts in Malaysia and Hong Kong. Processing in Indonesia was done by individual camp, according to refugee arrival dates. Adhering to this practice was not always possible because some camps were in remote areas and access to the refugees was difficult. Categories were

assigned and documented and attempts were made to move those by camp in order of their priorities. Refugees in the lowest two categories were selected and moved first in Thailand because these cases involved less work and fewer problems.

Strict compliance with the priority categories often conflicted with the desire to meet monthly quotas. We observed cases where refugees who had high priorities, in effect, were penalized because they had to wait for data verification before they could be moved. At the same time, however, refugees with lower priorities were processed because their cases required little or no documentation. We also noted instances where the categories were changed from a higher to a lower priority to speed movement. When the choice of meeting quotas or following the priority system was encountered, action to meet the quotas usually prevailed.

Data verification was difficult

Some procedures used to prove or disprove refugee claims were often time-consuming and costly to accomplish, but were viewed as being essential to comply with the provisions of the INA and OAR refugee policies. Some of the procedures impeded processing and were, in our opinion, of questionable value.

Many refugees arrive in camps with incomplete or no identification and without necessary documents. Consequently, subjective decisions on the validity of refugee claims must be made. For example, some refugees appear older than they actually are and, either do not know or are unable to prove their true ages. Since verification is not possible in these cases, birthdates are assigned by the caseworkers. In addition, refugee claims of relationship to persons residing in the United States are troublesome to verify and can delay processing for months. Verifying refugee claims of past employment with the U.S. Government was similarly difficult. Although cables are sent to Government departments in the United States to verify claimed employment, agency records are frequently incomplete. Responses to these cables, if any, often take from 4 to 6 weeks. In the absence of supporting documents, claims have to be verified through individual interviews with the refugees.

As a practical matter, the value of these steps appeared questionable to us because refugee names, birthdates, and other assertions were not always verifiable. Some refugees were uncertain of the spelling of their names or applied for resettlement using aliases. Further, refugee data in verification cables was sometimes in error.

Security clearance problems

The practice of obtaining security clearances for all refugees is of questionable value and is an impediment to timely movement and resettlement. Refugee data in cables for these clearances was not always accurate. Secondly, there were very few "hits"--instances whereby either positive or negative information regarding refugees is contained in a data base. Only negative hits are relayed to the overseas posts. Finally, the fact that negative responses to security clearances are received does not necessarily mean that the refugees will be denied resettlement in the United States. For most requested clearances, resettlement has to be delayed by about 20 working days from the date cables are dispatched to allow time for response. For emergencies, this delay can be reduced to 11 days.

Clearance cables are sent to the State Department, INS, the Drug Enforcement Administration (DEA), the Central Intelligence Agency (CIA), and the Defense Intelligence Agency. The purpose of the clearances is to determine whether refugees are ineligible to enter the United States under excludable conditions contained in the INA. The clearances are done through both manual and computerized comparisons of refugee names to files maintained at each agency. Records are based on information obtained from Federal, State and local governments, foreign governments, and Interpol. Much of the information contained in the data banks at each agency is outdated because it covers the pre-1975 period. We were told that although the data bases contain information on Laos, Cambodia, and South Vietnam, none is available on North Vietnam. We noted that security clearances were being requested for North Vietnamese refugees in Hong Kong even though there were no records available upon which to base such clearances.

We discussed the security clearance process with officials of the State Department, DEA, and INS. INS officials told us that the security clearance process has resulted in few hits. These officials told us that INS is advised of all hits, but statistics are not kept on the numbers involved. DEA officials provided an estimate of the number of hits encountered from 1975 to 1979. Of the approximate 201,000 clearances that DEA processed during that period, there were only 359 hits--less than .2 percent of those processed. State Department officials told us that there had been very few, if any, hits on women and children--a large majority of the refugee population.

Opinions as to the value of the clearances varied among the officials we contacted. One official doubted whether the clearances were still useful because 5 years had passed since the fall of the South Vietnam Government. Another official told us there was doubt about whether records existed on all persons who were considered potential security risks to the United States. He also told us that the use of aliases by the refugees could affect the usefulness of the clearances. Other officials believed the security checks were useful, but suggested that the age be raised and the idea of eliminating clearances for females be considered. Finally, one official told us that running the security checks was worthwhile to insure U.S. security. This particular official added that all immigrants should undergo security checks regardless of the procedures and said that the low percentage of hits was not important.

Many officials involved in processing at the overseas posts also expressed doubts about the value of the clearance process because of the limited number of hits and the unreliability of the data base. In addition, they told us that the process to prepare the cables was very time-consuming and costly. For example, one large post estimated that during a 4 and 1/2-month period, about 11,400 clearance cables were sent. The cost of preparing and transmitting clearance cables at the overseas posts was not available. However, the State Department estimated that it would cost about \$2.2 million to carry out the procedure in the United States during fiscal year 1980.

The INS role in refugee processing

The purpose of INS involvement in refugee processing is to assure that refugees approved for entry into the United States are admissible under the provisions of the INA. However, the manner in which they carry out their role, in our opinion, does not provide such an assurance and is, therefore, of questionable value. We believe the following factors limited INS in assuring that the INA provisions were satisfied:

- INS officers had to interrogate refugees through interpreters, who were themselves refugees.
- INS officers relied on the documentation in refugee case files, which was often incomplete or inaccurate.
- Refugees were not always told the importance of telling the truth or assuring that information in their case files was correct.

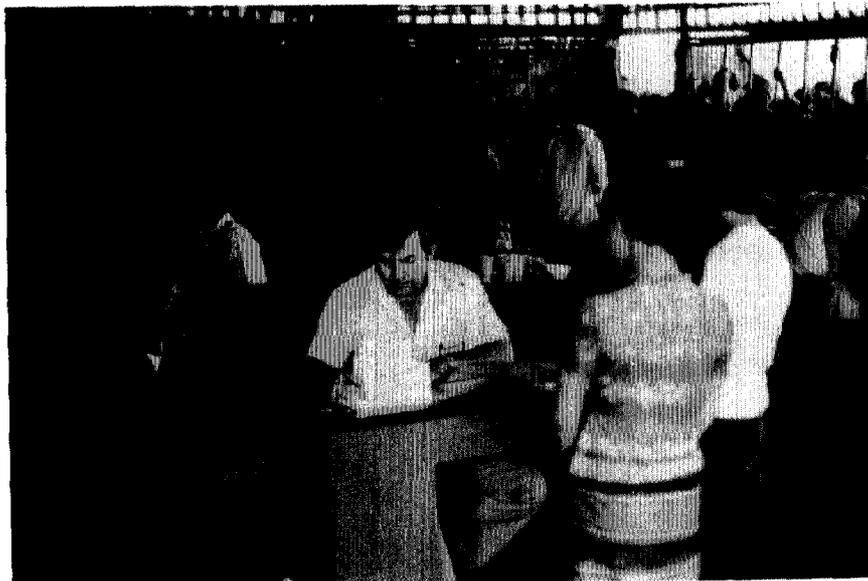
--INS officers were encouraged to approve refugees to help meet the monthly quotas.

--INS officers generally could not identify refugees who would be inadmissible for medical reasons because interviews were conducted prior to the medical examinations.

Refugees and all aliens must meet legal requirements for admission into the United States. Refugees inadmissible under INA include Communists, criminals, polygamists, the mentally retarded or insane, those with dangerous, contagious diseases, and those who have attempted admission to the United States by fraud or misrepresentation. INS officers rely heavily on refugee interviews and information presented in case files to determine admissibility to the United States.

Verifying the accuracy of translated questions and answers during interviews was difficult for INS officers. Refugees acted as interpreters and could be sympathetic to those being interviewed. Furthermore, some refugees generally knew the questions which would be asked and the types of responses which would help assure INS approval. We were also told that these interpreters were subject to threats or abuse if the INS officers disapproved the refugees being interviewed.

Documentation in refugee case files was often unreliable in determining refugee admissibility. Many of the INA concerns (on criminal or moral grounds) could not be determined in the



INS INTERVIEWING LOEI REFUGEES AT REFUGEE CAMP, THAILAND.
NOVEMBER, 1979.

interviews if nothing was found in the files to refute the refugee statements. In Indonesia and Thailand, case files were sometimes presented to INS officers that were either incomplete or contained inaccurate information. INS officers checked the files for responses to security clearance cables sent to U.S. agencies. If responses were not received within 20 days, the officers assumed that the refugees had no adverse records and the cases were presented to INS. During pre-INS interviews which we observed, refugees were not cautioned against actions which would jeopardize their acceptance to the United States--such as being dishonest with the INS officers and not correcting erroneous information in their files.

In Malaysia and Indonesia, all cases were presented to the INS officers even though rejection was expected in some cases because of derogatory information in the files. INS officers were aware of the emphasis being placed on meeting monthly resettlement quotas and were encouraged by U.S. refugee offices to help achieve them.

In Thailand, INS interviews with each refugee averaged about 6 minutes, compared to the 20 minutes JVA caseworkers spent on each case. JVA caseworkers essentially functioned as INS officers. The day before the INS officers arrived, JVA staff members (1) administered oaths to the refugees to tell the truth and (2) screened applicants to detect and eliminate Thais and other false refugee applicants. To



REFUGEES BEING SWORN IN BY A JOINT VOLUNTARY AGENCY STAFF MEMBER AT UBON REFUGEE CAMP, THAILAND. NOVEMBER, 1979.

speed up resettlement, INS officers reviewed the efforts of JVA caseworkers, conducted short interviews with the refugees, and usually approved the cases for U.S. admission.

Refugee officers and caseworkers reported that refugees have entered the United States illegally or through fraudulent methods. Caseworkers told us that in several cases, information regarding false applications had been discovered after the refugees departed for the United States. A refugee coordinator reported that friends in the United States who entered as refugees admitted to filing false applications and family relationship forms to gain entry. Voluntary agencies have also reported similar cases.

INS officers generally shared the view that, in attempting to meet quotas, the U.S. priority system had become meaningless. To help meet quotas, potential Category I or II refugees were approved in lower categories if the U.S. refugee officers and the INS officers believed that the refugees were honestly representing their histories, but verification had not yet been received. As an example, the INS officer with whom we spoke in Indonesia told us that he approved Category I or II refugees without lowering their categories if he thought they were telling the truth.

There were no assurances that INS officers were rejecting those refugees who were inadmissible for medical reasons under the INA. Because refugees were medically examined after INS approval, the INS officers could unknowingly approve refugees who were mentally retarded, insane, or who had dangerous, contagious diseases.

On the basis of our review and observations, there can be some question as to whether there was adequate assurance that refugees approved for U.S. entry were admissible under INS terms. It also brings into question whether INS, or anyone else, can assure that the provisions of the act are met because all exclusions contained in the act are not applicable to refugees. The likelihood of assuring that the INA provisions are met for Indochinese refugees is reduced, in our opinion, because (1) many refugees use aliases, (2) some refugees misrepresent their status, or (3) the system is unable to disapprove false claims. The estimated cost of the INS role in resettling Indochinese refugees is estimated to be about \$2 million for fiscal year 1980/

MEDICAL PROCESSING
UNNECESSARILY DELAYED RESETTLEMENT

As specified in Section 212 of the INA, a refugees are to be excluded from entry into the United States for mental

disorders and certain dangerous contagious diseases which have been defined by regulation as including venereal disease, active tuberculosis, and infectious leprosy. Refugees having one or more of these conditions were placed in a medical hold status. Those with treatable conditions could be removed from medical hold after successful completion of treatment. The act also provides that waivers can be obtained for some otherwise excludable conditions.

Medical examinations are given to determine refugee fitness for admission into the United States. Because identification of some excludable conditions was difficult, and proper treatment was not always provided, processing was, therefore, unnecessarily delayed.

It did not appear to us that the medical examinations were adequate to identify some excludable conditions. Medical processing was expedited partly because of the pressure to meet quotas. As a result, many refugees only received visual examinations to identify obvious medical problems and excludable conditions (named above). Blood tests were done to test for syphilis, however, tests for other forms of venereal disease were not routinely given. X-rays were given to test for tuberculosis.

ICEM is under contract with the United States to examine refugees for any excludable condition. Refugees were brought from camps to transit centers, ICEM offices, or hospitals for their examinations. They were then returned to camps and remained in transit centers. If it was determined that the refugees had excludable conditions which could be cured or for which waivers could be obtained, the refugees were placed on medical hold.

Refugees on medical hold were exposed to adverse conditions and sometimes contributed to the overcrowding of transit centers. Some refugees on medical hold in Thailand and Malaysia were housed in transit camps designed primarily to process refugees just prior to departure. Space in these facilities was extremely limited. Refugees with infectious diseases were crowded in with those without illnesses, including those that were medically approved and awaiting departure.

Some refugees on medical hold received inadequate attention. Their conditions were not promptly diagnosed and there was no assurance that they would receive proper treatment. As a result, some refugees were kept on medical hold. This problem was compounded because the families of these refugees stayed with them. In October, for example, 288 refugees were on medical hold in Thailand. These refugees and their families accounted for 1,449 persons in the transit centers; some

had been there over 4 months. Of the 288 on medical hold, 133 were awaiting results of tuberculosis tests. Over half of the 133 cases had been waiting for over 2 weeks and some had waited more than 3 months without being diagnosed. Refugee officials did not know the status of the medical hold cases. In addition, these officials and ICEM personnel acknowledged that they did not know what medical treatment, if any, the refugees on medical hold were receiving.

ICEM sometimes encountered problems in carrying out its function largely because of inadequate staffing and pressures to expedite medical processing of refugees. Further, because of the frequent shifting of refugee quotas between countries, it was difficult for ICEM to have the proper staff at any given location. In May and June 1979, for example, 1,160 refugees were in a transit center in Malaysia--20 to 26 percent of the center's population--who were not reported as being on medical hold or scheduled for departure. These refugees stayed in the transit center for longer than necessary, causing overcrowding and aggravating the already bad conditions there. In August, almost 800 refugees were unaccounted for either by medical hold memoranda or departure booking lists--an indication that ICEM did not have a good grasp on the status of the refugees.

Medical conditions impeded resettlement

Placing refugees who did not have threatening conditions on medical hold significantly impeded resettlement. In addition to contributing to the overcrowding of transit centers, this practice also impeded voluntary-agency efforts to provide sponsors and hindered ICEM in arranging for transportation.

As discussed earlier, the INA provides that persons with certain excludable conditions can be granted waivers which allow admission to the United States, despite their medical conditions. Waivers can be obtained for non-infectious tuberculosis, mental retardation, or previous insanity if there has been a 1-year recovery period.

The process of obtaining waivers, however, is complex and time-consuming. The voluntary agency coordinating group is notified of the problem which in turn notifies the refugee sponsors. The sponsors must (1) reconfirm their willingness for sponsorship, (2) prepare waiver documents, and (3) arrange to have medical care available when the refugees arrive. The Center for Disease Control in Atlanta receives completed waiver requests and, if acceptable, grants the waivers. Notification of waivers is sent to the responsible refugee offices.

During the process, some sponsors have withdrawn support or have been slow in preparing waiver requests. If sponsors withdraw, new ones willing to accept refugees with medical problems must be located. The waiver process may take from about 6 weeks to several months. For example, of 66 waiver requests for refugees in Indonesia, only 1 had been granted over a 3-month period. Of 300 waiver requests in Thailand, 224 were outstanding after almost 3 months.

Because refugees and their families were medically detained, the impact on resettlement was significant. Although collectively, only about 4 to 5 percent of the refugees have medical problems, the medically detained refugees and their families reduce the number of those available for resettlement by approximately 40 percent. Therefore, to resettle 1,000 refugees, 1,400 must be medically processed.

To help alleviate the impact of medical holds on resettlement, only family members with medical problems were held back until medical clearances, either through treatment or waivers, were obtained. Another family member usually stayed behind to keep them company which helped lessen the adverse effect that medical holds had on the refugees and on U.S. sponsors. However, some refugees were reluctant to be resettled before other members of their families, so this option could not always be used.

During a visit to refugee camps in Thailand in November 1979, the Surgeon General of the United States and the Director of the Center for Disease Control were apprised of delays in refugee processing due to the large number that were being detained because of the policy on excludable health conditions. In December 1979, the Surgeon General issued an assessment of the health consequences of suspending medical excludability for Indochinese refugees immigrating to the United States. He concluded that

"* * * the health interests of the refugees and the American public would be better served if the current policies on medical excludability for Indochinese refugees were suspended and replaced with more appropriate procedures * * *."

On the basis of this conclusion, the Secretary of State requested that the Attorney General exercise this parole authority to suspend the excludability of those Indochinese refugees having active non-infectious tuberculosis, mental retardation, previous attacks of insanity, and infectious leprosy. The Attorney General approved this request on March 15, 1980, subject to procedures to be provided by the Surgeon General.

Procedures for processing refugees covered by the suspension were dispatched to overseas posts in March and April 1980. We have not evaluated the effectiveness of these newly established procedures.

CONCLUSIONS AND RECOMMENDATIONS

The existing procedures for processing refugees should be simplified. These procedures contain several steps which disrupt resettlement; some, we believe, are of questionable value. Undue emphasis has been placed on a priority category system that is not always followed in ascertaining the order by which refugees are resettled. Much time is spent attempting to prove, or otherwise verify, refugee assertions or in obtaining security clearances from questionable data.

On the basis of problems that were encountered, we believe undue emphasis has been placed on meeting high monthly resettlement goals without recognizing the need to assess and streamline the procedures. The frequent shifting of refugee quotas between countries may have been necessary, and in some instances, added to the frustrations in managing the selection and movement of refugees.

Many refugee resettlements were unnecessarily delayed because the medical waiver system, which allows them to enter the United States, was ineffective and time-consuming. This resulted in the overcrowding of transit facilities, the exposure of medically detained refugees to those who were not, and problems in arranging transportation and in providing refugee sponsors.

In our opinion, an assessment of the existing procedures is essential. This assessment should resolve questions regarding the need for, and validity of, certain procedures which prolong and complicate refugee resettlement. Recognizing the limitations in verifying much of the data related to Indochinese refugees, we believe:

- The priority system should either be eliminated or reduced to two categories: (1) refugees having close relatives in the United States and former U.S. employees and (2) all other refugees.
- A waiver of U.S. verification of relationships and employment should be allowed in special cases.
- The requirement for security clearances should be eliminated or, alternatively, clearances for females should be discontinued and the ages for males being cleared should be raised.

--The INS role in the process should be eliminated in view of its inability to meet the intent of the INA, and should allow U.S. refugee officers to perform this approval process.

We further believe that monthly quotas assigned to offices in countries of asylum should be stabilized within the constraints of asylum countries so that resettlement can be more effectively managed.

Accordingly, we recommend that the Secretary of State, in consultation with the Attorney General and INS, where appropriate,

--assess the existing procedures and eliminate the extraneous procedures with a view to expediting resettlement.

We further recommend that the Secretary of State direct OAR to minimize the practice of frequent shifting of monthly quotas between countries of asylum.

CHAPTER 3

OBSTACLES IN IMPLEMENTING AN ORDERLY

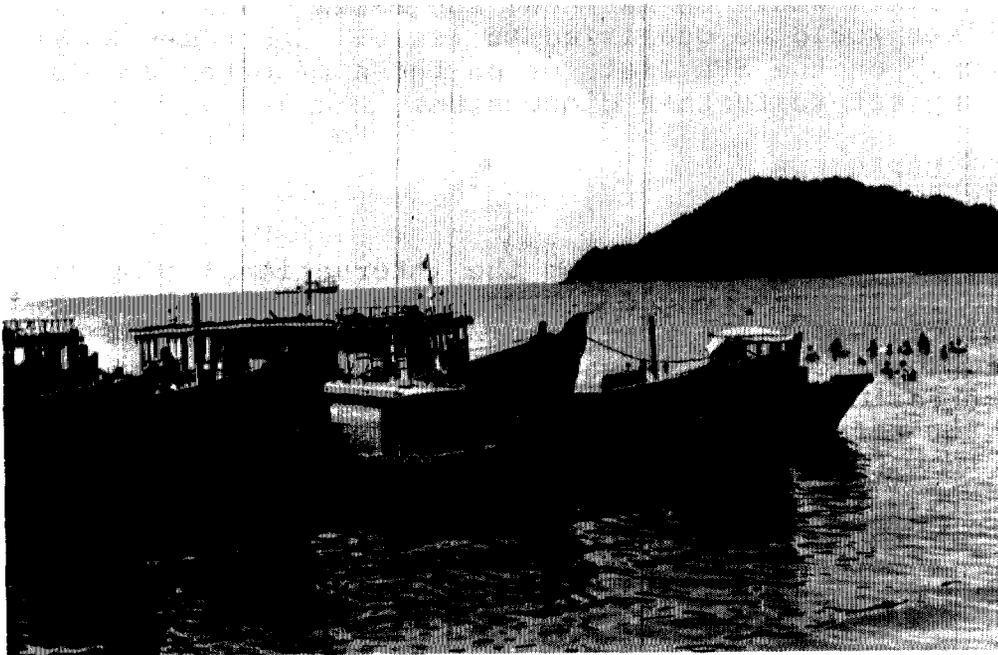
DEPARTURE PROGRAM FROM VIETNAM

In an attempt to curtail the large number of refugees fleeing Vietnam by boat, the UNHCR and Vietnam reached an agreement in May 1979 for a direct emigration ("orderly departure") program. The program was intended to allow the legal emigration from Vietnam to resettlement countries for persons "who want to work abroad or for the purpose of family reunification."

Although the United States and other countries welcomed the program, difficulties have arisen that are hampering its implementation. By early 1980, only 226 persons had departed Vietnam for the United States under this program.

ORIGIN AND NEED FOR THE DEPARTURE PROGRAM

During 1978 and 1979, thousands of persons fled Vietnam by boat, and many died before being allowed to land in a country of temporary asylum. Although many refugees fled secretly to avoid deplorable conditions, many were assisted in their



REFUGEE BOATS USED TO FLEE VIETNAM. AIR RAYA REFUGEE CAMP, ANAMBAS ISLAND, INDONESIA. NOVEMBER, 1979. (U.S. REFUGEE BARGE IN BACKGROUND.)

departures by the Socialist Republic of Vietnam (SRV) which wanted to rid itself of an unwanted ethnic group. At least one-third of those who reached safety were ethnic Chinese.

As part of its effort to provide a solution to the large exodus of Indochinese refugees, the UNHCR consulted with interested governments in December 1978. On January 12, 1979, SRV announced that Vietnamese who wanted to emigrate could do so. The Deputy UNHCR went to Vietnam on February 26, 1979, to develop departure procedures. On March 6, 1979, a plan was announced for the departure of family members and "special humanitarian cases." The UNHCR believed that implementation of this plan would (1) allow families to be reunited, (2) save the lives of some people who might otherwise be expelled or might flee Vietnam by boat, (3) relieve some of the problems and pressures on first-asylum countries by reducing the flow of refugees, and (4) help relieve the problems associated with providing protection and temporary care of the Indochinese refugees in countries of temporary asylum.

The UNHCR and SRV agreed to a seven-point memorandum of understanding in May 1979. This memorandum provided that those persons with relatives in other countries and "other humanitarian cases" would be allowed to leave. According to the memorandum, Vietnam would provide the UNHCR lists of persons who wanted to emigrate. The resettlement countries would give SRV the lists of those they would admit. It was proposed that these lists would be matched; the names which appeared on both lists would be qualified to leave. The names which appeared only on the SVR lists or on those of other countries would be subject to further discussion.

SUCCESS OF DEPARTURE
PROGRAM IS ESSENTIAL

Responding to pressure from the international community, in July 1979, the SRV placed a moratorium on illegal departures. Since that time, the influx of boat refugees has decreased significantly. The amount of this decrease which can be attributed to the moratorium or to other reasons, such as to hopes for safe passage under an orderly departure program or to inclement weather, is unknown. This decrease significantly reduced the pressures on asylum and resettlement countries. We believe that the SRV willingness to continue the moratorium and the willingness of some potential refugees to delay departures and to await safe emigration will depend upon the success of the departure program.

U.S. and UNHCR officials anticipate that under current U.S. immigration law and authorizations for the admission of Indochinese refugees, the orderly departure program from Vietnam to the United States could initially provide for the movement of 2,000 persons per month which is expected to be a significant proportion of the total departures to all resettlement countries. Accordingly, we believe the success of the total program will depend largely on the ability of the successful establishment of a program for increased departures to the United States.

THE U.S. ROLE
IN THE PROGRAM

After the SRV was established in 1975, the Embassy's Consular Section in Bangkok, Thailand, began receiving petitions for potential immigrants from Vietnam. Under immigration procedures, citizens and permanent resident aliens can file petitions on behalf of certain relatives eligible for immigrant visas. Petitions can be filed with any INS office or consular section abroad. After INS approval, petitions and supporting documents are normally forwarded to the consular office in the country where the potential immigrant resides. Immigrants then have to: submit required documents, particularly for family members of the person who is the beneficiary of a petition; pass medical examinations; and be personally interviewed by a U.S. consular officer. If approved, visas are granted, subject to numerical limitations. Because the United States does not have diplomatic relations with Vietnam, petitions have been forwarded to the Embassy in Bangkok.

Many of the petitions received in Bangkok lack documents required by law, such as affidavits of support, and evidence of the relationships of the family members to the petition beneficiaries. To obtain missing documents, the Embassy frequently has to communicate with U.S. petitioners and request that they, in turn, write to their relatives in Vietnam. The relatives in Vietnam are then supposed to obtain the documents and send them to the U.S. petitioners who then forward them to the Embassy. Thus far, interviews and medical examinations have been conducted in Bangkok for Vietnamese emigrants who reach that city and want to resettle in the United States. From August 1978 through May 1979, less than 50 people immigrated to the United States under these procedures.

Following the UNHCR/SRV seven-point agreement in May 1979, the United States declared its willingness to cooperate with those parties in implementing an orderly departure program. The United States initially envisioned that its program would

emphasize family reunification of immigrants entering the United States under regular immigration procedures. Even though the United States does not have consular offices in Vietnam, the United States envisioned that (1) consular officers and other necessary staff would be allowed entry and (2) that medical examinations would be given in Vietnam. The SRV has not cooperated, however, and the less desirable procedures of processing in Bangkok have continued for the few cases the SRV has allowed to leave. This has been possible because those cases have been documented substantially enough for the Embassy in Bangkok to be confident that they will be finally approved for admission to the United States and, therefore, will be able to guarantee to the Thai Government that they will leave Thailand for the United States within the 15-day time limit set by the Thais.

As a result of the obstacles encountered, the United States has achieved only limited success in the number of people it has been able to process under this program. Between June 1979 and February 26, 1980, only 226 individuals had departed Vietnam for the United States. Of the total, 220 traveled under immigration visas and 6 were parolees who entered under the same authority as refugees discussed previously in this report.

OBSTACLES IN IMPLEMENTING THE PROGRAM

Although the United States wants to increase the number of departures, its efforts to do so have been hampered by several obstacles: there have been relatively few matches of the names on the U.S. and SRV lists; the SRV has been unwilling to allow voluntary agency representatives or U.S. Government officials to go into Vietnam to interview applicants for admission, even under UNHCR auspices; and decisions on policy matters and staffing needs have been difficult to obtain. Solutions to the first two of these problems depend upon the cooperation of Vietnamese officials.

Few matches of names on the U.S. and SRV lists

The main obstacle to be overcome is that of limited matches between the names on the U.S. and SRV lists. Through December 1979, two U.S. lists containing about 9,000 names of persons for which INS petitions had been approved were compared with SRV lists which contained the names of about 31,000 persons who had requested and been approved by the SRV to emigrate. The comparison resulted in 74 matches.

U.S. officials noted that the SRV lists contained large numbers of Chinese names with addresses in the Chinese section of Ho Chi Minh City. They said that the lists did not indicate whether these persons had any ties with the United States and, thus, the United States could not make an initial determination of whether they appeared eligible for admission. A UNHCR official speculated that the SRV might require that a substantial number of these persons be taken before family reunification cases would be considered. A U.S. official believed that the SRV may have interpreted the program to mean that all persons it wanted to leave would be admitted by the United States or other countries.

Following the Geneva meeting, the moratorium on illegal departures, and accompanying reiteration of the orderly departure program, the SRV began to take the position, with increasing sharpness, that the resettlement countries should accept not only the Vietnamese they wanted, but also some of those the SRV wanted to leave. The SRV frequently refuses departure approval to people the resettlement countries want, unless those countries accept others whom the SRV wants to leave. This appears to be a major element in the continuing impasse on the orderly departure program.

The United States wanted to admit from Vietnam not only persons eligible for immigrant visas, but others who are not eligible, having close ties to the United States such as relatives, former U.S. Government employees, or other American institutions, and those associated with U.S. Government policies or programs. The State Department, therefore, recommended and the Attorney General authorized--after consultations with the Congress--the admission of up to 1,000 such persons a month as part of the Indochinese refugee parole program. By allowing the United States to admit more persons than would have been eligible under only an immigrant visa program, the United States was able to accept additional persons from the SRV lists for interviews.

In fact, after the United States asked the SRV, through the UNHCR, to provide additional information about the ties to the United States of persons on its lists, the SRV, in early 1980, provided two lists of about 1,100 and 1,000 giving information on the names and addresses of relatives in the United States. The United States was able to accept over 700 from the first of these two lists for interviews.

UNHCR officials are negotiating with the SRV on behalf of the United States for permission to use voluntary agency personnel to obtain documents and any other required informa-

tion in interviews with the potential immigrants and parolees in Ho Chi Minh City. The SRV had allowed only one voluntary agency representative to go to Hanoi but not to Ho Chi Minh City.

Problems in obtaining medical examinations and conducting consular interviews

Thailand limits Vietnamese in transit in Thailand to only 15 days. Some persons, however, have failed to pass their medical examinations, causing delays in transit. Although this may only be a temporary condition which can be solved by treatment or waiver, the inability to meet Thailand's 15-day limitation has caused problems. Thai officials threatened to arrest one individual who had been there almost 2 months because of medical reasons.

Arrangements have been made to perform the medical examinations in Vietnam. In October 1979, the U.S. regional medical officer from Bangkok visited Ho Chi Minh City to determine the adequacy of existing medical facilities. He also described U.S. standards for testing, screening, and treating persons for tuberculosis and venereal disease. The medical officer found the facilities at the Cho Ray Hospital to be adequate but some supplies, such as X-ray film, were needed. Supplies necessary for 1,000 medical examinations were provided by the United States. The Cho Ray Hospital facilities have been used to examine Vietnamese going to Canada, and no problems have been reported. Nonetheless, the SRV has not permitted medical examinations of Vietnamese going to the United States to commence.

UNHCR and SRV officials were also discussing procedures which would allow consular officers to interview individuals at the Tan Son Nhut Airport in Ho Chi Minh City. Under the arrangements being discussed, the U.S. consulate officers would work under the auspices of the UNHCR during their visits to Vietnam and would only be allowed to stay a few hours during each visit.

Other problems related to the departure program

Problems have been encountered in handling the volume of petitions received at the consular office in Bangkok. Since early 1979, approximately 300 petitions have been received each week. At the end of May there were about 3,500 petitions on file in Bangkok. By the end of December, the number had increased to about 13,500.

From about May through August 1979, the U.S. orderly departure program was operated by a foreign service officer, an American dependent employee, and five clerks on loan from ICEM. As the number of petitions increased, a backlog of cases needing review developed. The staff was later increased to four foreign service officers, eight local nationals, and several voluntary agency representatives, but the backlog continued. In November 1979, six third-country national U.S. Government employees from other posts were brought to Thailand for a 30-day period to help review cases. At the end of December, about 9,200 of the 13,500 had been reviewed.

U.S. officials in Bangkok told us that decisions on policy and staffing matters related to the departure program must be cleared by several different offices within the State Department for action. They believe it would be helpful if a central point for handling all matters related to the departure program could be established.

CONCLUSIONS AND RECOMMENDATION

The agreement for the direct emigration of persons from Vietnam is, we believe, a landmark achievement and one that could contribute greatly to a lasting solution to the Vietnamese refugee problem. Although there may be valid reasons for skepticism about its continuation and degree of success, the experiences in dealing with the 1978-79 era of massive departures--their inherent risks and hardships--dictate that every effort be expended to encourage its continuation and to make it workable. Actions by U.S. officials have clearly been in that direction; however, many obstacles still need to be resolved, particularly those imposed by the SRV. We are concerned about the difficulty being experienced by overseas offices in obtaining policy and staffing decisions from Washington.

We believe these obstacles deserve special attention. Therefore, we recommend that the Secretary of State

- give special attention to resolve these problems, and equally important, to seek potential ways and means for implementing and assuring the success of this program.

CHAPTER 4

REFUGEE PROCESSING CENTERS

The RPCs that are planned for construction in the Philippines and Indonesia will accommodate up to 60,000 refugees. These centers are being established to lessen the refugee populations in, and pressures on, first-asylum countries. Initially, and into the foreseeable future, most of the refugees transferred to the centers will be those guaranteed resettlement in the United States. As a result, questions are surfacing about potential for

- increased U.S. financial support of the RPCs,
- future U.S. commitments to resettle an increased number of refugees, and
- attitudes within the international community toward the use and support of the RPC concept.

THE RPC CONCEPT

The U.S. State Department was a principal supporter of the RPC concept at a UNHCR-convened meeting held in Indonesia in May 1979 and attended by representatives from 30 nations. RPCs were proposed as a means of relieving some of the pressures on first-asylum countries by moving large numbers of refugees from overcrowded camps to holding centers on islands or other remote locations.

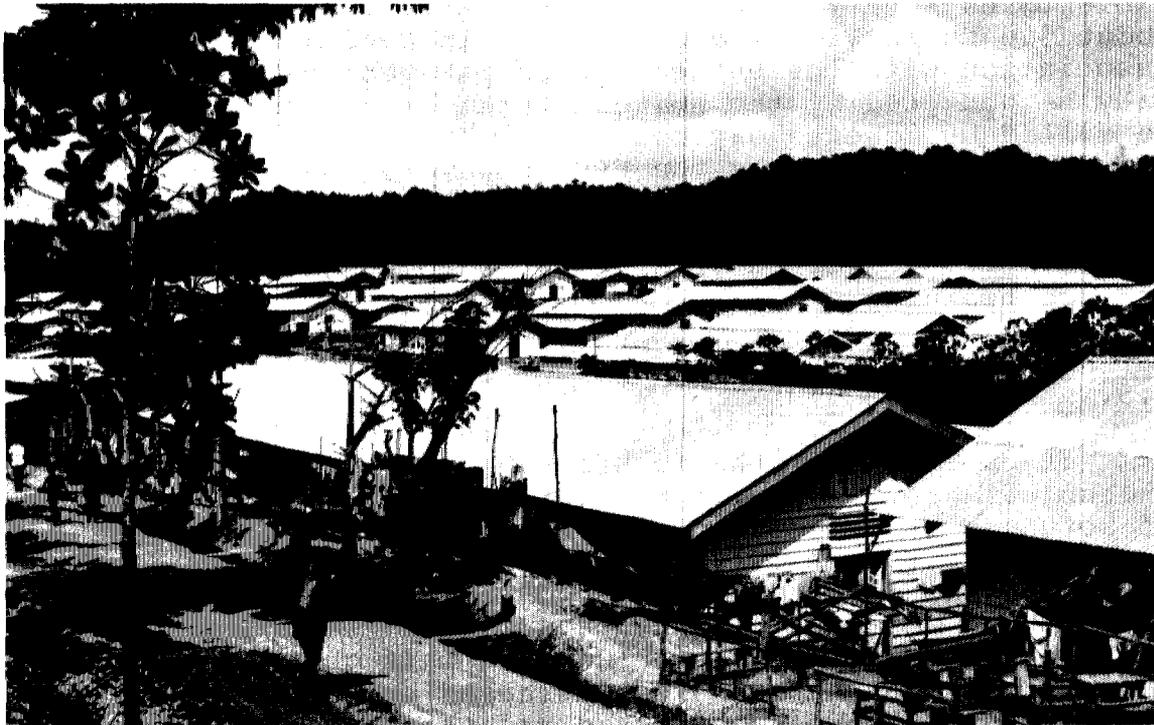
State and other supporters believed the RPCs would encourage other countries to commit themselves to long-range resettlement programs, by having a place to hold refugees they selected, but which could not immediately be resettled. Such an arrangement would allow the more rapid transfer of refugees from regular camps, and even though they might have to wait awhile, their eventual resettlement would be guaranteed. The arrangement was also designed to provide space in existing camps of first-asylum countries if another large influx of refugees occurred. During the May meeting, Australia, Canada, Japan, and New Zealand strongly supported the RPC concept as did the Association of Southeast Asian nations.

The Indonesian and Philippine Governments volunteered to provide sites for RPCs. However, they required that refugees had to be guaranteed resettlement in a third country before they would be accepted. At the conclusion of our review in November 1979, neither center was yet under construction. In

our prior report,^{1/} we recommended that the Secretary of State, through the U.S. Mission in Geneva, press to establish additional temporary care holding camps on islands in the South China Sea or at other locations in the Far East to (1) make the refugee population less visible to local populations and (2) relieve the pressures on the first-asylum countries.

PLANNED USE OF RPCs

Even though there was widespread initial support for the RPC concept by other third countries, the United States is the only country that currently plans to use them. One UNHCR official commented the RPCs will not be "processing" facilities, but holding camps for low-category refugees awaiting immigration to the United States. This view on the use of the RPCs was also expressed by an official of the U.S. Mission in Geneva.



GALANG REFUGEE CAMP, INDONESIA. (CAMP LOCATED NEAR SITE OF REFUGEE PROCESSING CENTER.) NOVEMBER, 1979.

^{1/}"The Indochinese Exodus: A Humanitarian Dilemma," (ID-79-20, Apr. 24, 1979).

A State Department official told us that the Philippines center would become international even if the non-U.S. program constituted only a small percentage of the population. He said about 95 percent of the refugees transferred to the Philippines RPC would have guaranteed resettlement in the United States. The balance would be refugees selected by countries such as Denmark, Sweden, and the United Kingdom, where processing takes a long time. The Philippines UNHCR representative told us, however, that the first 10,000 refugees transferred to that RPC would have guaranteed resettlement in the United States. He said that, as yet, no other countries have expressed an interest in using the RPC because most countries prefer using transit centers within their own countries.

The U.S.-guaranteed refugees which will be transferred to the RPCs will be comprised generally of recent arrivals with low categories who would have little chance of immediate movement to the United States. Included in those eligible to be sent to the Philippines RPC, for example, are about 500 North Vietnamese, located in Hong Kong, whose association with the United States is such that they would only be accepted by the United States if quotas could not be filled by lowcategory refugees from South Vietnam. If they are transferred to the RPC, however, they will be guaranteed resettlement in the United States. It is planned that refugees transferred to the RPCs will be provided pre-resettlement orientation, language instruction, and job training.

POTENTIAL GROWTH IN THE U.S. REFUGEE COMMITMENT

It appears that the future U.S. commitment to resettle Indochinese refugees will be influenced by whatever number of refugees it selects and has transferred to RPCs. As noted earlier, from July 1, 1979, through September 30, 1980, the United States has a commitment to accept 210,000 Indochinese refugees (14,000 per month). Refugees selected and sent to RPCs are not included in this quota. Accordingly, the U.S. commitment could be increased by 60,000 or more if the two RPCs are constructed and occupied at full capacity, and used exclusively by the United States.

The cost of transporting refugees to the RPCs will be borne by the countries guaranteeing resettlement, as this move is regarded as the first part of that process. Under the existing arrangements, the United States is committed to pay about 30 percent of the total RPC construction costs and for

refugee care for the first year of operation. The commitment for construction costs is about \$13 million out of an estimated \$41 million. The U.S. portion of refugee care is estimated at about \$7.4 million out of \$28.0 million. The United States has advanced \$9 million to construct the initial phase of the Philippines RPC.

The Japanese Government is expected to pay 50 percent of the Indonesia RPC costs and the UNHCR, another 20 percent. Japan's contribution, however, had not been confirmed at the time of our visit, and the UNHCR had not been successful in obtaining its share of the funding.

CONCLUSIONS AND RECOMMENDATIONS

The manner in which the RPC concept is being implemented may result in the United States assuming an ever-increasing responsibility for solving what is generally viewed to be an international problem. We believe there is sufficient cause to reassess the manner in which RPCs are established and funded, and to reassess the responsibility of the international community in sharing the refugee problem. To this end, the initially envisioned concept of establishing international centers should be nurtured. To do otherwise might shift an unreasonable burden on the United States and discourage essential financial contributions and increased refugee resettlements from other countries.

We, therefore, recommend that the Secretary of State take a lead role in assessing

--whether the RPCs are indeed being established as international refugee facilities and

--the extent to which the United States and other countries are expected to use and financially support these international centers.

This assessment should also deal with the questions of (1) whether, and to what extent, the United States may become burdened with increased costs associated with the RPCs and (2) the impact that U.S.-guaranteed refugees in RPCs will have on present and future U.S. resettlement commitments.

CHAPTER 5

PROTECTION AND CARE

Primary responsibility for the protection and care of refugees is borne by the UNHCR. The difficulty in fulfilling this responsibility was identified in our April 1979 report. Although improvements have been observed, we have noted many instances and specific conditions where essential services were either lacking or inadequate. UNHCR efforts have been hampered by insufficient personnel, the inability to take appropriate actions in some instances, and the indifferent reaction of some asylum countries toward refugees. Consequently, the UNHCR has not adequately (1) protected refugees from some crimes and abuses, (2) assured refugees proper care, and (3) monitored expenditures for refugee food and supplies.

REFUGEES AND THEIR RIGHTS

Two U.N. agreements define the term "refugees" and stipulate international standards for their treatment: the 1951 Convention and the 1967 Protocol. In addition to being guided by these agreements, the UNHCR operates under a specific U.N. statute that is similar to the Convention provisions. These documents state that refugees are persons who have left or are outside their countries of nationality or residence and that their return to those countries is impossible because of persecution or fear of persecution.

Provisions for standards of treatment provide that asylum countries

- shall not impose penalties because of the illegal entry or presence of refugees coming directly from territories where their lives or freedom were threatened (and enter or are present in these territories with authorization) provided they immediately present themselves to authorities good cause for their illegal entry or presence;
- will not expel or return refugees to frontiers or territories where their lives or freedom would be threatened;
- will not expel or return refugees from their territories (except in accordance with due process of law) and will allow refugees a reasonable period to seek legal admission into another country;

--shall, as far as possible, facilitate the assimilation and naturalization of refugees; and

--shall accord to those refugees lawfully staying in their territories the most favorable treatment accorded to nationals of a foreign country in the same circumstances regarding the right to engage in wage-earning employment.

Disputes arising from interpretation or application of these provisions, which cannot otherwise be settled, are to be referred to the International Court of Justice.

Asylum countries have wide latitude in determining whether potential refugees meet the defined criteria. Nations have often been reluctant to accept a general definition for refugees because some fear that a future commitment of unknown dimensions might be implied. In addition, many nations have not signed the international agreements and, therefore, the UNHCR has no legal basis for refugee protection in those countries.

The countries of Thailand, Malaysia, Hong Kong, and Indonesia generally provide temporary asylum, although they have not adopted the Convention or Protocol. People seeking asylum in these countries are considered illegal immigrants, illegal aliens, or displaced persons and are, therefore, afforded only whatever rights the asylum countries are willing to grant. UNHCR officials believe, however, that they have the right, under the terms of the statute, to provide protection to refugees regardless of whether or not asylum countries are party to the Convention or Protocol.

THE UNHCR SHOULD IMPROVE REFUGEE PROTECTION

The UNHCR recognizes that international protection of refugees is its most important responsibility, however, in instances of Indochinese refugees seeking asylum, this responsibility has not always been met. Many Indochinese refugees encountered and suffered unconscionable crimes and abuses enroute to first-asylum countries, within these countries, and after being denied asylum. Responsibility for this can be attributed to a variety of sources, including some criminal elements in the countries in which asylum was being sought. However, the UNHCR assumed the task of refugee protection in Malaysia, Thailand, Hong Kong, and Indonesia as if these countries were partners in the international accords. In our opinion, the UNHCR did not provide adequate staff to protect the refugees, especially in Thailand and Malaysia.

ATTITUDES OF FIRST-ASYLUM COUNTRIES

Although there have been instances of unpopular actions toward refugees by some first-asylum countries, we believe these countries should generally be commended for providing temporary havens within their boundaries. Thousands of refugees were granted asylum, and more are still being accepted. Had these countries not granted such asylum, the human suffering would have been worse.

Of the countries we visited, refugees in Hong Kong and Indonesia were receiving the best protection and most humane treatment. Persons accepted as refugees in Hong Kong receive essentially the same benefits as local residents. Even though refugees in Indonesia have no legal rights or status, they are permitted to land and remain in camps until resettled. The attitudes of these countries have been of considerable benefit to the refugees, particularly in Indonesia where the UNHCR was slow in responding to the rapidly expanding refugee population. Very little, if any, harrassment of the refugees by government officials or the local populations in Hong Kong or Indonesia was reported.

In Thailand and Malaysia, we observed a greater incidence in the reported abuse of refugees. Some abuse was characterized as resulting from actions by government officials or by their inattention in preventing it. There was some speculation that Thailand's attitude may have been influenced, in part, by the lack of recognition by the international community that, at the time, there were more than twice as many land refugees in Thailand as boat refugees in all other asylum countries. In addition, international focus was centered around the plight of the boat refugees.

Refugees arriving by boat have been attacked while at sea and have been subjected to great abuse. Rape, robbery, and killing have been frequent. Cases were also reported that some boat refugees were being raped and robbed after reaching land. Some boats were towed back out to sea. Further, when refugees land in remote areas, they may be placed in jails when detected or allowed to languish for indefinite periods of time on the beaches.

Thailand

Most of the refugees in Thailand come from Laos and Kampuchea, but some also come by boat from Vietnam. Thailand considers them displaced persons or illegal immigrants, and as

such, they have no legal rights. Many refugees have been intercepted at the borders and forced to return.

At different times during 1979, there were only four or five UNHCR field representatives in Thailand. They were responsible for carrying out the UNHCR role of refugee protection and temporary care in 16 Thai camps. UNHCR and U.S. officials believe refugees will be granted asylum more rapidly if authorities other than those of the host countries are present when refugees arrive and such arrivals can be publicized. In Thailand, the UNHCR is aware of the major crossings or the landing places refugees use, but has not had sufficient field staff available to adequately oversee those areas.

In addition, UNHCR representatives do not always take immediate action when aware of refugees being denied entry into the country. In one instance, the UNHCR was informed that refugees were stranded on an island in the Meikong River and were being denied entry into Thailand. The UNHCR representative did not take any action. Consequently, the refugees were granted entry only through the efforts of U.S. officials.

Further, UNHCR representatives do not seek refugees detained in jails or detention centers to assist them in gaining entry into camps. In addition, refugees regarded their protection in some camps to be inadequate. In the camps we visited, many refugees feared for their safety, contending that robberies and murders were frequent. Their fears were substantiated by reports that, at one camp, 5 murders had occurred within 5 days; at another camp, 2 murders had occurred within 1 week.

Malaysia

Refugees seeking asylum in Malaysia are boat people from Vietnam. Many were granted asylum in Malaysia, but during the summer of 1979, others were rejected and were towed back out to sea. In addition to forcing these refugees to face additional risks and hardships, they were also subjected to other crimes while at sea. These refugees are considered to be illegal immigrants and have no legal rights.

Refugees who were able to land were sometimes detected and placed in temporary detention centers on the beaches where they landed. Many were detained in these centers for periods up to several months before being allowed to enter camps. The UNHCR was denied protective access to these refugees, although the Malaysian Red Crescent Society was allowed to distribute UNHCR-provided food and water.

As in the case of Thailand, the presence of UNHCR representatives appeared to have a positive effect in that refugees were allowed to land or were better treated after landing. As in Thailand, however, there were not enough UNHCR representatives to adequately cover the refugee landings.

Because of these circumstances, there is little doubt that the amount of protection provided refugees by the UNHCR in Thailand and Malaysia is being largely influenced by the policies and attitudes of the central and local governments of these countries and is being hampered because there are not enough UNHCR field representatives to do the job.

We recognize that the UNHCR cannot be expected to provide protection while refugees are on the high seas, nor can the UNHCR physically patrol the entire borders of Thailand and Malaysia. However, the UNHCR has sole responsibility for providing international protection to refugees--a responsibility which cannot be delegated. In view of the numerous problems associated with providing protection to Indochinese refugees, we believe it is imperative that the UNHCR provide the necessary staff and insure that refugees will be adequately protected.

THE UNHCR SHOULD
IMPROVE REFUGEE CARE

The UNHCR care being provided Indochinese refugees should be improved in many of the camps. Refugee care encompasses the provision of food, medical care, shelter, water and sanitation facilities, supplies, safety, education, recreation, and self-reliance projects. Some of these items were adequately provided only at some camps. The absence of essential care creates discontent among refugees, severely hampers resettlement, and may make other solutions, such as voluntary repatriation or local integration impossible.

In the total camp operations, we observed a need for better control and accountability of the resources provided for refugee care, especially in the UNHCR operations in Thailand. There was little assurance, under the present methods used by the UNHCR, that the resources were being effectively used for the intended purposes.

The quality of care and the manner in which it is provided is, like refugee protection, largely dependent upon the attitudes and policies of the first-asylum countries. The UNHCR, however, could improve the care by providing adequate staff in the first-asylum countries and could better coordinate the amount of UNHCR assistance.

We visited 11 camps and 2 transit centers to observe conditions and to determine how well the refugees were being cared for. Overall, we found the care provided in Thailand to be most in need of attention. Refugee care in Hong Kong and Macau was the best.

Inadequate care

Many refugees complained about both the quantity and quality of the food provided in the two Thai camps we visited. We were told some refugees in one Thai camp were not getting their own food rations because they were not registered with the camp officials. These refugees may have entered the camp without the officials' knowledge to avoid the admission process. There were also allegations at that camp that local Thais had refugee identification cards which enabled them to receive food rations. In countries other than Thailand, refugees we interviewed said that food was adequate. Some refugees in Malaysia expressed a preference for more variety in their diets; those in Indonesia wanted more fresh fruit and vegetables, but recognized that such items were in short supply in that country.



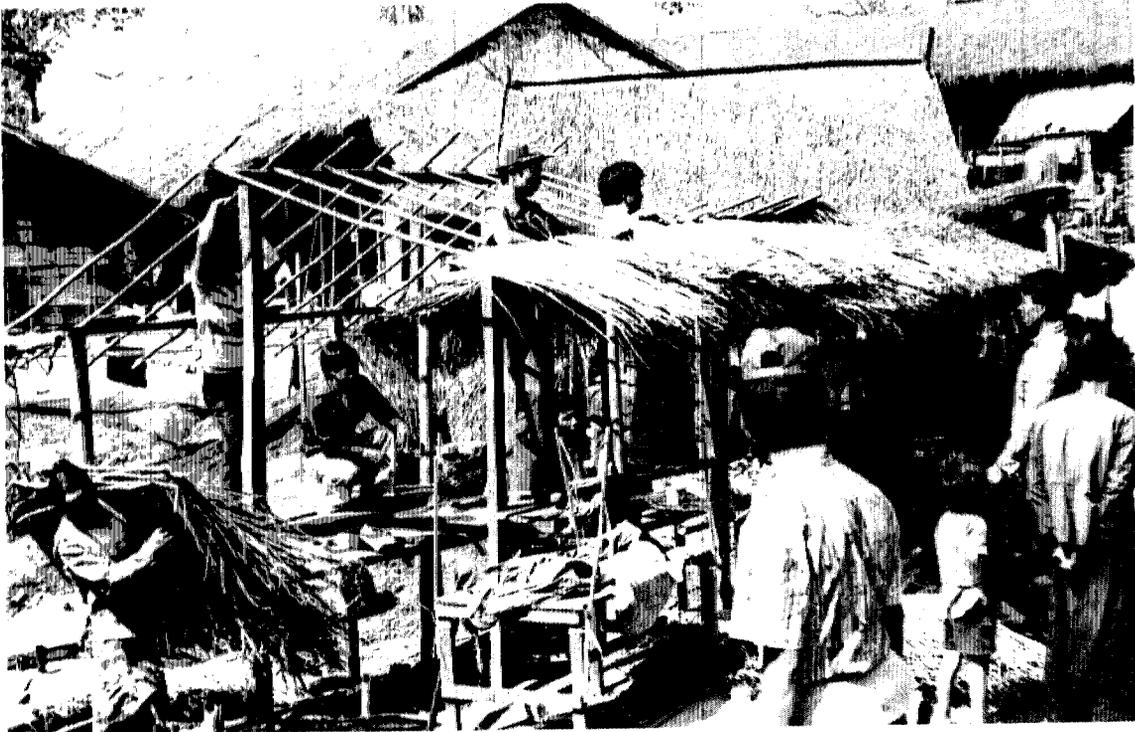
DISTRIBUTION OF MEAT AT UBON REFUGEE CAMP, THAILAND, NOVEMBER, 1979. / THE OPEN AREA EXPOSED THE FOOD TO DIRT, INSECTS AND OTHER CONTAMINANTS.

Medical care of refugees in Thailand was a problem. At the two camps we visited, we noted shortages of medical personnel, medicine, supplies, and diagnostic equipment. The medical staff told us these conditions had existed for some time. They said that the shortages had become worse since the mass influx of Kampuchean on the border began and also told us that because much attention was being directed to the border area, their problems were being ignored or forgotten. Respiratory ailments were prevalent in one camp, and it was estimated that about 70 percent of the children were suffering from malnutrition. Medical care at other locations we visited was considered inadequate.



AIR RAYA REFUGEE CAMP, ANAMBAS ISLAND, INDONESIA. NOVEMBER, 1979.

Overcrowded living conditions were found at all the locations we visited. Some of the housing provided its occupants little protection. Further, because some of the materials used in constructing most of the housing in these camps is flammable and because of the close proximity of the structures, a fire would be disastrous. This condition has improved, or will improve at some camps when additional housing is constructed and/or the number of refugees is reduced as a result of resettlement.

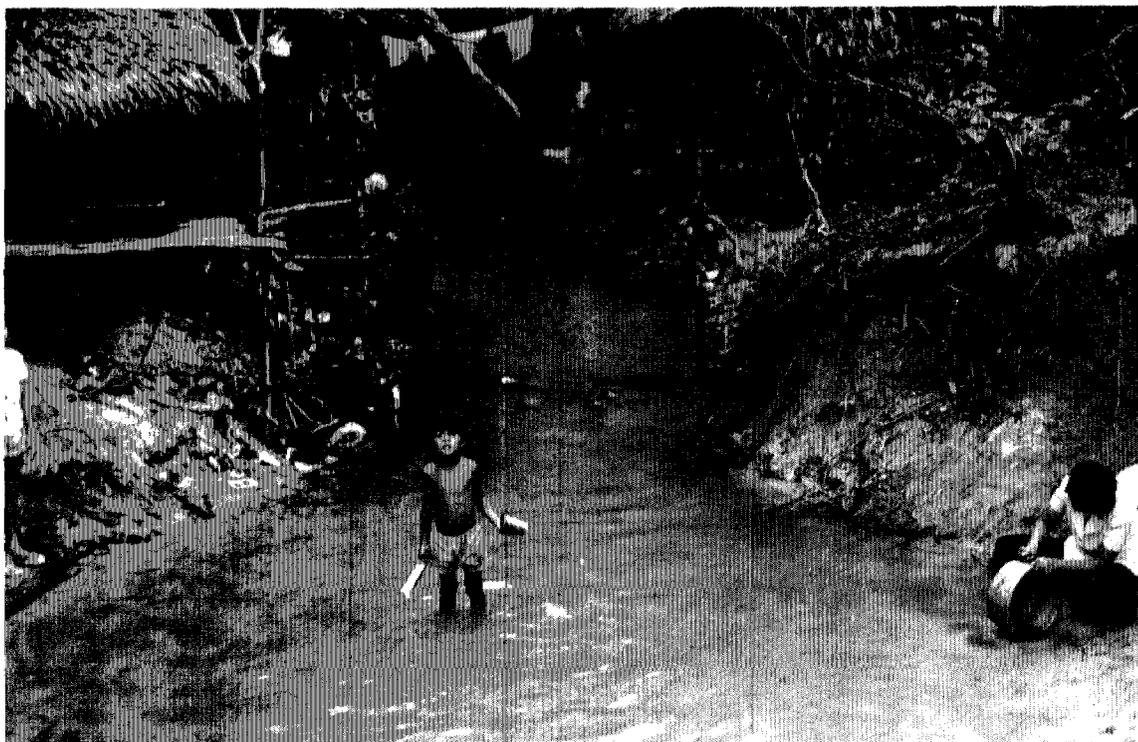


HOUSING CONSTRUCTION AT UBON REFUGEE CAMP, THAILAND. NOVEMBER 1979.



CONTRAST BETWEEN OLD AND NEW HOUSING--LOEI REFUGEE CAMP, THAILAND. LATRINES IN FOREGROUND. NOVEMBER, 1979.

The water supply was a problem at two of the camps we visited, and refugees had to carry water long distances at several camps. The supply of water had been a significant problem at other camps, but had been corrected by the time of our visit. Water quantity was still a problem. In addition, significant sanitation problems existed at several locations, including inadequate latrines, poor drainage which resulted in stagnant or polluted water in living areas, and inadequate garbage disposal.



SOURCE OF WATER SUPPLY, AIR RAYA REFUGEE CAMP, ANAMBAS ISLAND, INDONESIA. NOVEMBER, 1979.

Shortages of necessary supplies, such as blankets, mosquito nets, cooking equipment, and kerosene for stoves and lanterns existed at several locations. Although many of these items were available for purchase, some refugees could not afford to buy them. During our visit to two camps in Thailand, overnight temperatures were frequently in the low 50s, and many refugees did not have blankets. We saw very few mosquito nets, although mosquitos and flies were a big problem at several locations.

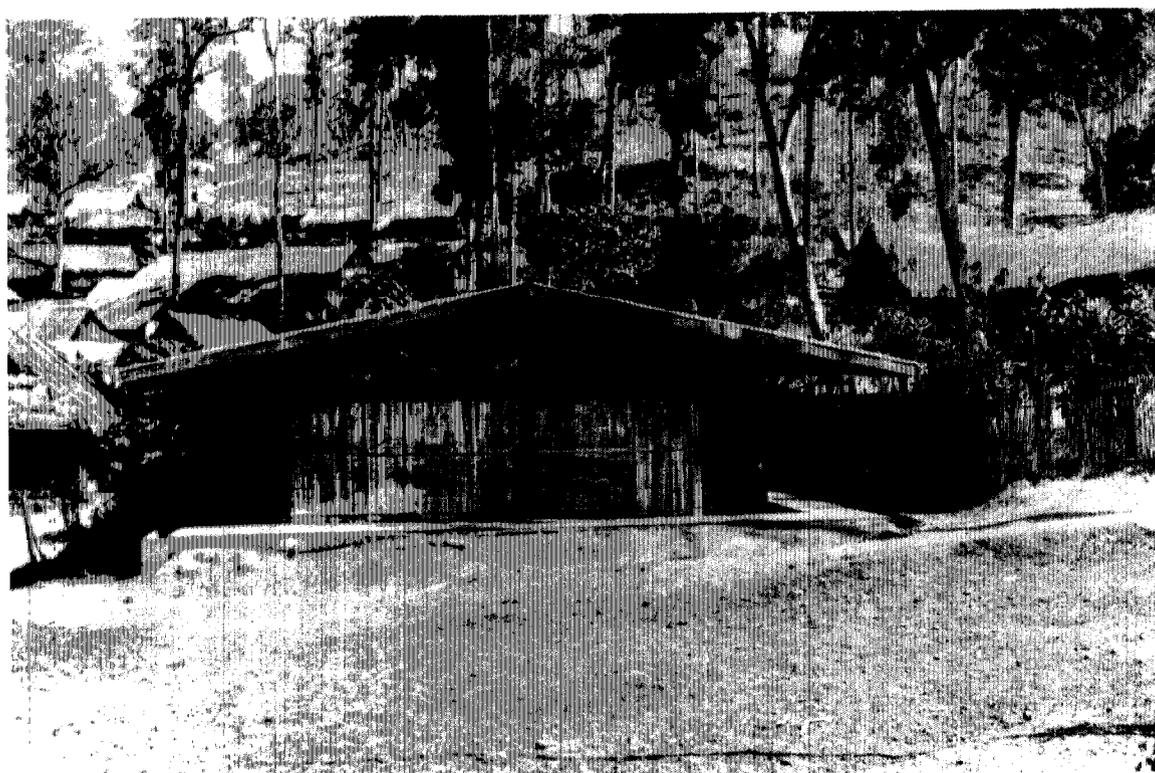


WATER WELL AT UBON REFUGEE CAMP, THAILAND. NOVEMBER, 1979.

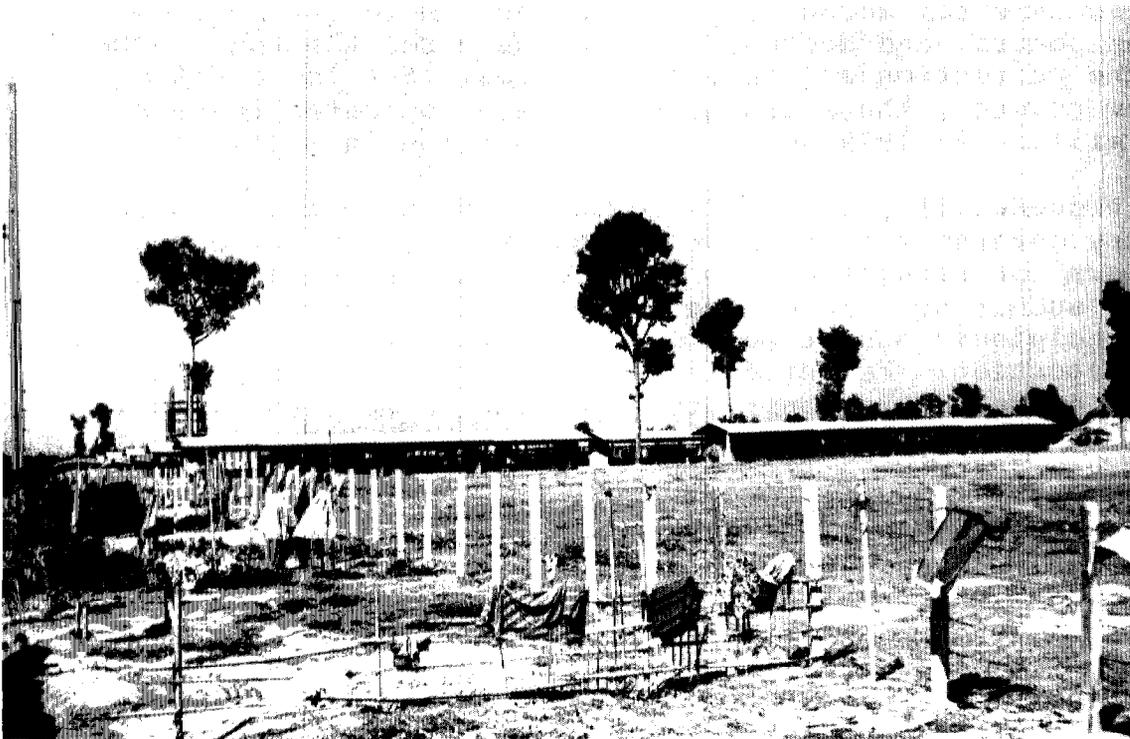


BATHING AREA AT GALANG REFUGEE CAMP, INDONESIA. NOVEMBER, 1979.

Educational facilities and opportunities were lacking at nine locations. Most of the education opportunities that were available in the camps were language classes taught by refugees. Where classes were available, fees were usually charged for some of these classes. A shortage of books and other educational supplies existed at many locations. At one camp in Thailand, a large UNHCR-financed school had been constructed and was in operation. This school was located just outside the camp, but we were told that very few children from the camp attended. We were also told that teachers frequently did not show up for work, even though they were being paid. We were informed that during a surprise inspection, the Provincial Governor found only 14 of 94 teachers present.



SCHOOL AT LOEI REFUGEE CAMP, THAILAND. NOVEMBER, 1979.



UNHCR- FINANCED SCHOOL AT UBON REFUGEE CAMP, THAILAND. NOVEMBER, 1979.

Self-sufficiency projects were not evident at eight locations. Some refugees were making clothes, selling food products or other items, or growing vegetables for their own use or to sell. For the majority of the refugees, however, there was little to do. The ability to initiate large community projects was hampered. For example, growing vegetables was hampered by the lack of seeds, garden equipment, land, and/or the cooperation of local authorities.

Recreational outlets were limited at almost all the camps we visited. We found volleyball areas and ping pong tables in some camps; at other camps we saw checker and chess games made by the refugees. Overall, however, there was very little for most refugees to do to overcome the boredom of camp life.

Need for better control
and accountability of funds

Fundamental accounting procedures should be improved to better control and account for the resources the UNHCR expends for the protection and care of refugees. For the areas our review covered, these expenditures were estimated to be about \$101 million in 1979 and about \$133 million in 1980.

Procedurally, the UNHCR advances funds to first-asylum country governments or their designees to carry out agreed-upon programs for refugee care. Recipients are required to periodically submit supporting documentation for the expended funds. Most recipients submit such documentation or have it available for inspection. We noted, however, in the case of Thailand, that reports stating only its expenditures were submitted.

Even if documents supporting all the expenditures were provided to the UNHCR, we do not believe that this alone provides adequate control and accountability. Invoices and other documentary support can be invalid. What we believe is needed, is independent verification that the goods and/or services paid for were actually received and used for the intended purposes. Such independent monitoring of UNHCR expenditures does not exist at the distribution points for goods and services.

Although we are precluded from examining UNHCR records, we have heard numerous allegations of abuses in one country. For example:

- inferior quality rice in inadequate quantities was received;
- substandard meat was provided;
- blankets paid for were not received; and
- two trucks, a refrigerator, and a duplicating machine purchased for camp use in one camp were diverted elsewhere.

Although similar allegations were not heard in other countries, the opportunity for such abuses exists. Accordingly, we believe the United States--as a major UNHCR contributor--should insist that the UNHCR improve its basic control and accountability of expenditures.

In a prior report, 1/ we recommended that the Secretary of State, through the U.S. Mission in Geneva, inform the UNHCR of the need for better field monitoring and of the need to insure suitable refugee care. In our opinion, having an adequate staff, willing to take aggressive action in carrying out the UNHCR role in dealing with the Indochinese refugees, still remains a major problem.

Comments of UNHCR officials

In December 1979, we met with UNHCR representatives in Geneva. At that time, we discussed our concern about (1) the adequacy of the protection and care being provided to Indochinese refugees and (2) the lack of basic control over UNHCR expenditures. These officials agreed that improvements were needed and promised to take corrective action. They told us that historically the UNHCR had functioned as a nonoperational entity and as such had tried to carry out its role through others. They said that over the years, the UNHCR has recognized the need to become more involved and has adopted that role in some situations, such as its involvement in negotiating and implementing the orderly departure program (see ch. 3), and in its recent involvement with the large influx of Kampuchean into Thailand. Officials said the UNHCR is actively involved in establishing and operating several holding centers to assist in the Kampuchean situation. They further told us that the UNHCR would have a more operational role in the refugee processing centers planned for the Philippines and Indonesia.

The UNHCR officials told us that they have been hampered to some degree in getting adequate staff to carry out their role because of U.N. personnel policies. They also said that they do not always have the flexibility needed to react quickly to situations that develop regarding refugees. They further told us that the UNHCR ability to operate is closely tied to the support of its actions by the U.N. General Assembly. Finally, they said there has to be a recognition of the need for and support of changes in the way the UNHCR has traditionally carried out its responsibilities.

Protection

During 1980, the UNHCR Regional Protection Officer plans to start promoting refugee law throughout the Southeast Asian countries, making contacts and promoting public opinion about refugee rights to protection.

1/"The Indochinese Exodus: A Humanitarian Dilemma," (ID-79-20, Apr. 24, 1979).

The UNHCR has also proposed a new protection network for Thailand. When implemented, this network will provide

- a country legal officer to coordinate all protection activities in Thailand on broad issues--not individual cases;
- two assistant legal officers to handle individual cases; (these officers will rotate between camps to insure protection and will be supported by at least three Thai assistants with legal backgrounds and necessary secretarial support); and
- a legal consultant to identify local Thai lawyers in all parts of Thailand to serve as legal consultants for specific cases.

Further, a regional protection seminar was planned under the sponsorship of the Institute of Humanitarian Studies and the Philippines University Law Center. The seminar would emphasize the need for providing refugee protection and to educate the participants in how to do it. Legal experts from Asian countries were to participate. UNHCR officials were hopeful that this seminar would help achieve agreement among the South-east Asian countries regarding refugee protection.

UNHCR officials told us that they continue to work toward getting Asian countries to become signers of the Convention and Protocol. They said discussions are currently being held with Japan and China. They also expressed the hope that Thailand's recent membership in the UNHCR Executive Committee would lead to Thailand becoming a signer.

Care

UNHCR officials told us they recognized that the types of assistance provided varied within the countries. They said a multidisciplinary volunteer agency team under the aegis of the UNHCR had been studying refugee living conditions to develop uniform standards for Southeast Asia. They also told us that they plan to have full-time representatives at the three largest camps in Thailand: Loei, Nong Khai, and Ubon. Further, UNHCR officials believe that their Southeast Asian operations should be improved because a UNHCR Regional Coordinator is now stationed in Bangkok. They said that this individual is able to make decisions and react to situations that, in the past, had to be referred to Geneva.

Control and accountability

UNHCR officials told us that they were aware that problems in control and accountability exist. They said problems in each country have to be dealt with specifically because of differences in the policies of each country. They told us that adding more people would not completely solve the problems, and said the UNHCR also needed to improve its techniques. They agreed that there is a growing sensitivity to accountability problems and acknowledged that the UNHCR needs to be accountable to its donors. They also said serious consideration would be given as to what methods could be added at the camp level to improve accountability and still achieve their program objectives.

The UNHCR officials told us that after extensive negotiations, their concern for accountability resulted in the establishment of a UNHCR Controller position at the refugee processing center in the Philippines. Finally, they told us that evolving into a more operational agency has been a problem, however, many positive changes have taken place over the past 5 years in the way the UNHCR carries out its role.

CONCLUSIONS AND RECOMMENDATIONS

We believe many of the actions taken or planned by the UNHCR are positive steps toward solving the problems we identified. We recognize the delicacy and complexity of their negotiations with the Southeast Asian countries and encourage their continued efforts. The planned protection network should help improve conditions in Thailand. Other planned actions by the UNHCR should also help improve the protection in Southeast Asia. We believe, however, that the UNHCR needs to be prepared and should react more aggressively, and with sufficient force, to any gross violations of refugee protection that may occur.

Although conditions have improved in some camps, much still needs to be done. In our opinion, the health and well-being of refugees has a direct bearing on the ability to resettle or repatriate them. We believe that the UNHCR needs to improve its coordination of refugee care activities by becoming more involved. The assignment of full-time representatives at three large camps in Thailand should help. However, in our opinion, there are several other camps in Thailand that warrant full-time representatives to coordinate and oversee the protection and care activities.

We believe the UNHCR should extend its involvement to encompass contingency planning and staffing for the efficient administration of its activities. Accordingly, we recommend that the Secretary of State, through the U.S. Mission in Geneva, encourage the UNHCR to

--continue to improve the quality of protection and temporary care for Southeast Asian refugees and

--make certain that the expenditure of funds is more closely monitored.

We further recommend that the Secretary of State continue to recognize that the UNHCR needs flexibility in the manner in which it carries out its activities, and we urge it to take a more active and aggressive role in the operational aspects of the Indochinese refugee program.

CHAPTER 6

SCOPE OF REVIEW AND AGENCY COMMENTS

Our April 1979 report described the Indochinese refugee situation in the first-asylum countries of Thailand, Malaysia, Indonesia, and Singapore. The report also discussed the roles of the various agencies, particularly the UNHCR, in providing assistance to refugees and the U.S. program for selecting and processing refugees for resettlement in the United States. The process and the problems refugees encountered upon arrival in the United States were also addressed.

This review is essentially a follow-up study and is directed primarily toward assessing the growth of the refugee problem during 1979 in the first-asylum countries of Thailand, Malaysia, Indonesia, Hong Kong, and Macau. We added Hong Kong and Macau to our scope because their collective refugee populations had increased to almost 70,000 at August 31, 1979, from about 6,000 at the time of our prior review.

We again reviewed the role of the UNHCR in dealing with the refugee problem; the conditions under which the refugees were living in camps; and the procedures for selecting and processing refugees for admission to the United States. This review did not address the efforts to resettle refugees after their arrival in the United States. We also reviewed authorizing legislation, accumulated and reviewed pertinent data on protection, care, and processing activities, and discussed program operations with responsible officials of the Department of State.

During the period October through December 1979, we visited the headquarters of the UNHCR in Geneva and the UNHCR regional offices in Bangkok, Kuala Lumpur, Hong Kong, and a branch office in Jakarta. During that period, we also visited and observed UNHCR protection and care as well as U.S. processing programs at selected refugee camps in Thailand, Malaysia, Indonesia, Hong Kong, and Macau. In those countries and Singapore where the U.S. Refugee Office for Indonesia was located, we reviewed pertinent data and talked with responsible officials of the U.S. Embassy who deal with refugee matters; JVA staffs who process refugees for the U.S. program; and INS officials who approve refugees for admission to the United States. We discussed refugee policies and problems with high-level Government officials of those countries--with the exception of Macau. We also talked with representatives of voluntary agencies carrying out activities in the refugee camps. In

addition, we talked to officials at the headquarters offices of U.S. voluntary agencies which find U.S. sponsors for refugees and provide other resettlement assistance.

VERIFICATION OF COST AND STATISTICAL DATA

We obtained the cost and statistical data presented in this report from many sources including U.S. Government agencies, the Hong Kong Government, voluntary agencies, and the UNHCR. In most instances, we did not have access to the source records and could not verify the data provided.

OUR PRIOR REPORTS ON INDOCHINESE REFUGEES

We previously issued five reports dealing with Indochinese refugees. The initial report to the Senate Appropriations Committee, "Review of Preliminary Estimates of Evacuation and Cambodian Refugees," (ID-75-68, May 27, 1975), dealt with preliminary estimates of evacuation costs and our views regarding their validity. Our second report to the Congress, "U.S. Provides Safe Haven for Indochinese Refugees," (ID-75-71, June 16, 1975), included information on estimated program costs and the handling of the flow of refugees from the Western Pacific restaging areas to the U.S. reception centers. Our third report to the Congress, "Evacuation and Temporary Care Afforded Indochinese Refugees--Operation New Life," (ID-76-63, June 1, 1976), provided current information on temporary care at the U.S. reception centers and included certain cost data. The fourth report to the Congress, "Domestic Resettlement of Indochinese Refugees--Struggle for Self-Reliance," (HRD-77-35, May 10, 1977), describes our observations on resettlement, including placement of refugees with sponsors and initial steps toward integration into American society. Our fifth report to the Congress, "The Indochinese Exodus: A Humanitarian Dilemma," (ID-79-20, Apr. 24, 1979), described (1) the nature and growth of the Indochinese refugee problem, (2) our observations of camp conditions in first-asylum countries, (3) how refugees were selected and resettled, and (4) the efforts of Federal, State, and local governments and voluntary agencies to resettle them in the United States.

AGENCY COMMENTS

Comments on the draft report were requested from the Secretary of State and the Attorney General on May 19, 1980. These comments were not provided within the 30-day time limitation allowed under the GAO Act of 1980 (Public Law 96-226), and an extension of the time period was not requested. For this reason, agency comments are not contained in this report.

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