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Speech notes from AMA Forum on Asylum Seekers

I would like to firstly acknowledge elders past and present and the traditional owners of this land. I would also like to acknowledge the people seeking asylum that have come here looking for our protection.

I coordinate a refugee clinic at the Children's Hospital Westmead and International Health & Medical Services (IHMS) who refer a section of people seeking asylum to our team for health assessments and treatment.

IHMS are a private profit-making company that won a contract with the Government to provide health services in detention centres both onshore and offshore, in Nauru and Manus Island. As part of their contract with the Government they are required to send a paediatrician to Nauru for 5 days every 3 months. Dr Hasantha Gunasekera from our team went first in September 2014 and then David Isaacs and I went in December 2014. As part of our contract with IHMS, we were asked to assess and treat children and also to look at the health processes and report our findings to IHMS when we returned.

IHMS paid us handsomely for the trip, but we didn't feel that it would be ethical to profit from this, so we agreed to donate the proceeds to our refugee clinic at Westmead.

Nauru is a tiny island about 4 hours flight from Brisbane, in the Pacific. You can drive around the entire Island in about twenty minutes and the camp is right in the middle of the old phosphate mine which is the hottest part of the Island reaching temperatures of 40 plus degrees.

The camp is split into three areas. Regional Processing Areas 1, 2 & 3. The medical centre and the staff accommodation are located in RPC1. This used to be the camp for the single males up until the riots took place in 2013.

RPC 2 is for single males and RPC 3 is where families and single females are held. RPC 3 is 4 kilometres from the medical centre in RPC1 which in itself poses potential problems. We asked IHMS prior to going to give us a tour of the camp as we felt the living conditions and sanitation would help

us in our assessments of the children. As you approach the camp there is barbed wire surrounding the high metal fences and all you can see are rows and rows of tents. As you go through the metal gates you are searched by security and all technological equipment is confiscated. No phones, no cameras are allowed inside the camp.

As we walked through the camp we were escorted by a security guard at either side of us and the first area you come to is the family wing for families with children under 5 years. As we stood there looking at the tents that were lined up next to each other I began looking at the washing facilities for these families. I've thought a lot about this since I left Nauru and one of the beauties of David and I being together on this trip is that men and women think differently; they have a different perspective on things and also that I'm a nurse and David is a doctor. David was looking mainly at the children and I was looking at the environment. Women always tend to look for the toilet where ever they go, don't they?

Behind where we were standing were the showers and then it occurred to me that they had no door, and 7-10 meters in front of this row of showers was a table with three male guards sitting at it. I said to the IHMS director who was with us at that time and the security staff. Do you realise those showers have no door on them and they also looked stunned by what I had said. It was as if they hadn't even realised it themselves until that moment.

The showers had a flimsy curtain. So I want every person in this room to try and imagine what it must like to try and wash yourself, hold your baby and hold a flimsy curtain all at the same time whilst trying to maintain your privacy in front of men. I went and stood in one of the showers and the guards could see straight in.

We walked down to the next part of the camp where the rest of the families were located. Now depending on where the family might have been placed will depend on how far away the washing facilities are. The shower blocks were between 30 and 120 meters walk from any of the tents.

One mother we met cried as she told us she had been wetting the bed. This was a very proud and beautiful Iranian lady. She said she was just too scared to make the journey to the toilet at night. Not in my 20 years as a nurse have I ever met a mother that is bed wetting because she is too scared to get up and use the facilities unless there is something medically wrong with them.

One mother we met had been menstruating for around two months. She said she had reported this several times but had not been referred to a gynaecologist for review of her symptoms. She was using

material from tent her tent to hold the bleeding because she didn't have free access to sanitary products. And one night the bleeding was so bad and she was extremely dirty, she decided to make the journey to the toilet. As she got near to the toilet where the male guards were sitting a blood clot fell from her to the ground. This woman ran to the toilet as a trail of blood followed her.

Another mother came into the room and I took her son out to play so that he didn't have to listen to the content of the conversation. She told David she had been raped there and when she came out of the room to see her son she wept and wept on my shoulder. This mother was offered more time in the showers for sexual favours.

There is a water shortage on Nauru and they are only allowed two minutes in the shower at any one time.

So David and I decided to refer her to one of the IHMS psychologists and after the session we asked her how it went and the psychologist replied, "Why did she not cry out? She is very flirtatious and wears provocative clothes".

This lady wore shorts and vest top, I wear a vest top here in Australia in the summer due to the heat does this mean it's okay to rape me.

So how do we know this is true? Look I wasn't there, I didn't see it with my own eyes. But I do know this. Conditions where you have male guards that can see woman naked while they are trying to wash, places them in a vulnerable position and you can see how things like this are possible. You can see how this could happen.

On another occasion I witnessed the physical assault of a father of a baby we were treating. Dad waited up the corridor whilst David and I were in the room with Mum and baby. I went to get Dad to ask him to come in the room and as I spoke to the Father a big security guard pushed him in the back. He went flying forward and looked at me with complete and utter hopelessness. He couldn't fight back because of the risk that this would affect his asylum application and chances of ever reaching Australia. This happened inside the medical centre in what they call the ED department. There were doctors and nurses there that all stood around and did nothing. I was the only one that challenged the guard.

Patients are called by their boat numbers. I went out to the front desk to ask the senior nurse for the next family and she called out a number. I asked her what the number was and she said that's their boat number. So I asked why don't you call them by name and she said "there are too many

Mohammad's". So I said, "there are quite a lot of John Smith's in Australia but we get round it by asking a name and surname and a DOB.

But this is all part of the dehumanisation and degrading process. If you call somebody by a number they are not really a person. Once you put a name to a face they become a person, they have an identity and it's far more difficult to treat somebody inhumanely if they've got a name. There's such a culture of abuse that exists there.

When you enter the camp there's a dark chilling feeling of lawlessness. It's as if the staff can behave as inappropriately as they wish because there are no repercussions for their actions. The perception is that the Australian Government don't want them here so that's almost a licence for them to behave as they wish..

We met a girl aged 6 with marks around neck where she tried to hang herself with a fence ties. A boy aged that had 15 sown up his lips and a girl aged 7 that looked me in the eye and said can you take a photo of me and put it on the internet and "show the world what is happening to me".

David and I made a promise to each of these families that we would come back to Australia and do what we could to help them.

Because of this, in February last year we decided to break our contract which stated that we were not allowed to talk about anything that we saw and so we went to the media with our information. The decision wasn't made lightly, we talked at length about this but there wasn't really an option in the end.

We gave our recommendations like requested, but where is this going to go? To IHMS, who then give it to the Government who put them there in the first place? That's the chain of command? It's not a chain of command I could trust.

Since the Border Force Act was introduced last year it has made it increasingly difficult for health care staff to report what is going on. We had no agenda when we went to Nauru. Our only agenda was the health of our patients and when we are working in a system with laws that prevent us from carrying out our duty of care and fully advocating for our patients we have to question how long we can continue to work with such a system.

Every doctor or nurse that considers working in one of Australia's detention centres needs to think about whether they feel comfortable witnessing abuse and not being able to talk about it.

When the Border Force Act was introduced last year I decided to stop speaking due to fear for my own children. But then I thought about and felt that first hand evidence is so important because of the shroud of secrecy that exists over Nauru and this is only way that people will hear what is really going on there.

I had sleepless nights and nightmares. I had one repeated nightmare that my own children were in the detention centre and I couldn't get to them. I could see them, but couldn't reach them. I was only there for 5 days can you imagine what is happening to the minds of those that are there for years?

There is no doubt in my mind after witnessing the things that I have discussed with you today that detention harms children.

Thank you.