

AMA Forum: Health Care and Harms caused by Immigration Detention, especially for Children
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I begin by acknowledging the traditional owners of the land on which we meet, the Gadigal people of the Eora nation – their ancestors, their elders, and their children – who are our future.

Thank you Brian for inviting me to speak today and to set the scene on an issue which has preoccupied me since I first set foot on Christmas Island.

And thank you all for coming! Often when I speak about this issue I feel that I am in a lonely place and it is *wonderful* to have the support of so many colleagues.

This forum is timely, following so closely after the High Court ruling in favour of the Australian government, regarding the legality of offshore detention and processing of asylum seekers.

As a result of the ruling, 267 asylum seekers (including almost 100 children) who were transferred to the Australian mainland for medical care, face imminent return to offshore detention centres. This group of asylum seekers all arrived by boat in Australian waters without a valid visa after July 19, 2013 and thus have been caught up in the law that states they will “*never be settled in Australia*” regardless of their refugee status.

Although up to 90% of similar cohorts have previously been found to be genuine refugees, the government has capitalised on the current law by sending this group of people to live off-shore - first on Christmas Island, now on Nauru or Manus. This action has been explicitly billed as a ‘*deterrent*’, though ironically Immigration ministers from both sides of government have admitted that the evidence for this is lacking.

Processing of these asylum seekers has been purposely slow and the result – prolonged arbitrary detention – contravenes the UN Convention on the Rights of the Child. This explicitly states that:
‘The arrest, detention or imprisonment of a child shall be used only as a measure of last resort and for the shortest appropriate period of time’ and that ‘children should not be arbitrarily detained’.

Indeed, the UN High Commissioner for Refugees visited Nauru in 2013 and concluded that:
‘The harsh and unsuitable environment is particularly inappropriate for the care and support of child asylum-seekers (and that) no child, whether unaccompanied or within a family group, should be transferred from Australia to Nauru.’

Forced detention, particularly offshore, has been *hugely* costly for Australia. Billions have been spent on accommodation, security, staff, transport and services in remote, inaccessible locations – just to maintain the rage.

The financial cost of detention is enormous, but the personal cost is immeasurable....

As a result of our policy, hundreds of children have been deprived of their human rights – denied the right to be treated fairly, to safety and protection, to privacy. Denied the right to education and play, and to accessible, appropriate health care.

But more than that, research shows that prolonged detention (and the *average* is about 2 years) *irreparably harms* the health and mental health of these children – and as a paediatrician I know that the impacts will be lifelong.

Paediatricians consider forced detention to be child abuse – and tantamount to torture.

But why have Australians been so slow to appreciate the conditions in which we are forcing children to live? In this case, the adage ‘*out of sight, out of mind*’ applies. It is because the faces and the voices of asylum-seeking children have been deliberately suppressed. Akin to our own Aboriginal children living in remote disadvantage, the lack of a face, or a name, or a voice renders these vulnerable children invisible.

As a paediatrician, my focus today is on some of the children and families I have met. I will use their voices and stories to illustrate how children are harmed by detention and just how wrong we have got it in Australia. In doing so I hope I will convince you that we must find a more humane response to asylum seekers – a problem that won't go away!

At her invitation, I accompanied Professor Gillian Triggs and her team to Christmas Island in July 2014, as part of the Australian Human Rights Commission (AHRC) Inquiry into Children in Immigration detention.

There we conducted detailed interviews with over 100 families with nearly 200 children. During these interviews the Commission is not required to be accompanied by either a security guard or a member of the Department of Immigration (unlike health care and other professionals working in centres). The fact that several of our interpreters cried during these interviews suggested to us that these conversations had not been previously heard. We also had unaccompanied access to all facilities in the compound, including family accommodation.

Christmas Island is billed as a tropical paradise. But Christmas Island was no party. Unbearably hot, humid, dusted with phosphate powder from the mines, and populated by the most extraordinary range of animals (and humans I might say). High wire fences, high security, guards, small 3 by 2.5 metre metal cabins for a home. Children frequently drew and described themselves living in a 'jail.' Parents lamented the lack of space for a child to develop and play. Teenagers were subjected to unnecessary force.

It was a toxic environment – physically and emotionally.

Older children had flashbacks about their journey at sea or atrocities witnessed at home.

Young children had nightmares about the giant centipedes and robber crabs (the biggest crustacean in the world). Each month a report of robber crab road fatalities is published. As one detainee said to me *'it seems Australians are more concerned about the crabs on Christmas Island than the people.'*

Mothers complained the phosphate dust made children wheeze and itch. Gastroenteritis spread quickly in crowded conditions. Despite high rates of child health and mental health problems there was no resident paediatrician, child psychologist or child psychiatrist. Families often had to wait weeks for a medical appointment. Children requiring specialist healthcare on the mainland were 'batched' and sent on a hired jet when all the seats were full. As a result, such consultations were often delayed for months.

The *pervasive punitive approach* included not warning anxious parents when their child would be transferred to the mainland for medical care, even if imminent. Instead, under the guise of *'minimising the security risk'*, detainees were *'extracted'* from their accommodation, without notice, in the dark of night, and bussed to the airport.

The mother of one 5 year old said: *'They take families away in the night. We wake up and our friends are gone and our children are crying. Who would do this to a family? Why do they hate us?'*

Under the UN Convention of the Rights of the Child we have an obligation to respect the right of a child to preserve his or her identity, including their name. Yet, on Christmas Island, over 30% of children signed their drawings with a boat ID.

One 17 year old, unaccompanied boy reported *"I feel like a criminal, a killer when they use my boat number."*

Despite our obligation to provide education, we failed to do so for over 12 months on Christmas Island.

One 11 year old lamented: *'The most important thing is my study. I want to be a doctor. I need to get out of the centre to study.'*

A mother asked *'Is it not a crime to have children here without school? Is it not a violation of human rights?'*

During prolonged detention without processing parents and children alike lose hope and live in limbo.

And as one mum said, *'The criminals, at least they know their sentence'*

At the time of our visit 10 mothers of infant children were under 24-hour *'suicide'* watch, having self-harmed. Not watched by a trained health worker, but stripped of their dignity and watched - through the open door of their tiny room, as they slept and fed their baby - by big burley male guards!

Women who had cut themselves, attempted hanging and suffocation, head-butted glass, were so profoundly depressed and withdrawn, that they were unable to bond and care for their young children. At the time Tony Abbott dismissed the behaviour as attention-seeking, retorting that *'the Government will not succumb to moral blackmail.'*

But as one single mother of three said *'Enough is enough. I have had enough torture in my life. I have escaped from my county. Now, I prefer to die, just so my children might have some relief. I have reached the point I want to hand over my kids. I will do it (suicide) if my kids stay in this situation. And I already have a plan'*

I am still haunted by the words of one young girl, whose mother invited Gillian Triggs and I to visit their 'cabin' – I can't bring myself to call it a home. She was 12 years old and bore the scars of physical abuse in her homeland. She had witnessed a murder attempt on her mother; and had spent 14 months in detention. Her single mother had attempted suicide; her older brother was depressed and had become mute; her baby sister was failing to thrive.

The girl had withdrawn, was refusing to speak or eat and was herself threatening self-harm. When we arrived there was a small still mound under a blanket on the floor - and for a moment I thought she was dead.

Before we left Christmas Island she gave us a letter in which she wrote:

'My life is really deth.... 'I wont to die becous in deth I know I cant live in here any more. If I go back I know they will kell me. How can I get free? I think to stay in the room for ever... becous if I stay in room, no eat, no drink, I will die. Better I kell my self.'

Compassion, it appears, had gone missing on Christmas Island.

In February 2015, the Australian Human Rights Commission published their *Inquiry into Children in Immigration Detention*, which they called *The Forgotten Children*.

During the year-long inquiry - which was within the Commission's mandate and conducted with the knowledge of the government – the Commission visited 11 detention centres both on and offshore, interviewing families and children. They took evidence at 5 public hearings from 41 witnesses including Scott Morrison (then Immigration Minister), Chris Bowan (Departmental Secretary) and several medical practitioners; and received 239 public submissions.

The results were chilling. Above all they confirmed that detention *harms* children.

Many of the data were provided by the Immigration Department and the International Health and Medical Service themselves, who reported that:

- On formal assessment, 34% of children in detention had moderate to very severe mental health disorders – compared to less than 2% in the general Australian population. This was manifest in diagnoses of anxiety, depression, Post Traumatic Stress Disorder, Attention Deficit Hyperactivity Disorder, Conduct Disorder and attachment disorder; disruptive behaviour, and problems with sleep and attention. Physical symptoms included stalled or regressive development, bed-wetting, social withdrawal, mutism and food refusal
- 38% of children interviewed said they were always sad or crying and 21% were always worried; 13% had lost weight
- In one 15 month period, the Immigration Department recorded 233 assaults involving children in Australian detention centres, including 33 reported sexual assaults (mostly in children)
- During the same period 128 children had self-harmed, 105 of whom were deemed to be at 'high imminent' or 'moderate' risk of suicide or self-harm, sufficient to warrant monitoring.

The overarching finding of the Inquiry was that prolonged immigration detention was both *unlawful under international law* and *harmful to the mental and physical health and well-being of children*.

The key recommendation was that all families with children be assessed as soon as possible and released into community detention or to the community on bridging visas.

It was recommended that an independent guardian be appointed for unaccompanied asylum seekers (currently this is the Minister for Immigration, who is conflicted!); that the mental health of children be regularly assessed; and that legislation be enacted to give *direct* effect to the Convention on the Rights of the Child under Australian law.

The report was tabled in parliament by George Brandis (the Attorney General) several months after it was submitted and was met with derision. He accused the Commission of being partisan and in his submission said, *'the government is disappointed and surprised that the Australian Human Rights Commission did not start the Inquiry until 2014'* (during the term of the current government).

He went on to say that *'the Abbott government has stopped the boats'* and that *'children in detention is a problem created exclusively by the former Labour Government which has been largely solved by the current government.'* The report, he said *'offered little in the way of new insights or initiatives.'*

Subsequently, you will recall, the AHRC staff was vilified in the press and accused of fabrication and exaggeration.

In October 2015, I accompanied the AHRC on a monitoring visit to Wickham Point Detention centre in Darwin.

There, my paediatrician colleague Dr Hasantha Gunasekera and I assessed 69 children who had been transferred for medical treatment from Nauru, where they had spent up to 17 months.

It was evident that many of the practices and problems I have described persist in our detention centres.

These were amongst the most traumatised children we have ever seen.

We confirmed this formally using validated, internationally recognised assessment tools.

Using the Child Trauma Screening Questionnaire we found that 95% of children (aged >8y) who had come from Nauru were at risk of Post-Traumatic Stress Disorder.

On the *Hunter Opinion and Personal Expectations Scale* (HOPES), more than 95% of children from Nauru (aged >8y) received the highest score for hopelessness. In situations of adversity hopefulness indicates resilience, and is protective. In contrast, hopelessness predicts later mental ill-health including anxiety and depression.

Using the *Parent Evaluation of Developmental Status* checklist, all young children assessed scored in the top two categories for risk of developmental problems, a rate higher than in any published study.

There was universal condemnation of Nauru, which was described as '*Hell on earth.*' The extreme heat, the tents (shared by several families), the lack of privacy, no air-conditioning, showers limited to a minute or two, insects and vermin, the fear of rape, and the dark walk to the toilet/shower block were recurrent themes. Many children had palpable anxiety at mention of return to Nauru. In some this manifest as physical symptoms of palpitations, vomiting, nausea and sweating.

Our report was publicly released on February 4, 2016. In a recent Senate Estimates hearing following its release, Dr John Brayley, Chief Medical Officer from the Department of Immigration and Border Protection, described our data as '*robust*'. He also conceded that '*scientific evidence shows that detention affects the mental state of children: it's deleterious.*'

At the hearing the Departmental Secretary Mr Pezzullo confirmed that each child we had seen will be assessed on a case-by-case basis. But he also made it clear that it is the Immigration Department, not doctors, who will have the final say on who should be returned to Nauru.

Our findings at Wickham Point suggest that the *Forgotten Children Report* has fallen on deaf ears. Children are still being referred to as numbers; opportunities for recreation and play are restricted; freedom is curtailed; children are stigmatised by being taken to school by uniformed guards; and the footsteps and knock on the door for the 10pm and 5am head count continues to petrify kids.

The prevalence and severity of mental ill-health in children from Nauru was distressing and is under-recognised. Child health and psychological services are totally inadequate for these regressed, depressed, self-harming children.

When we asked teenagers from Nauru what they would like us to report to the Australian people, their messages were stark. One said: '*The Prime Minister of Australia says he is saving our lives but at the same time he is killing us.*' Another said: '*I just don't want to see 'fence' in my life anymore. No fence of any kind.*' And Another: '*You can do anything to me, but don't return me to Nauru.*' Finally: '*I honestly don't see a future. I wish I had died in the ocean.*'

Before I even finish I can anticipate the critics – there will be accusations that we doctors and nurses are '*advocates*', as if this is a pejorative term and as if *every* doctor is not an advocate for the well-being of *every one* of her patients.

We will be accused of having *no concern for Australia's border protection*, when we are *acutely* aware of security and health risks and the complexity of the current refugee crisis internationally. We will be accused of *exaggeration and fabrication*, when our assessments have used objective and validated tools. There will be a *conflation* between terrorists and asylum seekers. And we will be asked – as if it would be highly offensive - how would you feel if a refugee came to live in your backyard?

Politics aside, we all have a responsibility for the well-being of children in the 'care' of Australia.

I urge you, as you put your child, or grandchild, to bed tonight, spare a thought for those who wake in terror at the door knock for a head count at 10pm. Who face dark hours of flashbacks, and nightmares, and despair, only to be woken again at 5am.

I urge you to spare a thought for the children who have lost hope and happiness and to speak up on their behalf.

Australian can do better than this!

And health professionals can lead the way.