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Submission to the Senate Standing Committee on Legal and Constitutional Affairs:

November 2016

INQUIRY INTO THE SERIOUS ALLEGATIONS OF ABUSE, SELF-HARM AND NEGLECT OF ASYLUM SEEKERS IN RELATION TO THE NAURU REGIONAL PROCESSING CENTRE, AND ANY LIKE ALLEGATIONS IN RELATION TO THE MANUS REGIONAL PROCESSING CENTRE

The Australasian College for Emergency Medicine (ACEM) welcomes the opportunity to provide feedback to the Senate Standing Committee on Legal and Constitutional Affairs regarding the Inquiry into the serious allegations of abuse, self-harm and neglect of asylum seekers in relation to the Nauru Regional Processing Centre, and any like allegations in relation to the Manus Regional Processing Centre.

ACEM is a not-for-profit organisation responsible for the training and ongoing education of emergency physicians, and for the advancement of professional standards in emergency medicine, in Australia and New Zealand. As the peak professional organisation for emergency medicine in Australasia, ACEM has a vital interest in ensuring the highest standards of emergency medical care are maintained for all patients across Australasia.

As per the ACEM <u>Statement on the Health of Asylum Seekers</u>, ACEM considers health a fundamental human right for all people, including those seeking asylum in Australia. ACEM supports the humane and dignified treatment of all refugees and asylum seekers, regardless of their mode of arrival, and considers that the conditions of offshore and regional processing centres can potentially be detrimental to their health, both physical and mental. ACEM therefore opposes the mandatory detention of asylum seekers, especially of children.

Contributing factors to the alleged abuse and self-harm

There is clear evidence to suggest that mandatory and indefinite detention places additional stress on the mental and physical health of individuals, whether they are adults or children.¹ Of the many health issues affecting asylum seekers, ACEM has three principal areas of concern, which affect access to health care services, and are detrimental to the general health of peoples seeking asylum in Australia:

- 1. The unpredictability and indefinite nature of immigration detention, as a significant contributing factor to the deterioration of physical and, especially, mental health of asylum seekers.
- 2. The detention of children in any form for any significant length of time is not within the best interest of the health or well-being of the child.

¹ Peter Young and Michael S Gordon, "Mental health screening in immigration detention: A fresh look at Australian government data," *Australasian Psychiatry* Vol 24, no 1 (2016): 22.

3. The challenging physical conditions, geographical isolation and lack of adequate infrastructure of remote island environments chosen for offshore detention centres. These circumstances provide obstacles to the maintenance and promotions of the physical and mental health of asylum seekers, as well as to the timely and adequate provision of appropriate medical care.

Asylum seekers, whether they are adults or children, therefore often have complex health needs, not only due to the means through which they arrived in regional processing centres, but also as a result of the conditions in these locations. These health issues include vulnerability to infectious diseases, poor nutritional health and, for children, developmental risks associated with poor mental health.^{2,3}

Furthermore, ACEM notes that the conditions of regional processing centres, where there is suboptimal health infrastructure and inadequate access to primary health care, can exacerbate minor conditions, consequently leading to life-threatening or serious illness. For example, in 2011, 50% of immigration detainees were found to have attended the emergency department of the Royal Darwin Hospital at least once due to the inadequate provision of primary healthcare.⁴

ACEM therefore considers that these three areas of concern play a significant role as contributing factors to the alleged abuse, self-harm and neglect of asylum seekers in the Nauru and Manus Regional Processing Centres.

Obligations of the Commonwealth Government and contractors

Asylum seekers and refugees subject to detention in regional processing centres are highly vulnerable, primarily due to their non-citizen status, past persecution and trauma, as well as their uncertain future due to laws preventing their settlement in Australia if they have attempted to arrive by boat. While opposed to the mandatory detention of asylum seekers, especially of children, ACEM strongly contends that the Commonwealth Government has a clear moral, ethical and legal obligation to care for the people detained in the Nauru and Manus regional processing centres, including provision of the essentials of daily living, and of medical care. However, ACEM considers that there is no evidence that the health care currently provided in regional processing centres is at a standard which would be acceptable or expected for any patient within Australia.

Furthermore, ACEM asserts that the Commonwealth Government and contractors have an obligation to be transparent in their treatment of asylum seekers and refugees in regional processing centres. Privatisation of the services provided within these centres has resulted in a significant lack of transparency in relation to the health care provided to the people detained in these facilities. This has been further exacerbated by the lack of Commonwealth Government

² Jo Durham, Claire E. Brolan, Chi-Wai Lui and Maxine Whittaker, "The need for a rights-based public health approach to Australian asylum seeker health," *Public Health Reviews* Vol 37 (2016): 2.

³ Professor Elizabeth Elliot AM and Dr Hasantha Gunasekera, *The health and wellbeing of children in immigration detention*, report to the Australian Human Rights Commission Monitoring Visit to Wickham Point Detention Centre, Darwin, NT, (Sydney: Australian Human Rights Commission, 2015) 14.

⁴ Cate Swannel, *Medical Journal of Australia: Insight*, "Serious gaps in detainees' health care," 16 December 2013, accessed November 4, 2016, http://www.doctorportal.com.au/mjainsight/2013/48/serious-gaps-detainees-health-care/.

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transparency, including secrecy provisions within legislation such as the *Australian Border Force Act* 2015. ACEM is strongly supportive of the recent changes to this legislation, which now allows for health practitioners to speak publicly about the conditions and welfare of asylum seekers in regional processing centres without risk of incarceration. However, ACEM also considers that these changes should be extended to other workers in regional processing centres, including teachers, child protection workers and guards.

ACEM strongly asserts that the Commonwealth Government is obligated to provide care in a non-discriminatory fashion to those seeking asylum and who are being held in regional processing centres. Furthermore, this care should be made available without delay in situations where advanced or emergency care is required. In order to ensure that appropriate standards of care are provided, ACEM considers that the organisations contracted to provide health or any other services should be monitored and publically reported according to the relevant Australian national standards.

The role of an independent children's advocate

ACEM notes the recent proposal for the appointment of a children's advocate for unaccompanied children in detention, independent of the Department of Immigration and Border Protection, and responsible for ensuring that their wellbeing is protected. ACEM supports the appointment of a children's advocate, and suggests that a similar role should also be considered for adults. Furthermore, there should also be consideration of the role and value that an independent advocate for asylum seekers in general could have in the current system.

Related matters

ACEM also wishes to bring attention to the significant impact that the regional processing centres in Nauru and Manus Island have on the already limited medical workforce in the Pacific region.

A number of Fellows of ACEM (FACEMs) work within the Pacific region in countries such as Fiji, the Solomon Islands and Papua New Guinea, and have noted that, within these countries, recruitment is often undertaken by the Nauruan Government for medical specialists and advanced trainees to work in regional processing centres. FACEMs have also noted that, often, the salary provided by Nauruan Government to these doctors is significantly higher than that which they would earn in their own countries, leading to doctors leaving their jobs for a number of months to work in locum roles in regional processing centres in Nauru and other Pacific locations.

ACEM notes that this practice places significant strain on the already limited medical resources within the Pacific, and has also resulted in an unevenly distributed workforce. As such, regional processing centres such as Nauru and Manus Island, are having a significant impact on the teaching, training and capacity development of the medical workforce in the Pacific.

Furthermore, FACEMs have also noted that the Australian Government policy of mandatory detention in regional processing centres such as Nauru and Manus Island, has led to the development of unsympathetic views towards asylum seekers from the Pacific Islanders taking on locum roles in these centres. ACEM considers this a direct result of the dehumanisation of asylum

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seekers and refugees by the Australian Government, and notes that this could present a significant barrier to responding appropriately to the allegations of abuse, self-harm and neglect.

Thank you for the opportunity to provide feedback to the Senate Standing Committee on Legal and Constitutional Affairs. If you require any clarification or further information, please do not hesitate to contact the ACEM Policy and Advocacy Manager Fatima Mehmedbegovic

Yours sincerely,

Professor Anthony Lawler
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