Submission to the Senate on Immigration detention & procedural fairness From Victoria Martin-Iverson

## Refugee Rights Action Network

I have been visiting and supporting asylum seekers in immigration detention for 10 years. I currently see a level of despair and mental breakdown that is worse then I have ever seen.

## Reasons:

Poor conditions & lack of anything meaningful to do. People are essentially wharehoused; left all day to ruminate on their situation. Both Leonora & Curtin are physically unpleasant environments, but this is compounded by complete lack of personal autonomy. People cannot cook, clean or do activities of daily living for themselves. The regime is punitive, but the detention is meant to be merely administrative. So for example: Mothers not allowed to walk children t school, not allowed needles for sewing, toys intended for children to own confiscated by Serco and placed in their inventory. My org delivered several thousand \$\$ worth of toys to Leonora. This included "comfort items" to aid traumatized children as per recommendations for child psychologists and mental health workers who volunteer for our group. It took me personally a dozen emails and 4 months to get either the Dept of Immigration & Serco to actually give them to the children as they could not see a difference between a child owning and loving a stuffed toy and holding it for one hour per week in a toy library. I retain the correspondence should the Senate wish to see it.

Lack of transparency in the process. Case workers regularly give dates when thing are meant to happen, but the time frames blow out so people feel they have been lied to. People do not actually understand the reasons for refusal of claim. They feel the system is rigged and DIAC staff have poor knowledge of their country of origin issues. Some case-workers refuse virtually every claim. This is also the case with the IMR. There is little consistency, people are aware of this, so the entire process is not just seen as inherently unfair, it is demonstrably unfair.

Plus there are glaring errors. Eg a person from IRAQ held at Perth Immigration detention center who received a letter from the dept indicating claim was denied as it was safe to return to SRI LANKA! Or another example (I have a copy of the RSA decision that includes this) where an anonymous caller rang DIAC and said the individual was not politically active in country of origin, despite that persons claims that they had family in prison etc, but rather was making a claim for asylum due to Australia having Centerlink & Medicare. It is odd that as this person was in detention, who whpo know this, and why would they ring? This anonymous call is cited by the case officer as calling the claimants' credibility into question. I should also note I have been told by asylum seekers that Serco officers threaten then that is they are a problem they will ring the department and tell them the claims are bogus (I can provide the evidence for the anonymous call, I have the RSA report)

## Abuse by Serco

Calling people by number not by name is again practically universal at Curtin and Christmas Island. I have personally observed this at Curtin. I have personally witnessed verbal abuse at Leonora. I have personally witnessed officers at Leonora ripping up people's notes and letters intended to be given to advocates. I have an apology from the department for this illegal activity by the guard & I am given to understand from Operations manager that this officer in question has been removed from the detention network.

Money missing. People regularly complain that the \$\$ they may have when they go into detention is not there when they get out.

Serco overcharging for basic items. Eg juice. They men at Perth IDC were being charged \$4/juice carton for juice costing Serco about 35 cents.

Sanitary items....not enough supplied.

I hear regularly from mental health workers & asylum seekers with serious mental health issues that people with mental health problems are handcuffed. I have personally heard officers refer to people who have attempted suicide as "nutters". I have been told by a Serco officer that guards have taunted those who start headbanging...suggesting they bang harder if they want attention and goad them into doing it until they are concussed. The rise in head-banging has resulted in people in Red Compound being placed in helmets. There are also allegations people's clothing is removed in red to stop them using it to hang themselves. Again if people are this unwell why are they not in a PsychWard.

Also in Psychiatric Wards the SERCO officers insist in watching the patient 24 hours a day & do not respect the therapeutic relationship. They refuse to leave the room during consults with Drs. This is not only a violation of privacy it interferes with medical treatment and with the patients ability to talk frankly with the mental health staff. Staff are well used to dealing with people who may be aggressive. It is a practice that prohibits recovery and is further distressing and traumatising.

I am told frequently about physical abuse and beatings by guards. This cannot be substantiated, but is clearly a signal that independent international human rights observers should be at the centers continuously. It is one of the demands that asylum seekers have made during protests.

Length of time taken to process claims, including ASIO security clearances. Well there are now over 1000 people waiting...numbers have gone up despite dept assurances this would drop. This stress is horrific.

## Poor medical treatment.

Mental health. This is subject to an Ombudsman's inquiry so I will not comment extensively. However at Perth IDC when people have disclosed to myself and others their intention to self harm I have been told to call back in the morning by guards...In one instance the person attempted suicide that night. At Curtin when I have called directly through to medical on behalf of a person that is at immediate risk I have been hung up on by medical and told never to contact them again.

for the Dept of Immigration has insisted that I & others speak to Serco to triage. This is outrageous: call the very people that are calling these men by number and handcuffing them? They appear to believe that the PSP course entitles them to triage mental health. It does not. So we have the bizarre situation where actual mental health workers (as many of those who volunteer at refugee Rights Action Network are) have to call through to a Serco officer who may well be the very person contributing to someone's trauma in detention, and beg them to contact medical. We need a triage system that can take people straight to medical. That is what is done in every other medical situation in Hospitals and medical centers. Poor pain management for amputees and war injured. People are managed with panadol. In one distressing instance a man with a shoulder blown off by a shell blast in Sri Lanka spent 10 months begging for pain relief and suffered with only panadol. I have the medical records proving this: and his regular pleas to medical to "please" help me my arm so bad pain". People missing medical appointments because Serco takes them at the wrong time, or fails to send them to the right city. Again I have medical records demonstrating one instance when a man waiting for almost a year for an urgent surgical consult on a war wound, only to be sent to Curtin instead of brought to Perth for the necessary treatment, which then had to been re-scheduled, with further delay.

The "visits" area of Christmas Island would appear to be a poor environment for people who are suicidal, but an even less appropriate one for someone whose arm is broken. Why then do records indicate a man with a suspected fractured humorous kept there, rather then taken to hospital (as he was both suicidal and had a suspected fracture). And how did a suicidal man sustain a suspected fracture? Again it demonstrates the need for independent oversight. Serco has a vested interest not in getting a good mental health outcome for people: but simply in preventing the abatements.

When people are prescribed actual pain meds such as opiates...it never seams to make it out into the community with them. Who audits the medication? Are medical workers or Serco officers able to pocket meds due to poor processes? I cannot see that there is an appropriate audit trail for scheduled drugs.

Why would someone wait 4 months for an appointment to get a bullet wound that shattered his ankle repaired: and a year later is not healing. Why would a man with a chunk of shrapnel in his head the size of a thumb not have it removed in over a year? Although it was almost that long before his very poor right arm amputation was examined, so I guess the chunk of shrapnel was deemed unimportant, though it did impact his ability to find a comfortable position to sleep.

These are just a few of the examples.