

Sunday, 21st July, 2019

Committee Secretary
Senate Legal and Constitutional Affairs Committee
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Committee Members,

Please find submission attached regarding the Migration Amendment (Repairing Medical Transfers) Bill 2019.

Kind regards,

Sarah Robertson

I volunteer with the Newcastle branch of Amnesty International and work for a youth mental health service. I wish to express my concerns regarding the physical and mental health of refugees in offshore detention and strongly recommend that the Medevac legislation remains in place.

Since 2010, there have been 24 deaths in offshore detention centres run by the Australian government, including 14 confirmed suicides.

Since the Federal election in May this year, there have been a further 110 suicide attempts and incidents of self-harm on Manus Island alone. Former Australian Medical Association president Dr Kerry Phelps has expressed concern that if the Medevac Bill is repealed, the mental and emotional health of detainees on Manus Island and Nauru could deteriorate even further.

Bastian Seidel, the President of the Royal Australian College of General Practitioners (RACGP) said of the preventable death of 24-year-old Manus Island detainee Hamed Khazaeil: "Bureaucrats should never ever be allowed to override a clinical decision made by a medical doctor." Repeal of the Medical Transfers Bill would essentially put health decisions in the hands of immigration officials, which would undoubtedly lead to further deaths, as current Manus Island refugee, Behrooz Boochani, states: "If they change [or repeal] this law, it will make the situation worse and definitely more people will die."¹

I refer to the Immigration Detention Guidelines published by the Human Rights and Equal Opportunity Commission in March 2000.²

Section 13, Health Care Services, states that "Each immigration detainee is entitled to medical treatment and care provided in a manner...which respects the inherent dignity of the human person and to a standard which is commensurate with that provided in the general community" (13.1). The Immigration Detention Guidelines specifies that "The medical personnel of or attached to each immigration detention centre shall comply with applicable standards of ethics for medical practitioners and with applicable international standards" (13.2). Abdul Aziz Muhamat, a former Manus detainee who was in hospital on Manus for a month, stated the hospital "doesn't have well-qualified doctors, it doesn't have specialists, it doesn't have counsellors, and there is no psychiatric care."¹ Cases such as that of Hamid Khazaei, who died on Manus Island from a leg infection, prove that the standard falls far below that provided in the general community and how essential the Medical Transfers Bill is to ensure detainees in critical conditions are transferred to suitable specialist treatment. The coroner found that Khazaei's death would have been prevented had there been access to antibiotics on Nauru, and if there was a faster approval of the transfer to the hospital in Brisbane in which the 24-year-old died.

¹ <https://www.aljazeera.com/news/2019/07/australia-set-repeal-medical-care-bill-offshore-refugees-190703080344628.html>

² <https://www.refworld.org/topic,50ffbce582,50ffbce5ee,49997af41f,0,AHRC,...html>

Repeal of the Medical Transfers Bill would surely breach section 13.11 of the Immigration Detention Guidelines which stipulates that “immigration detainees who require specialist treatment should ordinarily be referred or transferred to a general community hospital or specialised institution” (13.11).

Section 14 details the mental health services immigration detainees should have access to, stating that this should be overseen by mental health professionals and that any detainee found to be severely mentally ill should be transferred to an appropriate facility as soon as possible. Furthermore, “Survivors of torture and trauma shall have access without delay to assessment and treatment by a qualified professional with expertise in the assessment and treatment of torture and trauma. Where an appropriately qualified professional is not on the staff of the centre, referral should be made to an external specialist agency” (14.4).

More than 80 per cent of people living on Manus and Nauru suffer from depression, anxiety and post-traumatic stress disorder.³ The Migration Amendment (Repairing Medical Transfers) Bill 2019 would prevent these people from accessing the specialist care that is required to prevent further blood on the hands of the Australian Government.

³ Jane McAdam, director of UNSW's Kaldor Centre for International Refugee Law, *Sydney Morning Herald*, July 5, 2019.