Moorooduc Victoria Wednesday May 17

Committee Secretary Senate Legal and Constitutional Committee Department of the Senate PO Box 6100 Parliament House Canberra ACT 2600

Inquiry into the provisions of the Migration Amendment (Designated Unauthorised Arrivals) Bill 2006.

Dear Sir/Madam,

As an advocate for social justice and compassion towards refugees and asylum seekers, I wish to make a submission based on the information I have received from many Afghan asylum seekers held on Nauru over the past four and a half years.

These people have spent differing lengths of time on Nauru(between two and four and a half years) and had different outcomes –either TPVs in Australia or Permanent Humanitarian visas to New Zealand.

In summary I wish to contend that all have been deeply traumatised and deleteriously affected in the long-term by their time on Nauru.

Firstly, all would define the entire island of Nauru as a detention centre—a place where they were detained against their will and deprived of the freedoms which enable participation in society. One of the most fundamental human needs is social participation and denial of this need over a protracted and uncertain length of time is sufficient ,in my opinion, to cause serious psychological damage.

Secondly,all would maintain that other aspects of Nauru exacerbated their trauma.

All suffered from the physical isolation. They all felt that the world had forgotten them, that they had been abandoned by a country purporting to have the highest humanitarian values. They all found making immigration cases for themselves extremely difficult as they had no face-to-face access to legal aid or advice. Many were illiterate ,uneducated and had no idea how to go about collecting evidence for themselves. They felt vulnerable at the hands of a cynical Deaprtment of Immigration and were very surprised at how little the officers sent to interview them knew about the political history of ,and conditions in Afghanistan. They found this very distressing.

They were also denied face-to-face contact with supporters-unlike mainland detainees and this created many problems of sometimes inappropriate efforts to alleviate their mental anguish.

They would all say they had poor medical attention—were denied medical attention if it was of a specialist nature until the situation became critical. They were then transported to Australia under guard, housed in Marybrnong Detention Centre, taken to appointments and hospitals under guard where they were treated as dangerous by staff who did not understand the nature of their detention. Doctors I have interviewed complained of obstruction by guards and DIMIA officials. On Nauru they were particularly vulnerable to poor psychiatric services and were prescribed grossly old-fashioned, heavy-handed and inappropriate medication.

There was no dental service. A doctor removed teeth if the pain became unbearable.

Within the camp all have said they suffered from the closed nature of their environment. As time went by there developed pecking-orders, animosities between ethnic groups, bullying, domestic violence and racism, with little legal protection from the outcomes. Add to this the encouragement to divulge the questionable nationalities of others and you have the makings of a toxic emotional environment.

All those I have spoken to found the heat and the physical, lunar-like landscape oppressive and at times unbearable.

The only positive outcome of their time spent on Nauru was their access to English and computer classes. Unfortunately some were so traumatised they were unable to benefit from these opportunities.

I would now like to concentrate on the long-term effects suffered by almost every former detainee I have spoken with.

I will divide this into two parts, the first being the group accepted on Humanitarian Visas to New Zealand giving them permanent protection.Some left Nauru quite early, others were the last to be accepted.

Many of us felt that this group would do significantly better as their futures were secure and in some individual cases this has been so. I have made four visits to New Zealand as I have a special interest in two refugees there. My initial visit gave me great hope that this unconditional acceptance by a "third country ' would heal my friends. Subsequent visits dismayed me. Despite the support of volunteer sponsors these young men were showing the symptoms of PTSD which was not being treated as the host country seemed to have no notion of the damage caused by prolonged detention. Their volunteer supporters, with the best intentions, lacked understanding. On my later visits I spoke with dozens of ex-detainees. And their stories were very similar. They suffered a range of symptoms-headaches, difficulty sleeping, memory loss, overwhelming sadness, crying, difficulty forming relationships, loss of appetite and/or weight, high levels of anxiety. One older man ,with limited English was on the verge of a break-down, two young men who had tried to suicide after their last rejection by Australian DIMIA, were particularly depressed and hostile towards Australia. I wondered if they would ever recover. They had been offered no counselling or psychiatric support. My two young friends were having their own difficulties-trouble coping in the work place, both being exploited in different ways- doing work for very low pay or doing extremely dangerous work for unacceptably long hours. Both are not making friends, and have several of the above mentioned symptoms.Both say Nauru took their minds. Still they are trying valiantly to adjust to their new lives.

One young man I met started to tremble uncontrollably when I brought out photos I had collected of Nauru . He had been one of the first accepted by NZ said he still could not bear to even think about his time in detention.

I turn now to the fifty or more ex-detainees I have met and spoken with here in Australia. Again they range from those released in 2003 to those who did not get here until last November.

Recently I came to know one man who arrived here in2003. He appeared well-adjusted-has good English,his drivers licence and a good job as a welder.He is a lovely, reserved man who seemed to be coping well. I was taken by surprise when he approached me one day and said he needed help. He said he was having great difficulty sleeping ,had terrible nightmares and had trouble concentrating at work. He said he was constantly losing things and this distressed him greatly. His boss was kind about it but he was afraid that he might lose his job. I referred him to Foundation House for the Survivors of Torture and Trauma and when they were unable to fit him in for 4 months I found a good GP.

The majority of ex-detainees I have come to know well have been here for almost two years. I have lost count of the number I have taken to counsellors, psychologists, GPs or psychiatrists. Almost all have exhibited symptoms of PTSD ,some have been suicidal,some have eschewed medication and are chronically mildly depressed but coping. A significant number are still on antidepressants and/or sleeping tablets. Some have exhibited strange psycho-physical symptoms – blackouts,severe stomach pain,leg pain, amnesia,debilitating headaches,panic attacks. All still talk about Nauru and the effects their time there had on them. I have listened for hundreds

All still talk about Nauru and the effects their time there had on them. I have listened for hundreds of hours to their stories.

The last group I know only arrived in November2005. Amongst them are some of the most seriously traumatized people I have known. This year the British Journal of Psychiatry published "Impact of Immigration Detention and temporary protection on mental health of refugees " by Zachary Steel et al. I would recommend you read this article. In it they find that longer detention was associated with more severe mental disturbance. My own observations would bear witness to their findings.

I relay all this to your committee because I think there is still ignorance of the effects of long-term detention in general and on the dangers of using off-shore facilities in particular.Do we not have a duty of care to prevent such long-term health issues occurring to asylum seekers who have approached this country seeking protection?

Yours sincerely,

Sue Christophersen (B.Sc, B.Ed ,Melb Uni) in consultation and collaboration with Dr William Christophersen, Dr Fleur Christophersen ,Dr Richard Horton.