



Darwin Asylum Seeker Support and Advocacy Network

National Inquiry into Children in Immigration Detention 2014
Australian Human Rights Commission
GPO Box 5218 Sydney NSW 2001
Australia

24 June 2014

Dear Professor Triggs,

Submission to the Australian Human Rights Commission National Inquiry into Children in Detention

Please find enclosed DASSAN's submission to this important Inquiry.

In this submission we aim to share the experiences of the children and families in immigration detention with whom we have daily contact. DASSAN's membership is made up of people from a wide range of backgrounds with varied political views and religious beliefs. These are ordinary people in the community who are genuinely concerned about the inhumanity of prolonged mandatory detention and feel a compulsion to act. Members visit men, women, families and children in detention centres in the Darwin region and witness the impact of ongoing detention.

The information in the submission is drawn from more than 3 years of DASSAN members visiting families and children in all detention centres in Darwin. All identifiers have been removed in order to protect the children and their families from any repercussions.

DASSAN visitors have been recording the damaging aspects of the detention of children for the entire period in which we have had contact with children in detention. This has included making complaints to the AHRC, the Ombudsman, the Health Complaints Commission and other bodies, advocating with the Department of Immigration and Border Protection, the organisations

contracted to run the centres and provide health and welfare care, and making notifications to child protection.

Our overwhelming experience is that detention is damaging to children. This damage increases as children are detained for longer periods of time, in harsher conditions, with no hope for their future. Some children are particularly at risk of harm, including those with disabilities or acute health needs, unaccompanied minors, and those with parents who are unwell. Even those parents who are well are denied the ability to care for their children appropriately. Children witness self-harm and adult violence frequently.

We provide this submission with the hope that the people who have shared their stories with us have not done so in vain.

Yours faithfully

Justine Davis
On behalf of DASSAN



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About Us

Darwin Asylum Seekers Support and Advocacy Network (DASSAN) was established in mid-2010 in response to growing concerns about asylum seekers in immigration detention in Darwin. DASSAN now has over 1000 members who provide voluntary support to people in detention through various activities, including visiting individuals in detention, letter writing, coordinating community donations and running community education events. DASSAN members also advocate on behalf of individuals in detention when requested and against mandatory detention in general.

DASSAN's Submission

While DASSAN believes that there is much that could be done to improve the immigration detention network, we strongly believe that no children should be kept in locked detention. No matter what reforms are made, locking up innocent people for prolonged and indeterminate periods of time in prison like facilities will continue to cause damage and suffering to children and their families, the vast majority of whom will, eventually, be found to be refugees entitled to protection.

Below are DASSAN's responses to some of the terms of reference of this inquiry. Our responses are informed by the observations of our members who visit asylum seekers in detention and the stories we have been told by those asylum seekers.

The appropriateness of facilities in which children are detained

Darwin Asylum Seeker Support and Advocacy Network (DASSAN) operates in the Darwin region of the Northern Territory. Advocates have visited all detention centres in the Darwin region, Currently (as of June 2014) only Wickham Point and Bladin facilities are open. DASSAN advocates visit in the visiting room or in the interview rooms with occasional supervised access inside compounds.

Advocates have observed that there are checkpoints, fences and other mechanisms that limit the movement of children, however it is unclear the specifics of how these are operationalised. It is our understanding that children are moved with their families from compounds to common areas at mealtimes, and that access to recreational facilities is via checkpoints and gates manned by security officers. At times when advocates have had the opportunity to observe inside compounds, it is apparent that security operations are extremely visible, for example security officers with radios and keys, security checkpoints and registers.

There are significant numbers of children at WPIDC, a centre that was originally designed as an IDC, not an APOD. Parents report that there is no toy room or dedicated play space for children.

At both centres there is a distinct lack of natural environment. They are located in what was previously swampland, and there is a significant mosquito and other biting insect problem in the area. The layout that has been observed by advocates at Wickham Point is in quadrangles, with approximately 30-40 rooms centring around a grassed area that has limited shade. There are various levels to each building and these have shaded verandas running between rooms. At both centres, parents state that they do not have the ability to control the airconditioning inside the rooms, and their children often complain about being too cold. They state that the windows in the rooms cannot be opened, so the only manner in which they can raise the temperature of the room is to leave open the door, reducing privacy.

Parents report that children younger than school age have very limited opportunity to leave the centre and gain access and experience of the outside world. Parents frequently describe their concern about this to DASSAN advocates, as they feel that their children are not engaging in normal activities and socialisation, which is in turn having an impact on their development. An example of this is shown in quotes below from a parents:

"L cries all the time, she has become so angry with us. She shouts at the planes saying why don't you take me. She hits her face. As a father I cannot bear this suffering."

"I am 33 years old. For me one year in detention is a part of our life. For my child it is one quarter of her life. Every day I see the damage."

In relation to private space for living and sleeping, parents state that they do have their own room for the family. However only one room is not always appropriate with fathers and daughters having to share rooms, and with family members with mental illness and sleep disturbances in extremely small spaces. Families have reported to advocates that they are woken several times in the night for physical welfare checks, with officers entering the rooms and shining lights. Parents state that this breaks their children's sleep. Parents also report that they must be present in certain areas at particular times for similar physical welfare checks. Families state that these welfare check measures are extremely intrusive and make it difficult for them to create any sense of normality for their children in the family space. A number of women have explained that it makes them feel unsafe due to a lack of trust of security officers.

Serco officers have been observed by DASSAN advocates to inappropriately discipline children, talk in front of parents about their children in negative ways, and make statements implying that they are untrustworthy. An example of this is shown in a quote by a DASSAN advocate below:

"Yesterday my family and I visited a 9 year old Wickham Point for her birthday. One of the small gifts we took for her was not allowed, air-dry clay. After losing the astonished look on my face I asked why on earth she could not sculpt with plasticine and I was told it is because they can use it to copy keys. A serco officer (seemingly in charge) came in to tell me that he has worked in prisons long enough to know what people will do. I pointed out that the

birthday girl is not in prison. I found this conversation confronting in that an officer would draw parallels between working in a prison and working in a detention centre with families, parallels that suggest the detained asylum seekers are no different to convicted criminals. How can a child be denied the very basic pleasure of moulding things from this material because a convicted criminal somewhere once made an impression of a key? When I asked how the child would reproduce the key from the impression, it was inferred that these people are resourceful. This conversation happened in front of the child.'

DASSAN advocates have made the following observations of the impact of detention on children:

- Mood and appetite deterioration. It is often possible to observe the deterioration of children's mood over time in detention, with children appearing less animated over time. Parents report that children's appetite deteriorates, and it is unclear whether this is linked to lack of variety or mood. An example of this is a young Vietnamese female of 14 years, with whom an advocate has been visiting for the past six months. This young person has been observed to be losing noticeably losing weight, and states that she only eats one meal each day because she 'normally doesn't feel like it.' DASSAN advocates have also had parents explain that their children (some under 5) are unmotivated and 'sit in the room all day'.
- Increase in fearfulness and a lack of safety: many parents talk about the detention environment being frightening, children having difficulty sleeping due to fear, having nightmares, and wanting doors locked.
- Witnessing self harm: Self harm incidents are quite high in some centres. An example of this is a seven year old boy who explained to DASSAN advocates that he saw a man smash a window and then cut his wrists with broken glass. After this incident, his parents explained that the child has started wetting the bed and is being given daily sleeping tablets.
- Separation anxiety and loss of social networks. Frequent transfers of children without notice has been observed to result in low mood and anxiety. Various children have stated that there is 'no point making friends', and a sense of insecurity in relation to building relationships, as they are 'never sure if they will see their friends tomorrow'. Parents and children report that they are given little to no notice of transfers, and that children become highly distressed that they are not able to say goodbye to or keep in touch with friends.
- Anger and behavioural issues. DASSAN is aware of one six year old child who was on a boat that sank and witnessed family members drown. The family states that they arrived after 19th July 2013, and are therefore to be transferred to an offshore processing location. The father reports this situation creates extreme stress and that the mother suffers from depression and persistent crying, which in turn impacts on the child. DASSAN advocates have been informed by the parents that the child appears to be constantly angry, doesn't play with children and directs anger towards her parents. They state that they feel helpless to seek the support that she needs, and are unsure how to help their child.
- Impact on the parent/child relationship. In addition to the above, DASSAN advocates have observed relationship breakdown between parents and their children. One child, 13 years old, has been in detention over a year. This child speaks of her time in detention persistently, and marks milestones of time. As these milestones pass, the

child presents with lower mood and higher levels of distress. She repeatedly asks advocates how long she will be there. She has now not been observed to appear happy for approximately 4 months. In addition, the child's relationship with her father is appearing to break down, with the child appearing to lose respect for her father and expressing frustration at his lack of ability to change her circumstances. This lack of respect and frustration may also be linked to the child's reports that she regularly interprets for her father, and conducts the business of the family inside the detention centre, as they do not have access to interpreters to communicate with Serco officers and she has better command of the English language.

- Parents and children report that they have limited access to internet and telephones in order to communicate with family in Australia and overseas. They state that phone calls are expensive (in 'points') and that internet access is strictly time limited. This creates distress for children who may be separated from parents overseas or in Australia.

In addition to the above examples, DASSAN advocates have had a large number of parents report that their children suffer from nightmares, bed wetting, depression and anxiety, and engage in self harm or outbursts of anger. While we are unable to comment on the clinical impact of detention on children, it is the opinion of DASSAN, supported by the observations of advocates, that detention has a detrimental impact on the mental health and development of children.

DASSAN has been informed by the Australian Medical Association that given its arbitrary nature and the prolonged periods of detention being used in Australia, reporting children to Child Protection Authorities as being at risk of harm who are being held for longer than 3 days is appropriate.

Mental health experts have described the detention of children as a 'form of institutionalised child abuse'. The negative impact of detention and the psychological distress seen in refugee and asylum seeker children is well documented. See below for example:

<http://bjp.rcpsych.org/content/194/4/306.full.pdf+html>

<http://www.springerlink.com/content/1n6887426n708273/fulltext.pdf>

Provision of education, recreation, maternal and infant health services

In Wickham and Bladin Point, formal education is available to children. The observations of DASSAN advocates in relation to education are as follows:

- Parents state that there are no opportunities for kindergarten or preschool, and their children therefore do not develop as quickly as if they had this opportunity.
- Boys over 15 attend a truncated education program. While this is offsite, which is greatly preferable to remaining in the centres, it is out of school hours so there is no contact with other children, and they report that they are only taught English and maths. There is a high level of frustration for these young people who are eager to learn.
- Teachers report that children bring unappetising meals to school for lunch and morning tea, and that they often do not eat them. Meals may consist of a piece of

fruit and a juice popper for morning tea, and a simple salad with a serve of protein for lunch (several versions of this). They also bring sliced bread packed separately. Teachers have been informed that they must not give snacks or treats to these children.

- Serco officers attend the school and children state that this causes embarrassment and shame.
- There are frequent reports of Serco officers shouting and swearing at children on the buses on the way to and from school
- Parents are told that they cannot provide meals to their children for school, for example rice. On special days the children are not allowed to bring any special meals. This adds to their feelings of shame.
- Teachers report that childrens behaviour at school deteriorates over time in detention, along with their ability to learn. They report that there is a lot of fighting among the children from the centres, and that the children while initially bright and keen to learn, over time begin presenting as unhappy, angry, rude and unenthusiastic about learning.

The following are DASSAN advocates' observations of the healthcare of children in detention, based on reports from parents:

- Parents state that generally only one parent is able to attend medical or other appointments with children, as there is no childcare available.
- Parents frequently attend medical appointments without the aid of an interpreter and remain unclear about diagnosis and medical treatment.
- Parents who have children with disabilities report that their children have no access to early intervention services.
- DASSAN advocates are repeatedly asked to contact lawyers in relation to parents' concern about deterioration in their childrens' physical health in detention.
- DASSAN is aware of many instances in which advocacy has been required to obtain adequate medical care for children and babies. For example newborn babies who are failing to thrive and are brought repeatedly to the IHMS clinic with little response. In at least 2 of these occasions DASSAN is aware that there was eventually an emergency transfer to hospital.
- Pregnant women report that they are hungry because they do not have access to sufficient and frequent food to meet their adjusted requirements.
- Pregnant women state that they have to wait in food queues in the heat for one to two hours to be served. Women in this situation have reported that when they have stated that they feel faint they have been informed that they cannot sit down and must wait in the queue unless they have a letter from the doctor.
- Pregnant women have recently complained that they are constantly told by some staff that they should not be pregnant because they have no future in this country and will have to go back.
- Parents report to DASSAN advocates that they are not allowed to take food out of the dining room even if their children can't eat at the appointed times.
- DASSAN has had reports that some people with health requirements around diet (for example pregnancy diabetes) have not given appropriate food, even with detailed medical recommendations from health professionals, but instead have been told to choose from the children's meals, which is not appropriate or meeting their health needs.

While DASSAN strongly believes that children should not be detained under any circumstances, based on our observations we make the following recommendations in relation to the detention of children:

- *Provide opportunities for young children to leave the centre regularly and experience different environments.*
- *Do not place children in centres where security hardware is prominent.*
- *Allow for temperature control in family rooms.*
- *Cease conducting physical welfare checks during the night in family compounds.*
- *Allow families to cook independently to alleviate difficulties with food.*
- *Give at least one week's notice to families and avoid unnecessary transfers to allow for children to feel stable in their environment.*
- *Increase access to telecommunications to facilitate contact with other family members and friends.*
- *Empower parents to access and request health and welfare services for their own children.*
- *Significantly increased access to interpreter services and a ban on using children/young people as interpreters with any staff in centres.*
- *Allow both parents or caregivers to visit their child's school on request, and facilitate direct communication with teachers with interpreters.*
- *Always allow both parents or caregivers to attend medical and other appointments for children.*
- *Provide childcare services in order for parents and caregivers to participate in learning and other activities, to increase mood and prevent deterioration of mental health, and therefore ability to care for children.*
- *Provide specialist services to children with disabilities or complex health or mental health issues, and comprehensively involve parents in this process.*
- *Incorporate auditing system to ensure all medical recommendations are followed, particularly for children and pregnant women.*

Electronic messages received from parents and children in detention:

(Edited for legibility only, consent obtained)

NOW 4 MONTHS AND NO THINGS FOR HIM NO CLOTHES NO TOYS NO NO NO 4 HIS AGE AND HE SICK NOW TO MUSH.... WE VERY SCARED AND NOONE HELP US. WE THANKING TO RETERN IRAQ BUT NOT SAFE 4 MY HASBEND HE WILL BE HUNGED LIKE HIS BROTHER AND

FATHER AND HIS NEPHEW DED ON OUR HOUSE WITH BLOOD SO WHAT CAN I DO ,,,, WITH MY LOVE

i am so up sad this week the camp became empty i am alone i do not have any friends (16 YO in detention 19 months)

My daughter, L has changed dramatically in the last three weeks. We have been in detention for 11 months, and she used to have lots of other children to play with. Our centre is next to the airport and L watches the aeroplanes taking off and cries out "Please take me with you why am I still here?" Before L was happy. She liked school and her friends in ar centre. She was full of life and loved to play to sing and dance in the rain and enjoyed most activities but now she does not like anything. For the past few weeks her moods have been volatile, and she has been wetting the bed, which she hasn't done for three years. She also cries a lot more often than she used to. She's become hot tempered and loses it frequently. She watches Television and sees other parents taking their children places and she doesn't understand why her mother and I can't do the same. She's clearly depressed and distressed. In our 11 months in detention ,we had six different Case managers, they never have any new information for us and always tell us you have to wait. It was Obvious to me that detention is causing L psychological damage and it is also frustrating for her mother and me. If there is anything you can do to help a sad and lonely Six year old, please please help her to be freed.

hello I am not good I am in Christmas island if you can please help me I am very sad and depressed every day only caring I wish I died in the ocean because it was one time but here I die every day I afraid my kids get sick here is very dirty

hello very difficult in christmas but we dont have choice .tell Australian people we are ran away form iranian government and we though that we have freedom but it was our fault now we are in prison with baby one month old and small kid they are liar they said were ever you go you it is like darwin and your kid can go to school but here we dont have any thing even one pram for baby we must take the baby in our hands. they want play with our mind and make people sick any way thank you. try to help us maybe its work.

my baby suffers from stomachache, but the medical here doesn't help us and they refuse to give us any medicines for my baby, if you can help us and bring a medicine which could help my baby i will be so thankful. thank you so much

I want ask you some thing. when my baby born immigration said that i must sign that my baby is australian prisoner, and I did it actually everybody done it, can i take that paper back from immigration? if I can its good or not? because my son didnt nothing wrong, and he born in australia why he is prisoner .

Hi .very difficalt for every body, every day they doing something strange, they make alot of stress kids dont going to school. they must play with stone nail and bolt and nut.

dear
i appreciate for every thing....
at the day i staying in my room and i don't like to speak with anyone ..
and during the night i am going outside and running about two or three hour and sometimes more...
if i stay in my room a lot's of bad thing happen come to me and i try to leave my room and running is the good way to stop thinking.
i trying hard to keep happy myself..im going crazy...but i am (writing/waiting) for your help..
and i hope one day i be able to help you too
(16 yo UAM)

...i am going crazy.. from yasretday until now i didn't eat... i fill hungry but i don't like eat and i couldn't eat.
i dont know how can i stop the bad think happen. also i can not study ...when i tried to read the book i could not understand and i became head ache.....
i am so sorry if i make you sad but you are the only one that listen to me and able to know me.....
thanks a lot for every thing.....have a good time
(15 yo boy)