

**REPORT BY THE COMMONWEALTH AND
IMMIGRATION OMBUDSMAN FOR TABLING IN PARLIAMENT**

Under s 486O of the Migration Act 1958

This is the first s 486O report on Ms X who has remained in restricted immigration detention for more than 30 months (two and a half years).

Name	Ms X
Citizenship	Stateless (claimed), born in Country A
Year of birth	1961
Ombudsman ID	1003376
Date of DIBP's reports	25 August 2015 and 23 February 2016
Total days in detention	912 (at date of DIBP's latest report)

Detention history

25 August 2013	Detained under s 189(3) of the <i>Migration Act 1958</i> after arriving in Australia aboard Suspected Illegal Entry Vessel (SIEV) 839 <i>Wattsville</i> . She was transferred to Christmas Island Immigration Detention Centre (IDC). Ms X arrived in Australia with her 16-year old son, Mr Y, who is the subject of Ombudsman report 1003378.
28 February 2014	Transferred to Perth IDC.
28 March 2014	Transferred to Perth Immigration Residential Housing (IRH).
27 May 2014	Transferred to Perth IDC.
18 June 2014	Transferred to Perth IRH.
24 October 2014	Transferred to Wickham Point Alternative Place of Detention (APOD).
6 January 2015	Transferred to Perth IRH.
9 January 2015	Transferred to Wickham Point APOD.
1 August 2015	Transferred to Adelaide Immigration Transit Accommodation.
20 August 2015	Transferred to Facility B.

Visa applications/case progression

The Department of Immigration and Border Protection (DIBP) advised that prior to ministerial intervention, Ms X was part of a cohort who had not had their protection claims assessed as they arrived in Australia after 13 August 2012 and were subject to the bar under s 46A.	
5 March 2014	DIBP notified Ms X of the unintentional release of personal information ¹ and advised that the privacy breach would be taken into account when considering her protection claims.

¹ In a media release dated 19 February 2014 the former Minister advised that an immigration detention statistics report was released on DIBP's website on 11 February 2014 which inadvertently disclosed detainees' personal information. The documents were removed from the website as soon as DIBP became aware of the breach from the media. The Minister acknowledged this was a serious breach of privacy by DIBP.

15 May 2014	Ms X and Mr Y's case was referred on a ministerial submission for consideration under s 197AB for a community detention placement.
19 June 2014	The former Minister intervened under s 197AB.
28 June 2014	The former Minister revoked his approval of Ms X and Mr Y's community detention placement after Mr Y was arrested and charged with multiple criminal offences on 27 May 2014. DIBP advised that Ms X and Mr Y's community detention placement did not proceed.
29 September 2015	The Minister lifted the bar under s 46A to allow Ms X to lodge a temporary visa application.
12 November 2015	DIBP invited Ms X to lodge a temporary visa application.
17 December 2015	Ms X was notified that she is eligible to receive the Primary Application Information Service (PAIS) to assist her with lodging a temporary visa application. She accepted the offer the next day and was assigned a provider.

Health and welfare

August 2013	International Health and Medical Services (IHMS) advised that during her induction health assessment, Ms X disclosed that she had previously been diagnosed with a gynaecological condition. She was referred for regular ultrasounds.
26 August 2013 – ongoing	Ms X is the primary carer of her son who has been diagnosed with severe mental health conditions and has been involved in numerous behavioural incidents. IHMS advised Ms X experiences symptoms of an adjustment disorder including depression and anxiety. It was noted that her condition is exacerbated by the stress associated with caring for her son. She was prescribed with antidepressant medication and attends supportive counselling.
4 September 2013	Referred for diagnostic testing after presenting with chronic back, neck and bilateral knee pain. The tests identified degenerative abnormalities and spinal disc protrusions. IHMS advised that she was prescribed with pain relief medication and reviewed by a neurologist and physiotherapist. Ms X was also assessed by an orthopaedic surgeon who noted she may require knee surgery in the future.
6 March 2014 – ongoing	Ms X was diagnosed with a thyroid condition and advised to attend regular ultrasounds and pathology testing.
9 May 2014 – 17 June 2014	Attended three appointments with a psychiatrist.
July 2014 – ongoing	Admitted to a hospital emergency department after she presented with complications related to high blood pressure. IHMS advised that she was reviewed by a general practitioner (GP) and provided with a treatment plan. She was prescribed with medication and provided with education, however IHMS advised that she has not been consistently compliant with her treatment.

22 July 2014 – 27 August 2014	Attended six physiotherapy sessions.
31 July 2014	Disclosed a history of torture and trauma and accepted a referral for specialist counselling.
29 August 2014 – 10 October 2014	Attended four specialist counselling sessions.
9 September 2014	Referred to an ear, nose and throat (ENT) specialist after presenting with chronic tongue and throat pain and difficulty swallowing. She also presented with a skin condition and was referred to a dermatologist.
10 October 2014	During a review with an ENT specialist, she was diagnosed with allergic rhinitis.
April 2015	Reviewed by a dermatologist and underwent a procedure to manage her skin condition. IHMS advised that no further concerns were raised.
28 April 2015 – 5 May 2015	IHMS reported that Ms X refused food and fluid as a form of protest. She was provided with education and closely monitored by IHMS.
July 2015 – ongoing	Presented to a GP with complications related to her gynaecological condition. She was referred to a specialist.
August 2015	During a routine swallowing assessment with a speech pathologist, she was diagnosed with chronic dysphagia and difficulty swallowing. It was recommended she be referred for specialist assessment.
5 August 2015 – 10 August 2015	Admitted to hospital for spinal surgery. She was discharged into the care of IHMS and provided with pain relief medication and mobility assistance. IHMS advised that during her admission, further thyroid abnormalities were identified and it was recommended she be referred to an endocrine surgeon for further investigation. A computed tomography (CT) scan also identified a nodule on her right lung and she was advised to attend regular CT scans for monitoring.
16 October 2015	A brain magnetic resonance imaging scan was conducted after Ms X presented with recurring dizziness. Vascular abnormalities were identified, however no diagnosis was confirmed. She was advised to undergo regular cholesterol and blood pressure monitoring.
15 January 2016	Referred for a CT scan during a review with a neurosurgeon.

Detention incidents

DIBP Incident Reports recorded that Ms X has allegedly been involved in multiple altercations and arguments with her son.	
11 November 2013	A DIBP Incident Report recorded that her son allegedly assaulted Ms X by grabbing her arm and pushing her.
15 April 2014	A DIBP Incident Report recorded that her son allegedly assaulted Ms X by kicking her.

26 May 2014	DIBP advised that her son was charged with multiple offences after allegedly assaulting Ms X and two Serco officers. Her son subsequently pleaded guilty to all charges and was issued with a formal warning with no custodial sentence imposed.
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Information provided by Ms X

The Ombudsman's office tried to contact Ms X to discuss her detention circumstances but was unsuccessful.

Case status

Ms X was detained on 25 August 2013 after arriving in Australia aboard SIEV *Wattsville* and has been held in detention for over two and a half years.

On 29 September 2015 the Minister lifted the bar under s 46A to allow Ms X to apply for a temporary visa. On 18 December 2015 Ms X accepted the PAIS assistance and was assigned a provider to assist with lodging her application.