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 Mr X and his family who remained in immigration detention for more than 24 months (two years).

Name	Mr X (and family)
Citizenship	Country A
Year of birth	1971

Family details

Family members	Ms Y (wife)
Citizenship	Country A
Year of birth	1972

Family members	Master Z (son)	Miss Q (daughter)
Citizenship	Country A	Country A
Year of birth	1998	2000

Family members	Miss R (daughter)	Master S (son)
Citizenship	Country A	Country A
Year of birth	2002	2009

Ombudsman ID	1002060
Date of DIBP's report	15 November 2014
Total days in detention	Not provided

Detention history

15 November 2012	Detained under s 189(3) of the <i>Migration Act 1958</i> after arriving in Australia aboard Suspected Illegal Entry Vessel 535 <i>Nyberg.</i>
11 March 2015	Granted Bridging visas and released from community detention.

Visa applications/case progression

The Department of Immigration and Border Protection (DIBP) advised that prior to being released from detention, Mr X and his family were part of a cohort who had not had their protection claims assessed as they arrived in Australia after 13 August 2012 and the Minister had not lifted the bar under s 46A.

11 March 2015	Granted Bridging visas.

Health and welfare

Mr X

International Health and Medical Services (IHMS) provided details of Mr X's health and welfare in detention. No significant ongoing physical health concerns were noted.	
1 January 2013	Mr X disclosed a history of torture and trauma and was referred for counselling.
12 January 2013	Reported a history of sleep disturbance, insomnia, stress and persistent worry related to his past torture and trauma. IHMS advised that he was prescribed with medication and referred for specialist counselling. Prior to his release from detention his mental health continued to be monitored by his psychologist and general practitioner (GP).

Ms Y

18 December 2012	Disclosed a history of torture and trauma and was referred for specialised counselling.
22 December 2012	Presented with symptoms related to anxiety and depression. She was prescribed with antidepressant medication and referred to a psychologist and psychiatrist.
4 January 2013	Attended an appointment with a psychiatrist who noted that Ms Y was experiencing recurring recollections and nightmares related to past trauma. Ms Y also advised that she had considered self-harm. The psychiatrist recommended that protective measures be implemented and advised that Ms Y attend two sessions with a psychologist each week and attend a follow-up review with a psychiatrist.
21 February 2013	Attended a follow-up appointment with a psychiatrist who noted improvements in her anxiety symptoms and recommended further psychological counselling.
March 2013	Following her transfer to community detention, Ms Y was referred to a specialised counselling service by her GP.
5 March 2013	Ms Y presented to her GP with a four-year history of pain and tingling in her hands. She was referred to a neurologist for assessment.
24 April 2013	Ms Y advised that she was experiencing symptoms related to depression and anxiety during an appointment with her GP. She was referred to a psychologist for further treatment, however IHMS advised that it could not confirm whether the referral was attended. Prior to her release from detention, Ms Y's mental health continued to be monitored by her GP.
6 August 2014	Ms Y presented to her GP with a history of sinusitis and allergy symptoms. She was referred to an ear, nose and throat specialist and for a computed tomography scan.
22 August 2014	Attended an appointment with a neurological specialist and was diagnosed with carpal tunnel syndrome. It was recommended that Ms Y undergo surgery to treat her condition and that she receive treatment prior to surgery.

1 September 2014	Referred to a hospital orthopaedic department following advice from her neurological specialist. IHMS advised that this appointment remained outstanding at the time of its report.
12 September 2014	Ms Y attended a follow-up appointment with her GP and was referred to a hospital specialist clinic for assessment of her sinusitis.
28 November 2014	Ms Y reported ongoing pain related to carpal tunnel syndrome and was prescribed with pain relief medication. Prior to her release from detention her condition continued to be monitored by her GP.
25 February 2015	Ms Y presented to her GP with recurring sinusitis and rhinitis symptoms. Her GP noted that her symptoms were affecting her quality of life and her referral to the hospital specialist clinic was expedited. Prior to her release from detention her condition continued to be monitored by her GP.

Miss Q

23 February 2013	Miss Q attended an appointment with a psychologist and disclosed that she intentionally restricts her dietary intake to avoid gaining weight. She was provided with education relating to the importance of nutrition.
28 October 2013	Transferred to hospital by ambulance after a school guidance officer expressed concern about her reduced food intake and associated dizziness. IHMS advised that Miss Q was not hospitalised and was discharged with advice to attend a follow-up appointment with her GP.
	During this appointment Miss Q received vitamin injections and was referred to a psychologist.
23 December 2013	Attended an appointment with her GP and declined further psychological counselling. IHMS advised that prior to her release from detention she was monitored by her GP.

Master Z, Miss R and Master S

IHMS advised that Master Z, Miss R and Master S did not require treatment for any major physical or mental health issues.

Detention incidents

12 February 2014	A DIBP Incident Report recorded that Master Z was allegedly
	assaulted while at school. No further information was
	provided.

Ombudsman assessment/recommendation

Mr X and his family were granted Bridging visas on 11 March 2015 and released from immigration detention.

The Ombudsman notes that Mr X and his family were detained on 15 November 2012 after arriving in Australia and were held in detention for over two years before being granted Bridging visas. The Ombudsman further notes that, at the time of DIBP's review, processing of the family's claims for protection had not commenced.

The Ombudsman recommends that the Minister lift the bar under s 46A and processing of the family's protection claims commence as soon as possible.