

## ASSESSMENT BY THE COMMONWEALTH OMBUDSMAN FOR TABLING IN PARLIAMENT

*Under s 486O of the Migration Act 1958*

This is the second s 486O assessment on Mr X who remained in immigration detention for a cumulative period of more than 36 months (three years). The previous assessment 1002466-O was tabled in Parliament on 13 September 2017. This assessment provides an update and should be read in conjunction with the previous assessment.

<b>Name</b>	Mr X
<b>Citizenship</b>	Country A
<b>Year of birth</b>	1979
<b>Ombudsman ID</b>	1002466-O1
<b>Date of DIBP's report</b>	1 August 2017
<b>Total days in detention</b>	1,094 (at date of DIBP's report)

### Recent detention history

Mr X continued to be placed in the community. <sup>1</sup>	
28 August 2017	Granted a Final Departure Bridging visa and released from immigration detention.

### Recent visa applications/case progression

The Department of Immigration and Border Protection (the department) has advised that under current policy settings Mr X is not eligible to have his protection claims assessed in Australia and remains liable for transfer back to a Regional Processing Centre (RPC) on completion of his treatment.	
10 April 2017	The Minister intervened under s 197AB of the <i>Migration Act 1958</i> to grant Mr X a community placement.
1 August 2017	The department advised that it is supporting the government of Papua New Guinea to finalise the Refugee Status Determination of Mr X while he remains temporarily in Australia for medical treatment.

### Health and welfare

<p>International Health and Medical Services (IHMS) advised that Mr X continued to receive treatment for an adjustment disorder with depressed and anxious mood. Following threats of self-harm in January 2017 Mr X was placed under Supportive Monitoring and Engagement observations. A psychiatrist noted that Mr X was experiencing suicidal ideation and continued to refuse treatment. The psychiatrist advised that community detention was the only option to ensure that Mr X would seek treatment. Following his placement in the community Mr X continued to be monitored by a general practitioner (GP).</p> <p>IHMS further advised that Mr X continued to be monitored for tuberculosis and dietary and weight loss issues. IHMS reported that Mr X denied being on a hunger strike, but that he felt that the only control he had was over his body. He was provided with education on his nourishment concerns and following his placement in the community was monitored by a GP.</p>	
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<sup>1</sup> Mr X was granted a placement in the community under s 197AB and remained in immigration detention.

27 February 2017 – 28 February 2017	Mr X was voluntarily admitted to a psychiatric hospital and released the following day.
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**Other matters**

24 February 2017	The department was notified that Mr X lodged a complaint with the Australian Human Rights Commission (AHRC). On 9 March 2017 the department provided a response. The AHRC finalised its investigation of Mr X’s complaint on 18 July 2017.
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**Ombudsman assessment/recommendation**

Mr X was detained on 4 August 2013 after arriving in Australia by sea and remained in detention for a cumulative period of more than three years.

Mr X was transferred to an RPC and returned to Australia for medical treatment. The department advised that because Mr X arrived after 19 July 2013 he remains liable for transfer back to an RPC on completion of his treatment.

The department further advised that it is supporting the government of Papua New Guinea to finalise the Refugee Status Determination of Mr X while he remains temporarily in Australia for medical treatment.

Mr X was granted a Final Departure Bridging visa on 28 August 2017 and was released from immigration detention.

The Ombudsman’s previous assessment recommended that priority be given to resolving Mr X’s immigration status while noting ongoing mental health concerns.

On 13 September 2017 the Minister noted the recommendation and advised that the department is supporting the government of Papua New Guinea to finalise Mr X’s Refugee Status Determination while he remains in Australia.

The Ombudsman notes with concern Mr X’s history of ongoing mental and physical health concerns and his tendency to refuse to engage with treatment.

In light of these concerns, the Ombudsman recommends that the department explore options to provide further access to support and medical services while Mr X remains in the community on a Final Departure Bridging visa to better manage his ongoing health concerns and his capacity to support himself.