

REPORT BY THE COMMONWEALTH AND IMMIGRATION OMBUDSMAN FOR TABLING IN PARLIAMENT

Under s 486O of the Migration Act 1958

This is the second s 486O report on Mr X and his family who remained in immigration detention for more than 30 months (two and a half years).

The first report 1001813¹ was tabled in Parliament on 29 October 2014. This report updates the material in that report and should be read in conjunction with the previous report.

Name	Mr X (and family)
Citizenship	Country A
Year of birth	1972

Family details

Family members	Ms Y (wife)
Citizenship	Country A
Year of birth	1979

Family members	Master Z (son)	Miss Q (daughter)	Master R (son)
Citizenship	Country A	Country A	Country A
Year of birth	1999	2003	2009

Ombudsman ID	1002900
Date of DIBP's report	16 February 2015
Total days in detention	Not provided

Recent detention history

Since the Ombudsman's previous report (1001813), Mr X and his family remained in community detention.	
9 April 2015	Granted Bridging visas and released from detention.

Recent 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 of the <i>Migration Act 1958</i> .	
9 April 2015	Granted Bridging visas.

¹ Mr X and his family were previously reported on in a group report of people who arrived on Suspected Illegal Entry Vessel 413 *Surat* and were detained on 16 August 2013.

Health and welfare

Mr X

International Health and Medical Services (IHMS) provided details of Mr X's health and welfare. No significant ongoing physical health concerns were noted.	
17 November 2012	Mr X presented with symptoms of post-traumatic stress disorder (PTSD) including insomnia, anxiety, emotional numbness and poor concentration. He was reviewed by a psychiatrist and referred for supportive counselling.
4 April 2013	Reviewed by a general practitioner (GP) and referred to a psychiatrist for further assessment.
9 May 2013	Mr X was assessed by a psychiatrist, placed on a mental health treatment plan, and referred for further counselling. The psychiatrist noted that Mr X's mental health issues were related to his prolonged detention and he would benefit from increased inclusion in the community and economic independence.
28 March 2014	During a consultation with his GP, Mr X reported that he continued to experience depressive symptoms, however he advised that his insomnia had improved after commencing medication.
7 November 2014 – ongoing	Prior to his release from detention, Mr X's mental health continued to be reviewed by his GP on a monthly basis. At his most recent review it was noted that his mental health was stable and no concerns were identified.

Ms Y

IHMS provided details of Ms Y's health and welfare. No significant ongoing physical health concerns were noted.	
18 September 2012	Ms Y was assessed by the mental health team and referred for specialist counselling after disclosing a history of depression.
17 November 2012	Reviewed by a psychiatrist and prescribed with antidepressant medication.
15 January 2013	Following her transfer into community detention, Ms Y was reviewed by her GP and referred for psychological counselling.
5 February 2013	Ms Y was reviewed by a psychologist and further counselling was recommended.
27 February 2013	Her antidepressant medication was adjusted by her GP.
27 May 2013	Ms Y advised her GP that she had ceased taking antidepressant medication. After her GP's recommendation she recommenced her medication.
21 February 2014	Reviewed by a psychiatrist and prescribed with an alternative antidepressant medication.

1 March 2014	Ms Y was referred to a hospital emergency department after she presented to her GP with mental health concerns. IHMS advised that she was admitted and provided with treatment. On 4 March 2014 she was transferred to a hospital psychiatric facility, however she discharged herself against medical advice. No further information was provided.
14 August 2014	During a review with a psychiatrist it was recommended that Ms Y attend family therapy in addition to ongoing individual counselling.
30 November 2014	Presented to a hospital emergency department with symptoms related to anxiety, including palpitations. No further information was provided.
19 December 2014	Reviewed by her GP and prescribed with alternative antidepressant medication.
2 January 2015 – ongoing	Prior to her release from detention, Ms Y was regularly reviewed by a psychiatrist and attended specialist counselling for treatment of PTSD and anxiety. Her GP continued to monitor her mental health and prescribe medication as required.

Master Z

IHMS provided details of Master Z's health and welfare. No significant ongoing physical health concerns were noted.	
25 August 2012 – 27 August 2012	IHMS advised that Master Z refused food and fluids as a form of protest and declined a mental health assessment.
21 October 2012	Mr X reported that Master Z has a history of torture and trauma, however Master Z declined a referral for specialist counselling.
24 November 2012	Master Z was reviewed by a psychiatrist and diagnosed with PTSD. He was prescribed with medication and referred for specialist counselling.
24 July 2014 – 5 January 2015	IHMS advised that Master Z did not require treatment for any major mental health issues.

Miss Q

IHMS provided details of Miss Q's health and welfare. No significant ongoing physical health concerns were noted.	
20 August 2012	Mr X reported that Miss Q had a history of trauma and experiences symptoms related to PTSD and anxiety, including bed wetting. She was referred to a psychologist and for specialist group counselling.
November 2012	Miss Q presented with symptoms of anxiety, including nightmares and hyper-vigilance during a review with a psychologist. She was referred for further specialist counselling.
January 2013	Following her transfer into community detention, Miss Q was reviewed by her GP and referred for psychological counselling.
February 2013	Attended psychological counselling.

5 August 2014 – 5 January 2015	IHMS advised that Miss Q did not require treatment for any major mental health issues.
-----------------------------------	--

Master R

IHMS provided details of Master R's health and welfare. No significant ongoing physical health concerns were noted.	
24 August 2012	IHMS advised that Master R was closely monitored by the medical team after he refused food and fluids as a form of protest. No further information was provided.
16 September 2012	Mr X and Ms Y reported that Master R experienced ongoing nightmares and difficulty sleeping related to his history of trauma. IHMS advised that a referral for specialist counselling was declined.
November 2012	Master R was assessed by a counsellor following ongoing nightmares and sleep issues. The counsellor recommended a referral to a psychiatrist, however Ms Y declined further counselling and reported that Master R's mental health had improved. Ms Y was advised to self-refer to the counselling service as required.
(no date provided)	IHMS advised that Master R was reviewed by a mental health nurse following ongoing symptoms of anxiety and difficulty sleeping. It was reported that Master R may be reflecting the distress of other family members and it was recommended that he be transferred to a different environment to avoid further psychological harm. No further information was provided.
9 September 2014 – 5 January 2015	IHMS advised that Master R did not require treatment for any major mental health issues.

Ombudsman assessment/recommendation

Mr X and his family were granted Bridging visas on 9 April 2015 and released from immigration detention.

The Ombudsman notes that Mr X and his family were detained on 16 August 2012 after arriving in Australia and were held in detention for over two and a half 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.