

**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 who has remained in restricted immigration detention for more than 24 months (two years).

<b>Name</b>	Mr X
<b>Citizenship</b>	Country A
<b>Year of birth</b>	1991
<b>Ombudsman ID</b>	1002505
<b>Date of DIBP's report</b>	20 May 2015
<b>Total days in detention</b>	744 (at date of DIBP's report)

**Detention history**

6 May 2013	Detained under s 189(3) of the <i>Migration Act 1958</i> after arriving in Australia aboard Suspected Illegal Entry Vessel (SIEV) 693 <i>Taplow</i> . He was transferred to an Alternative Place of Detention, Christmas Island.
12 May 2013	Transferred to North West Point Immigration Detention Centre (IDC).
26 May 2013	Transferred to Yongah Hill IDC.
1 July 2013	Transferred to Perth IDC.
9 October 2013	Transferred to Facility B.

**Visa applications/case progression**

The Department of Immigration and Border Protection (DIBP) advised that, prior to ministerial intervention, Mr 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(2).	
2 March 2015	Mr X lodged an application with the Federal Circuit Court (FCC) seeking an injunction to prevent his removal from Australia.
3 May 2015	The Minister intervened under s 46A(2) to lift the bar to allow Mr X to apply for a temporary visa.
5 May 2015	Mr X filed a notice of discontinuance with the FCC.
18 May 2015	Lodged a Temporary Protection visa (TPV) application.

## Health and welfare

7 May 2013 – ongoing	<p>International Health and Medical Services (IHMS) reported that during his induction health assessment Mr X advised he had a history of type 1 diabetes. He was prescribed with medication and was referred for pathology, to an endocrinologist, a podiatrist, an optometrist and a diabetic educator. IHMS advised that he has been reviewed by a diabetic specialist every six months.</p> <p>Mr X was reportedly often non-compliant with his medication or administered an incorrect amount of insulin.</p> <p>IHMS further advised that Mr X has a history of unstable glucose levels and had difficulty complying with an appropriate diet despite being provided with diabetes education. Consequently he had required numerous hospital admissions for treatment to manage his condition.</p>
17 May 2013	<p>At review with a psychiatrist it was reported that Mr X may have an impairment that affects his judgement and social behaviour. The psychiatrist recommended that Mr X may benefit from further testing.</p>
July 2013 – ongoing	<p>The IHMS general practitioner (GP) advised that Mr X requested assistance to conform to a diabetic diet and to be reminded to take his insulin.</p> <p>IHMS advised that since this time Mr X has presented to the medical clinic three times a day to check his blood sugar levels and to self-administer his insulin under the guidance of medical staff.</p> <p>The GP also recommended that a male carer be sourced for Mr X as he had difficulty relating to women.</p>
10 July 2013	<p>IHMS advised that a computed tomography scan of Mr X's brain was conducted and he was later diagnosed with an adjustment disorder with anxious and depressed mood. IHMS reported that he also allegedly displayed oppositional, abusive and aggressive behaviour towards IHMS staff.</p>
1 October 2014	<p>IHMS reported that a psychiatrist referred Mr X for inpatient psychiatric care but this did not proceed. No further information was provided.</p>
8 October 2014	<p>A DIBP Incident Report recorded that Mr X received head and facial injuries after he was allegedly assaulted by another detainee. No further information was provided.</p>
31 December 2014	<p>Reviewed by a psychiatrist following a depressive episode. The psychiatrist noted that Mr X may have an autism spectrum disorder and referred him for psychiatric admission. However, Mr X refused to be transferred to hospital.</p>
11 February 2015	<p>A psychiatrist reported that Mr X's diabetes was dangerous and potentially fatal due to his non-compliance with treatment and recommended he be transferred to hospital for further management. Mr X was admitted to hospital but was discharged the same day.</p>

14 May 2015	Mr X refused to attend a medical review with IHMS.
26 May 2015	<p>IHMS recorded that a treating psychiatrist had previously noted that Mr X is independent in his daily living activities but often needs to be reminded about taking his insulin and adhering to his diet. The psychiatrist recommended that Mr X be placed with his brother for physical and emotional support.</p> <p>IHMS further advised that Mr X was prescribed with antidepressant medication and his mental health was monitored on a regular basis.</p>

### Detention incidents

Mr X has allegedly been involved in numerous incidents in immigration detention which included physical altercations with other detainees, displaying abusive, aggressive and threatening behaviour towards detainees and staff, damaging property and possessing contraband.	
1 October 2014	A DIBP Incident Report recorded that Mr X allegedly threw a used needle at an IHMS staff member. No further information was provided.
2 January 2015	A DIBP Incident Report recorded that Mr X was allegedly assaulted by another detainee. No further information was provided.
9 January 2015	A DIBP Incident Report recorded that he allegedly elbowed a Serco officer in the stomach. No further information was provided.

### Other matters

31 July 2014	<p>Mr X lodged a complaint with Ombudsman staff at Facility B alleging that on 30 July 2014 he was subjected to excessive use of force by Serco staff following an altercation. He also said that he had to wait a long time before he was taken to hospital for an assessment.</p> <p>Following an investigation by the Ombudsman's office, which involved reviewing DIBP Incident Reports as well as closed-circuit television footage of the incident, it was concluded that there was no evidence to substantiate Mr X's claims of excessive use of force by Serco officers.</p> <p>DIBP also reported that Mr X was offered medical treatment following the incident but he had initially refused. The complaint was finalised and closed on 15 December 2014.</p>
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### **Information provided by Mr X**

During an interview with Ombudsman staff at Facility B on 18 June 2015 Mr X advised that he was awaiting an interview in relation to his Protection visa application.

He further advised that he was awaiting the outcome of a Bridging visa submission which was currently with the Minister for consideration.

Mr X advised that he has no physical issues apart from diabetes, but since coming to Australia he has had to take antidepressant medication and sleeping tablets.

Mr X stated that following an incident in July 2014 he was transferred to Y compound in Facility B and some of his property was stolen. He said that he had received compensation for one of the items but that it was only half the worth of the item and he is still waiting for compensation for the other items.

He expressed concerns that since his transfer to the Y compound he has had some problems getting his insulin. He said that he can no longer go to the IHMS pharmacy by himself and is escorted there by Serco officers but that this does not always eventuate.

Mr X advised that he speaks with his mother and brother in Country A every week. He also has a brother living in Australia who visits him on occasions.

### **Case status**

Mr X was detained on 6 May 2013 after arriving in Australia aboard SIEV *Taplow* and has been held in restricted detention for over two years with no processing of his protection claims.

On 3 May 2015 the Minister lifted the bar under s 46A(2) to allow Mr X to apply for a temporary visa. On 18 May 2015 Mr X lodged a TPV application and is awaiting the outcome.