



Nauru Detention: Health and Safety

More Information

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The arbitrary and prolonged detention of children in Nauru causes severe physical, emotional, mental and developmental harm and often has long-lasting impacts on their wellbeing. These harms have been well documented by expert bodies since children were first detained in Nauru.

Sexual and other assaults

When the Nauru Files¹ – 2000 leaked reports – were released in August 2016 they revealed horrifying abuse, including assaults, sexual abuse, self-harm attempts, child abuse and unsafe living conditions, with children vastly overrepresented as victims of that abuse.

Though children only made up 18% of the population held on Nauru, they accounted for over 51% of the incidents.

The Nauru Files were just one in a long line of investigations documenting allegations of abuse and harassment:

- A Child Protection Panel created by the Department of Immigration and Border Protection in their report 'Making Children Safer'² stated, 'The Panel

¹ *The Guardian Australia*, The Nauru Files, August 2016

<https://www.theguardian.com/news/series/nauru-files> (accessed 26 July 2017).

² Child Protection Panel, Making Children Safer; The wellbeing and protection of children in immigration detention and regional processing centres, May 2016

<https://www.border.gov.au/ReportsandPublications/Documents/cpp-report-making-children-safer.pdf> (accessed 1 August 2017).

observed only one case of child abuse at Nauru RPC that was referred to the Nauru Public Prosecutor; this prosecution did not proceed.³

- Transfield services (now Broadspectrum), a service provider, received 67 allegations of child abuse as of May 2015. Thirty of these allegations involved detention centre staff.⁴
- The Physical and Mental Health Subcommittee of the Joint Advisory Committee for Nauru Regional Processing Arrangements stated that the Nauru Detention Centre presented a 'significant and ongoing risk of child abuse, including physical and sexual abuse'.⁵
- The Australian Human Rights Commission's 2014 investigation⁶ noted that it had 'received evidence from staff working in Nauru of incidents of harassment, bullying and abuse' against children at the Nauru Detention Centre.
- The Moss Review (2014–2015)⁷ found credible allegations of physical and indecent assault, sexual exploitation and rape against children, including assaults and harassment by contracted service providers. The Review concluded sexual and other physical assault were under-reported.
- The Senate Select Committee Inquiry into the Nauru Detention Centre (2015) stated in its report that people detained in Nauru, including children, experienced a distinct lack of personal safety and that children were directly exposed to acts of violence at the detention centre.⁸
- Former employees/contractors who worked at the Nauru Detention Centre expressed in a 2016 open letter⁹ the occurrence of physical and sexual assault of children at the detention centre. Despite the Australian Government

³ P Karp, Offshore detention report says half of child abuse cases receive inadequate response, *The Guardian*, 16 December 2016
<https://www.theguardian.com/australia-news/2016/dec/16/offshore-detention-report-says-half-of-child-abuse-cases-receive-inadequate-response> (accessed 1 August 2017)

⁴ J Norman, Transfield: Nauru detention centre operator receives dozens of sexual and other abuse allegations, ABC News, 16 July 2015
<http://www.abc.net.au/news/2015-07-16/nauru-detention-centre-operator-transfield-abuse-allegations/6626110> (accessed 26 July 2017).

⁵ The Physical and Mental Health Subcommittee of the Joint Advisory Committee for Nauru Regional Processing Arrangements
<https://s3.amazonaws.com/s3.documentcloud.org/documents/1175048/hmhsc-jac-site-visit-report-final-1.pdf> (accessed 26 July 2017).

⁶ Australian Human Rights Commission (AHRC), *The Forgotten Children: National Inquiry into Children in Detention*, 2014
https://www.humanrights.gov.au/sites/default/files/document/publication/forgotten_children_2014.pdf (accessed 26 July 2017).

⁷ P Moss, Review into Recent Allegations Relating to Conditions and Circumstances at the Regional Processing Centre in Nauru, Final report, (Department of Immigration and Border Protection, Canberra), 6 February 2015
http://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Regional_processing_Nauru/Regional_processing_Nauru (accessed 26 July 2017).

⁸ Taking responsibility: conditions and circumstances at Australia's Regional Processing Centre in Nauru, 31 August 2015
http://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Regional_processing_Nauru/Regional_processing_Nauru/Final_Report (accessed 26 July 2017).

⁹ Open letter on the Border Force Act, We challenge the department to prosecute, *The Guardian*, 1 July 2016,
<http://www.theguardian.com/australia-news/2015/jul/01/open-letter-on-the-border-force-act-we-challenge-the-department-to-prosecute> (accessed 26 July 2017).

being aware of credible sexual assault allegations, it failed to remove these children from the detention centre where they were still at risk.

Factories for mental illness

When people seeking asylum arrive in a new country they are likely suffering from post traumatic stress disorder (PTSD), among other mental health problems like severe anxiety and depression related to their wartime experiences, or those when fleeing. Numerous studies have shown that detention – especially when it comes to children – compounds those problems.¹⁰

Detention environments not only compound illness, they create new ones. In 2010, the government's mental health advocate, Pat McGorry, dubbed Australia's immigration detention centres 'factories for mental illness'.¹¹

Offshore detention – due in part to its harsh environment, lack of access to medical services, and the duration of detention – can be particularly damaging.

A recent study has found that people held in offshore detention are 'battling some of the highest rates of depressive and anxiety disorders recorded and this is overwhelmingly the result of their detention experience.'¹²

After visiting Nauru in 2016 an Amnesty International report stated:

Nearly all of the people whom Amnesty International spoke to – including young children – on Nauru in July 2016 reported mental health issues of

¹⁰ M Dudley, Z Steel, S Mares and L Newman, Children and young people in immigration detention, *Current Opinion in Psychiatry*, 2012, 25(4), pp 285–92 <https://www.ncbi.nlm.nih.gov/pubmed/22569314> (accessed 1 August 2017); C Rowcliffe, R Stellenberg and S Cherian, The impact of detention on children and adolescents, *Journal of Paediatrics and Child Health*, 2016, 52(9), pp 912–13; J Cleveland, Psychological harm and the case for alternatives, *Forced Migration Review*, 2013, (44), pp 7–8 <http://www.fmreview.org/detention/cleveland%20.html> (accessed 1 August 2017); S Mares, L Newman, M Dudley and F Gale, Seeking refuge, losing hope: Parents and children in immigration detention, *Australasian Psychiatry*, 2002, 10(2), pp 91–96 <http://journals.sagepub.com/doi/abs/10.1046/j.1440-1665.2002.00414.x> (accessed 1 August 2017); S Mares and J Jureidini, Psychiatric assessment of children and families in immigration detention – Clinical, administrative and ethical issues, *Australian and New Zealand Journal of Public Health*, 2004, 28(6), pp 520–26 <https://www.ncbi.nlm.nih.gov/pubmed/15707200> (accessed 1 August 2017); A Lorek, K Ehntholt, A Nesbitt, E Wey, C Githinji, E Rossor and R Wickramasinghe, The mental and physical health difficulties of children held within a British immigration detention center: A pilot study, *Child Abuse & Neglect*, 2009, 33(9), pp 573–85 <https://www.ncbi.nlm.nih.gov/pubmed/19811830> (accessed 1 August 2017).

¹¹ A Cresswell, Call to abandon 'factories for mental illness', *The Australian*, 26 January 2010 <http://www.theaustralian.com.au/news/nation/call-to-abandon-factories-for-mental-illness/news-story/1d7c90ddd2fa688f5eead6255e6d563f> (accessed 31 July 2017).

¹² M Gordon, Offshore detainees' mental illness among highest of any surveyed population: study, *Sydney Morning Herald*, 21 November 2016, <http://www.smh.com.au/federal-politics/political-news/offshore-detention-study-detects-mental-health-rates-amongst-the-highest-recorded-of-any-surveyed-population-20161121-gstw3o.html> (accessed 31 July 2017).

some kind. Almost all said that these problems began when they were transferred to Nauru.¹³

The more prolonged the detention, the worse the effects.¹⁴ Children detained on Nauru have been detained offshore – does not include time detained in Australia – on average over 2.5 years of their lives.¹⁵

Sometimes the harm of detention can lead to prolonged physical and mental harm. Cumulative and chronic stressors can:

- impede a child's ability to learn
- predispose a child to chronic diseases
- create language delays
- impair emotional regulation
- lead to regressive behaviours
- among many other negative outcomes.¹⁶

Nauru children most traumatised

The AHRC's 2016 report into the health and wellbeing of children held at Wickham Point Detention Centre¹⁷ (most of whom had been detained in Nauru) included discussion of the trauma experienced by children as a result of being detained in Nauru and the extreme fear of these children at the thought of being returned to Nauru. Paediatricians Professor Elizabeth Elliott and Dr Hasantha Gunasekera found child asylum seekers who had spent time on Nauru were among the most traumatised cases the two had encountered in 50 years of combined professional experience.

Physical health risks

Beyond assault, physical health risks on Nauru are extensive, including:

- unsanitary, overcrowded living conditions;
- risks from the environment (eg, heat, lack of water);
- long waiting times and lack of access to proper medical care;
- lack of access to nutritious food outside meal times;
- risks of zika virus to unborn babies;

¹³ Amnesty International, Australia: Appalling abuse, neglect of refugees on Nauru, 2 August 2016

<https://www.amnesty.org.au/island-of-despair-nauru-refugee-report-2016/> (accessed 31 July 2017).

¹⁴ M Gordon, Offshore detainees' mental illness.

¹⁵ Senate Estimates, 27 February 2017.

¹⁶ K Zwi, Detained children risk life-long physical and mental harm, *The Conversation*, 19 February 2015

<https://theconversation.com/detained-children-risk-life-long-physical-and-mental-harm-37510> (accessed 31 July 2017).

¹⁷ E Elliott and H Gunasekera, The health and well-being of children in immigration detention, AHRC, 16–18 October 2015

<https://www.humanrights.gov.au/our-work/asylum-seekers-and-refugees/publications/health-and-well-being-children-immigration> (accessed 26 July 2017).

- dengue fever; and
- potential risks of cadmium poisoning from air, soil or water.

Most physical health risks on Nauru are discussed in [Living conditions](#).

General medical care

The Australian Medical Association, among others, has criticised the health care provided on Nauru detailing cases of apparent medical neglect, wasting and severe ill-health. Outstanding cases included a woman who had wasted to 30 kilograms with apparent kidney failure, a doctor who had forgotten to check a patient's symptoms, and lack of record keeping and transparency of process.¹⁸

One former staff member describes the culture of medical neglect on Nauru:

A SAF [single adult female] and brilliant mathematician who taught at school voluntarily every day, was given a cocktail of painkillers, antibiotics and other prescription medication off and on for a toothache she had had for 18 months. Consequently, she suffered from severe stomach pains. After one month of 29 pills per day, she was finally able to see a dentist; only to have the wrong tooth pulled out. Due to a lack of cohesion and follow up, she was finally transferred to PNG for the stomach pains. This is an example of the frustration, injustice and lack of basic needs that has led to the abuse, torment, and torture of people.¹⁹

Other examples include:

- Dental care being largely limited to tooth extraction. Some who got fillings lost their teeth.²⁰
- One woman waited nine months to get a prescription filled from Australia.²¹
- A pregnant woman with two previous miscarriages, with pre-eclampsia, and her baby was in the breech position, not being evacuated until 37 weeks.²²

Specialist access

There are long delays for specialists for serious conditions and access to specialists is limited.

¹⁸ M Koziol, Doctors attack immigration department over Nauru and Manus Island medical cases, *Sydney Morning Herald*, 6 December 2016 <http://www.smh.com.au/federal-politics/political-news/doctors-attack-immigration-department-over-nauru-and-manus-island-medical-cases-20161101-gsfqbq.html> (accessed 31 July 2017).

¹⁹ Serious allegations report, Sub 59.

²⁰ N Hasham, Genital mutilation sufferer denied treatment on Nauru, hospital patient discharged with needles in hands: report, *Sydney Morning Herald*, 3 August 2016 <http://www.smh.com.au/federal-politics/political-news/genital-mutilation-sufferer-denied-treatment-on-nauru-hospital-patient-discharged-with-needles-in-hands-report-20160802-gqj16r.html> (accessed 31 July 2017).

²¹ N Hasham, Genital mutilation sufferer.

²² A Beech, Pregnant asylum seeker on Nauru flown to Australia ABC News, 17 February 2017 <http://www.abc.net.au/news/2017-02-03/pregnant-asylum-seeker-on-nauru-flown-to-australia/8239662> (accessed 31 July 2017).

Amnesty details the case of a child with kidney problems visiting IHMS (the medical service provider on Nauru) for two years without referrals to a specialist. Though they tested the boy they did not prescribe treatment. A young girl with eyesight problems could not get her eyes properly tested or get glasses, and was falling behind in school due to not being able to see the blackboard.²³

Serious conditions and transfers

Currently, the majority of health transfers occur to Port Moresby (Papua New Guinea – PNG). PNG suffers significant challenges in health care provision and delivery, transfers add an extra burden, and are usually subject to significant delays.²⁴

When a medical transfer is recommended by a doctor, the approval of the Government of Nauru and Australian Border Force must then be obtained. This carries a significant risk of clinical decisions being overridden by bureaucrats, placing those with urgent medical needs in grave danger.

When conditions are finally deemed serious enough transferees to Australia must go without their families (seemingly an attempt to force people to return to Nauru).²⁵

In some cases – such as that of Omid Masoumali²⁶ – transfers to Australia have come too late and people have died.

Medical transfers are commonly denied – seemingly to prevent people from accessing their legal rights when they reach Australia. As at August 2017 there were 50 reported cases of people being prevented from receiving overseas medical treatment (despite doctors' recommendations). Urgent medical transfers were needed from pregnant women to people with musculoskeletal injuries.²⁷

Risks to pregnant women

Researchers, doctors, staff and advocates have documented countless miscarriages, though requests for official numbers via Freedom of Information have failed.

²³ Amnesty International, Australia: Appalling abuse, neglect of refugees on Nauru, 2 August 2016 <https://www.amnesty.org/en/latest/news/2016/08/australia-abuse-neglect-of-refugees-on-nauru> (accessed 31 July 2017).

²⁴ Papua New Guinea struggles to service its own population with significant challenges in health care provision and delivery: Burnet Institute https://www.burnet.edu.au/countries/8_papua_new_guinea (accessed 1 December 2017).

²⁵ N Hasham, Genital mutilation.

²⁶ Australian Border Deaths Database <http://artsonline.monash.edu.au/thebordercrossingobservatory/publications/australian-border-deaths-database> (accessed 31 July 2017).

²⁷ E Ainge Roy, Morning mail: refugees denied medical transfers from Nauru, *The Guardian*, 21 August 2017 <https://www.theguardian.com/australia-news/2017/aug/21/morning-mail-refugees-denied-medical-transfers-from-nauru> (accessed 23 August 2017); B Doherty, Three pregnant refugees and nearly 50 others denied medical transfers from Nauru, *The Guardian*, 21 August 2017 <https://www.theguardian.com/australia-news/2017/aug/21/three-pregnant-refugees-and-nearly-50-others-denied-medical-transfers-from-nauru> (accessed 23 August 2017).

Researcher and former coordinator of Detention Advocacy for Darwin Asylum Seeker Support and Advocacy Network (DASSAN) Ben Pynt in 10 months witnessed 'dozens of women who had significant problems with their pregnancy. Eleven women had serious problems, including at least four who miscarried and had to have an abortion ...'

His Freedom of Information requests on infant mortality and morbidity were rejected. He also noted the rate of ovarian cysts among women on Nauru was 'way above average, possibly because of exposure to phosphate'.²⁸

At one point pregnant women were routinely brought back to Australia to give birth. That is no longer the case. Now, even those with risky pregnancies are kept on the island. Infant mortality on Nauru is 29 per 1000 live births compared to 3 in Australia. Once a baby is born he or she is subject to heightened risks.

Hospital system

Nauru is ill equipped to deal with over a thousand extra people with complex health needs. The Nauru hospital lacks facilities to treat serious medical conditions.²⁹ It also routinely lacks basic supplies such as bandages and sterile gloves, and toilet tissue or soap for the hospital bathroom and rudimentary medical equipment. Amnesty has documented people being discharged from the hospital when still sick, sometimes half-conscious. One person still had needles in their hands.³⁰

Claims that the Nauru hospital is now comparable to those in Australia have been widely refuted.³¹

Conclusion

The conclusion to most of the reports on detention, is that health risks to children – no matter the efforts of the service providers or staff – cannot be managed. Detention environments, especially remote ones such as Nauru, are physically and mentally damaging children. Children (and their parents) simply need to be removed from the damaging detention environment.

²⁸ G Torre, Exclusive: Mystery surrounds deaths in immigration detention as answers are delayed or denied, *Guardian Express*, 2 August 2016 <http://www.communitynews.com.au/guardian-express/news/exclusive-mystery-surrounds-deaths-in-immigration-detention-as-answers-are-delayed-or-denied> (accessed 26 July 2017).

²⁹ N Hasham, Water shortages, toilet restrictions and constant fear: Details about life on Nauru revealed, *Sydney Morning Herald*, 10 February 2016 <http://www.smh.com.au/federal-politics/political-news/water-shortages-toilet-restrictions-and-constant-fear-details-about-life-on-nauru-revealed-20160209-gmpcwo.html> (accessed 26 July 2017).

³⁰ N Hasham, Genital mutilation sufferer.

³¹ S Whyte, Nauru refugee taped phone call with doctor who calls system 'broken' as they wait for MRI, ABC, 15 May 2017, <http://www.abc.net.au/news/2017-05-15/nauru-refugee-says-he-has-been-waiting-10-months-for-mri/8526194> (accessed 23 August 2017); M Grattan, Amnesty Human Rights Watch investigation reports medical neglect and assaults on Nauru, *The Conversation*, 3 August 2016 <http://theconversation.com/amnesty-human-rights-watch-investigation-reports-medical-neglect-and-assaults-on-nauru-63451> (accessed 23 August 2017).

The AHRC's 2016 report into the health and wellbeing of children held at Wickham Point Detention Centre³² (most of whom had been detained in Nauru) concluded that:

the only appropriate management of the situation is the removal of children from the toxic detention environment which is causing and/or exacerbating mental ill-health.

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³² E Elliott and H Gunasekera, The health and well-being of children in immigration detention, AHRC, 16–18 October 2015
<https://www.humanrights.gov.au/our-work/asylum-seekers-and-refugees/publications/health-and-well-being-children-immigration> (accessed 26 July 2017).