

Submission to Australian Human Rights Inquiry on Children in Detention

This submission is made based on the experience and assessments of some Save the Children Australia (SCA) employees past and present who have been employed as members of the following teams:

- 1) Adult Case Management Team
- 2) Child Education Team
- 3) Child Protection and Support Team
- 4) Child Recreation Team
- 5) Unaccompanied Minors Team

We feel the ethical and moral duty to provide a more thorough understanding of the conditions under which children at the Nauru off-shore processing centre have been detained and the negative impact these conditions have on their mental health. We believe that the children have been subjected to multiple violations of their human rights and wrongdoing from multiple parties. Unfortunately, due to confidentiality clauses that have been imposed on us by the Department of Immigration and Border Protection, we are unable to provide our full names and previous/current titles with this submission and will remain anonymous. However, we believe the evidence that will be submitted will validate the statements that we are making in this submission.

The appropriateness of facilities in which children are detained

The climate in Nauru is on average 31 degrees with humidity in the 75%-90% range. The asylum seeker camp where families are housed (OPC3) is located on a gravel construction site with only one small section of the camp with natural shade. This is where a volleyball court has been set up. With the exception of this one area where there are trees that provide shade, there is no greenery in the entire camp. It is comprised of gravel rocks that emit a harsh glare from the sun, which makes it extremely uncomfortable to be outside without strong eye protection. The absence of any grass or greenery means that there is no appropriate outdoor child recreational space. Children have to run and play on the rocks which are loose and uneven and are prone to injuries such as twisted ankles, falls, and scrapes. The intense heat and harsh sunlight make it very unpleasant for children to want to leave their tent and play in this environment outdoors.

Parents are concerned that children are spending time running in the sun and will experience heat exhaustion/dehydration or other health issues and collapse. This has occurred on a number of occasions. Up until very recently (April 2014) children attended school at OPC3 in large tents that were not air conditioned. The temperature in these non-air-conditioned tents ranged from 45-50 degrees on a daily basis. This affected the children's motivation to attend school consistently, as well as their ability to concentrate and learn while they were at school. The noise levels in the classrooms were extremely high because the classrooms did not have walls and therefore the combined noise of multiple classrooms made it very difficult for children to hear and focus. Due to the constant presence of construction, noise from the construction site and from the camp also interfered with the children's ability to learn. The heat in the classroom tents has required the early termination of primary classes on multiple

occasions further impacting on children's access to education and appropriate developmental activities and stimulation (Evidence Document 55)

Children and their families live in one room in a large tent that has multiple families living in the accommodation. The size of the room is extremely cramped and people are allotted one square metre of living space per person. The majority of families have stretcher beds to sleep in which they have indicated are very uncomfortable and make it difficult to sleep. The cramped quarters have no air conditioning or walls. They are merely separated from their neighbors by a partition of fabric. As Nauru has a tropical climate with frequent rainstorms, these tents and the common areas are frequently subjected to flooding or leaking "roofs", exacerbating the discomfort and stress of the living conditions. These quarters have no air conditioning, making the temperature 40-50 degrees in their accommodation. Of course, placing multiple family members in such a cramped area only serves to increase the temperature of the tent. Although many families are given one electric fan, it does little to lower the temperature and is not adequate for cramped living conditions with multiple family members.

There are approximately 12-15 families living in one large tent, partitioned off to individual rooms. As a result, families have very little privacy. Due to this, children are subject to high noise levels at all hours of the night due to the activity in the camp, and noise from the other families living in the accommodation. High noise levels make it very difficult for children to have adequate rest. This also interferes with their parent's ability to calm their children before bedtime and establish a bedtime routine. In addition, when there is a disturbance in the camp

(which is often), children are subject to hearing shouting, yelling, multiple security guards running towards the incident, and the conversations around the incident from other people living or walking nearby. If family accommodation is near the common restroom, showers and courtyard, children are subject to constant noise from people using these facilities or from adults lounging in the common area. This affects children's ability to get adequate rest and contributes to their level of stress, fatigue and concentration during the daytime. It also has a flow on effect to parents whose rest is limited due to their child's difficulty going to bed and staying asleep. (Evidence Documents 22, 30, 43, 46, 95)

The overcrowded camp at OPC3 where people are packed so closely together also leads to issues with basic sanitation and hygiene. There are outbreaks of lice, gastroenteritis, and school sores that are difficult to contain due to the use of common toilets and showers, common eating areas and close living conditions. Furthermore, children are subject to toilets lacking in basic sanitation. There have been multiple times that OPC3 has "run out" of water, resulting in overflowing and blocked toilets with feces on the toilets or on the floor of the toilet. Showers are also lacking in sanitation due to sharing showers with approximately 750 other people in the camp. (Evidence Document 32, 160, 161). At OPC1 where the children now attend school, there are only two toilets for approximately 200 children.

The sanitation issues are further exacerbated due to issues with local staff members who cannot be relied on to show up to work consistently to perform the cleaning of the facilities. (This issue of consistent and reliable work attendance appears to be culturally based and has occurred in all OPC areas where local Nauruans are employed). The ground of OPC3 is

littered with refuse and there have been multiple times that the trash cans have been overflowing because they were not emptied in time. In fact, the SCA Workplace Health and Safety Manager acknowledged the issue and made a suggestion that SCA hold a "Clean up OPC" day where children would be encouraged to collect the trash on the ground. (Evidence Documents: 1)

High noise levels, the presence of uniformed security and security in riot gear, frequent episodes of emergencies (self harming, violence, urgent medical issues) serve as triggers for previous trauma that children have experienced, as well as exacerbate distress and mental health issues, delay recovery, and create additional mental health concerns (Evidence Document 18, 46)

Inadequate access to recreation, education, social engagement with family members (Evidence Document 77). Although children and families have been at OPC3 since September 2013, children did not have regular access to the gym or internet so that they could keep in contact with family and friends overseas until after January 2014) further increasing their social isolation from loved ones and negatively impacting their emotional wellbeing.

Inadequate access to a daily routine due to frequent changes and the unpredictable nature of the environment. School has been cancelled on several occasions due to excessive heat. Phone times to speak with loved ones, excursions to the gym or the internet or other activities have been frequently cancelled due to staffing shortages, lack of buses, roads being flooded, lack of space, lack of interpreters, and other situations. Given that there are such few opportunities for people to engage in recreational activities, leave the camp, or stay in contact

with family members outside of OPC3; this sets people up for continual frustration, disappointment and a constant feeling of unpredictability and inability to control the most basic aspects of their daily lives. (Evidence Documents: [REDACTED] Briefing Note UAM Critical Incident #122). On Easter Sunday (2014) the pastor of a local church arrived at OPC3 to conduct Easter services but was refused entry to conduct services because he was wearing thongs, regarded as "unsafe" footwear for OPC3. This is curious because the majority of children and adults living at OPC3 only have thongs to wear. Children often are running around in thongs that are much too large for them (often adult sizes) and have holes in them. This makes children more prone to injury due to the presence of rocks.

Lack of Privacy to Discuss Child Protection/Mental Health Concerns

Lack of privacy to discuss child protection/safety/mental health concerns make children and caregivers reluctant to share information with Save the Children staff due to embarrassment, fear of retaliation or stigmatisation (Evidence documentation 43). Save the Children staff have no private space in which to conduct meetings with clients. As interpreters are not allowed to enter the accommodation of families, Save the Children staff are required to conduct sensitive investigations and assessments in full view and often in full hearing of other members of the camp. This decreases their ability to get accurate and timely information from children and their families as well as decreases their ability to provide emotional and practical support to families regarding private matters (Evidence Document [REDACTED] Case notes [REDACTED]).

Facilities Not Equipped for People with Disabilities or Special Medical Needs

Facilities are inadequate for people with disabilities or health and medical concerns. (Evidence document: 59)

Inadequate Lighting

The restrooms in "Area 1" of OPC3 contained no lighting. Parents complained that they were concerned that they or their children would injure themselves going to the restrooms after dark. Furthermore, the lack of lighting creates obvious safety concerns in particular for women and children who have to use the toilet after dark.

Case Example of [REDACTED]

One single father [REDACTED] expressed particular concern about this situation because he had a hernia for which he was awaiting surgery. He was in constant pain and the doctor had previously told him to limit his walking and talking as it would make it worse. He is a single parent with two small boys under the age of 10. As a result of the darkness in the toilets, he had to accompany his children to the toilet each time further causing him pain and worry about worsening his medical condition. This same father also expressed how difficult it was for him to participate in an SCA father's group or other activities in the main area (Area 3) of OPC3 even for additional support. This is because it required for him to walk for approximately 10 minutes one way, and he feared worsening his medical condition. For this same reason, he did not eat meals consistently because he was required to walk 10 minutes (each way) in the heat for meals three times daily, and then stand in a long line in the hot sun in order to get entrance to the mess hall. He was not allowed to bring food from the mess to keep in his tent to reduce his need for walking. This father also expressed how difficult it was for him to supervise his young

boys due to the above mentioned medical conditions. One of his boys has previously diagnosed mental health conditions as a result of the civil war in Syria that they fled from. This father was concerned that he had to delegate the supervision of this boy to his adult sons who were young adults, as he did not feel that they would have the same ability to supervise him and parent him as he would as his father. (Evidence Document #10)

This "Area 1" section was opened for new families arriving to OPC3 before it was fully functional. One of the large tents (Tent #50) in this same area had no ceiling fan in the aisle way making it extremely hot for several weeks.

The impact of the length of detention on children

Families have arrived to live at OPC3 since September. Since that time until 22 May 2014, not one asylum claim has been processed. When families are asked when their claims will be processed, they are given no timeframe. This contributes to feelings of despair, hopelessness, and helplessness in children and their families (Evidence Document 123). As time progresses, SCA staff have seen the most resilient children and families begin to lose motivation to participate in activities, lose their willingness to engage with SCA staff because they believe that "nothing changes" in reference to their concerns. We have seen children stop attending school, withdraw from social activities, stop eating regularly and become depressed and increasingly hopeless about their future. Some children have engaged in self-harming behaviours or have become increasingly preoccupied with thoughts of wanting to self-harm.

In addition, as the length of detention increases, children witness the deterioration of their parent's mental health and the mental health of other adult community members. This

creates additional distress and anxiety as children often take their cues from parents and adults regarding their outlook on life and the future. (Evidence Document 78, [REDACTED] IR 21 Clients: [REDACTED] and [REDACTED] IR #36, [REDACTED] IR #37, [REDACTED] IR #38, [REDACTED] IR #39, [REDACTED] Medical Request #44, [REDACTED] IR #77, [REDACTED] IR #126).

Furthermore, each day the children are in detention exposes them to witnessing additional traumatic situations (mental health deterioration, self-harming events, physical violence within the community etc.) which serves as triggers to past traumatic events and delays their ability to recover from previous trauma. In addition, their close physical proximity to such events places children at risk for their safety each day that they are required to live at OPC3. As mentioned in the Child Protection section of this submission, not only are children routinely exposed to episodes of violence, threats and self-harming attempts by others, but they have also been the victims of abuse, assault, bullying, and threats of violence by both staff and community members. (See Child Protection Section for reference for Evidence Documents).

In addition, the cumulative stress of the inappropriately harsh environment, the lack of appropriate recreational and educational facilities, and long-term institutionalisation delays their ability to grow and develop to their potential and negatively impacts their mental health and psychosocial functioning (Evidence Documents 69, 91, 93, 94, 101, 109, [REDACTED] R #1, [REDACTED] IR #2, [REDACTED] IR #3, [REDACTED] IR #63, [REDACTED] IR #64, [REDACTED] IR #65, [REDACTED] IR #66, [REDACTED] IR #68, [REDACTED] IR #31, [REDACTED] IR #54, [REDACTED] IR #23, [REDACTED] SME Management Plan #73, [REDACTED] IR #72,)

Measures to ensure the safety of children

As discussed previously in this submission, measures to ensure the safety of children in the Nauru off-shore processing centre are grossly inadequate resulting in both physical and mental harm to children. Below is a list of several ways that the safety of children has been compromised.

Inability to Remove Children from Situations of Abuse

SCA staff and stakeholders have an inability to remove children from situations of abuse (within the community or within their household) except in the most extreme circumstances and for a very limited time. As a result, children are required to be returned to the caregiver who originally abused them placing them at heightened risk for additional incidents of abuse. In a non-detained setting, children would have the option of staying with another extended family member or a foster carer until the parent was no longer a threat to the child's safety. DIBP has removed this option making a child much more vulnerable to multiple incidents of abuse. This also makes a child more reluctant to report abuse because they know that "nothing can be done" and a child may fear retaliation from the caregiver or community member.

(Evidence Document 41, 95, 108, 114, 130, 135, 138, 139, 163, [REDACTED] IR #19, [REDACTED] IR #38, [REDACTED] IR #58, [REDACTED] IR #61, [REDACTED] IR #62, [REDACTED] IR #55, [REDACTED] IR #56, [REDACTED] IR #47, [REDACTED] IR #48, [REDACTED] IR #51, [REDACTED] Public Prosecution State #52, [REDACTED] IR #56, [REDACTED] IR #57, [REDACTED] IR #58, [REDACTED] IR #60, [REDACTED] IR #61, [REDACTED] IR #67, [REDACTED] IR #69, [REDACTED] IR #71, [REDACTED] IR #80, [REDACTED] IR #81, [REDACTED] IR #82, [REDACTED] IR #83, [REDACTED] IR #84, [REDACTED] IR #85, [REDACTED] IR #86,

IR #87, IR #93, IR #95, IR #97, IR #103,

IR #104, IR #106, IR #107, Wilson's Case notes #120,

Safety and Security Risk #144).

The only option that staff have in unsafe situations is to temporarily move the child and their parent to OPC1 SAA accommodation that is continually supervised by Wilson's Security Guards. This location has individual rooms that have only screen doors so that the people inside are visible to anyone on the outside. It is also the location where people are isolated when they are medically ill. However, due to lack of space and staffing resources to supervise a family 24/7, it is not possible for a family to remain here for more than a few days. It should also be noted that the lack of any privacy creates additional stress for a parent and child. Not only can Wilson Security Guards see the families in their room 24/7 but other families that are staying at this accommodation can easily walk up and down the common hallway and easily observe what is occurring in the room as well. In addition, this practise still requires the child to be housed with their abusive parent after an episode of abuse, potentially creating additional fear and mental distress to the child. Although while a family is under constant observation, it is less likely that they will physically retaliate against their child, it is not possible to prevent emotional or verbal abuse to the child for reporting or acknowledging the abuse. This continues to put the child at risk of mental harm and also stigmatises the family to the rest of the community by their removal to another location.

Furthermore, if a parent abandons a child, or a child indicates that they no longer want to live with their parents, the only option that DIBP provides is for the child to be regarded as an

"unaccompanied minor" (UAM) and continue to reside at Nauru OPC3 or stay with a relative that is currently living at OPC3 who is willing to take responsibility for the child. Unlike in Australia, where a foster home would be considered so that the child could reside in the safety and security of adults; DIBP insists that if there are no willing relatives at OPC3, the child has to be treated as a UAM. This remains the case even if the child has a parent or other adult relatives living in Australia who are willing to assume the child's care. This creates additional vulnerability and risk for a child who has been abandoned by the parent, or finds the home situation so unbearable that the child is no longer willing to reside with them. (Evidence Document 114, 115).

Case Example: [REDACTED]

[REDACTED] is an adolescent boy who lives with his mother and relatives at OPC3. His father is in his home country. [REDACTED] and his relatives have experienced extensive bullying, threats of harm, intimidation, and assault while at OPC3. One of [REDACTED]'s female relatives was prevented from showering for two days due to bullying behavior by other asylum seekers. [REDACTED] was sexually assaulted by an employee at OPC3 but chose to not press charges due to fears of retaliation, shame and bullying. [REDACTED] indicated that he is afraid that someone in the camp will attempt to sexually assault his mother or female relatives and has expressed repeatedly that he does not feel he or his family are safe in the camp. [REDACTED]'s mother has experienced deterioration in her mental health due to fears for her own safety and the safety of her children. She has experienced unwanted attention from asylum seeker men in the camp as well as numerous episodes of bullying and persecution. [REDACTED]'s mother was reluctant to seek torture and trauma

treatment from STTARS due to a fear of retaliation (for filing the sexual assault complaint) if particular employees (or associates of those employees) were present at the torture and trauma service. [REDACTED] has written multiple requests for additional phone time to contact his father in his home country however he was denied this, despite being the victim of a sexual assault and bullying and an obvious need for additional support.

[REDACTED]'s family has expressed concern about a marked deterioration in his mental health which began after the sexual assault and includes the following behaviours: lack of appetite and weight loss, irregular attendance at school, disruptive behaviour at school when he does attend, inability to focus or to sit still or to complete chores, intense sadness, and growing anger that he is unable to speak with his father longer than 10 minutes every week despite multiple requests. [REDACTED] has declined mental health referrals stating that his one session with a psychologist was not helpful. He has also expressed anger at service providers for their inability to keep him and his family safe which seems to be influencing his willingness to engage in mental health services.

Case Example: (Adult female [REDACTED])

A young female was at risk of a serious sexual assault after one of her relatives made a complaint about bullying. Several adult males in the camp were overheard making plans to sexually assault this young teenaged female. Some of her relatives also received death threats and were subject to a pattern of bullying from several adults in the camp. The [REDACTED] Manager [REDACTED] (employed by Wilson's Security), DIBP, The Salvation Army, Transfield Services and Save the Children Australia were all aware of the

seriousness of these threats and the pattern of bullying that had existed for this female and her relatives. They had also been notified in writing by the [REDACTED] Manager [REDACTED] [REDACTED] of the security concerns regarding this family (Case Review 144). As a result of these threats, this family and other associates were moved to different tents where they felt safer. However, within a few weeks of their relocation, the family was suddenly informed that they would be required to move back, in closer proximity to the asylum seekers that had previously threatened and bullied them. SCA was informed that this was a directive from DIBP and was provided with no notice to prepare the family for this transition. Despite the family's concerns regarding their safety, the family was relocated closer to the perpetrators of bullying and threats.

Unfortunately, their tent also leaked water when it rained in the same location that there were electricity boards, creating a potentially life threatening and hazardous situation. It was also very close to a generator creating difficulties with sleep, rest and the ability to engage in conversation due to the noise from the generator.

Since their return to their original tent, family members have not slept well due to fears for their own and their family's safety, and the presence of high noise levels due to the generator. This has progressively eroded their resilience and coping ability. [REDACTED] and his family members report that they are not getting adequate sleep and are fearful for their safety. They are also frequently on the "missed meals" list. Despite the urgent request placed by their child protection worker to move tents due to noise and the hazardous condition of water leaking over electricity boards; the family was not relocated for several weeks. Some of the

adolescents in the family, though they are still minors, have taken on the head of household role for the family out of necessity due to the absence of one parent. Though they are minors, they have been subjected to racism and persecution from adult asylum seekers on multiple occasions. [REDACTED] is often preoccupied with the safety of his mother and other family members. His mother insists on the need to be in the presence of another family member at all times due to fears for her own safety. [REDACTED] also has several younger female relatives at OPC3 who have also been subjected to death threats, bullying, and racism who he is also very concerned about (Evidence Documents: [REDACTED] IR 29, [REDACTED] IR 108, [REDACTED] Request 111, [REDACTED] IR 112, [REDACTED] IR 114, [REDACTED] IR 116, [REDACTED] IR 117, [REDACTED] IR 118, [REDACTED] IR 120, [REDACTED] Case Review 144).

Case Example: [REDACTED] and other children

In March, 2014 multiple children were subjected to an attempted assault by an employee. On this occasion, several children were returning from school on a bus driven from OPC1 to OPC3. [REDACTED] and the other children were singing and chanting. The bus driver asked them to stop and they did not do so. He then stopped the bus, and asked [REDACTED] to get off the bus which [REDACTED] declined to do. The bus driver then picked up a cricket bat and swung it at [REDACTED], in particular, with the intention to hurt him and other children on the bus. He was prevented from making contact with [REDACTED] by the other employees on the bus. Several of the children who were interviewed after the incident indicated that they believed that the bus driver was specifically harassing and targeting one particular student, although all students felt fearful and threatened during the incident. Although this bus driver was dismissed, it highlights the lack of

safety that children experience from employees that are hired to assist them and protect them. Nauru's inadequate child protection laws make it very difficult for people such as this employee to be prosecuted for assault. Furthermore, both children and their parents remained fearful of retaliation and of negative consequences to their asylum applications and to their daily living conditions which prevented them from pressing charges and pursuing a legal complaint against this employee.

Bullying of Children and Family/Cultural Groups

Children experience frequent incidents of bullying and social exclusion from other asylum seekers in the camp. As indicated in the previous case study of [REDACTED] his family and another family received death threats and a threat of sexual assault and did not feel safe to remain in the camp but were told that they had no choice. (Evidence Documents 9, 46, 87, 88, 101, 103, 108, 113, 114, 115, 117, 118, 119, 124, 139, 141, 142, 147, [REDACTED] IR #29, [REDACTED] IR #24, [REDACTED] IR #32, [REDACTED] IR #33, [REDACTED] IR #34, [REDACTED] IR #50, [REDACTED] IR #51, [REDACTED] IR 62, [REDACTED] IR 64, [REDACTED] IR 66, [REDACTED] IR #74, [REDACTED] IR #76, [REDACTED] IR # 87, [REDACTED] IR #96, [REDACTED] IR #100, [REDACTED] IR #101, [REDACTED] IR #102, [REDACTED] IR #112, [REDACTED] IR #114, [REDACTED] IR #115, [REDACTED] IR #116, [REDACTED] Wilson's Case notes #120). Due to the confined nature of the camp, children cannot separate themselves easily from the perpetrators of bullying. Adults that are bullied by other adults are also not able to move to a different tent (except in extreme situations with multiple incidents of threats documented) or separate themselves and their children. As a result, their ability to protect

their own children is compromised further contributing to worry, anxiety, guilt, feelings of unsafety, and general distress.

Case Example: [REDACTED]

[REDACTED] is a 16 year old male who resides at OPC3 with his father. [REDACTED] had numerous issues with aggression and anger towards his father and experiences depression. [REDACTED] was also the subject of repeat bullying by adult males in the camp that involved taunting, ridiculing, threats, exclusion and aggression. The bullying that [REDACTED] experienced was so profound that he experienced significant depression and needed to be removed to OPC1 to the SAA accommodation as he felt unsafe and too emotionally distressed at OPC3 in the company of the particular males and living with his father. Although he was allowed to stay at OPC1, separated from his father, for approximately 10 days, he had to return to OPC3 though he felt unsafe and distressed in the community. This placed the child at increased risk of mental deterioration and compromised his physical safety. (Evidence Document: 114, 115, [REDACTED] Document [REDACTED] [REDACTED] Case notes)

Case Example 2: Racial Tension and Threats

At OPC3, there are serious problems of bullying frequently as a result of race. On the 22 December, 2013 there was a fight that broke out near the showers at OPC3 because two males of a particular ethnicity were observed to be taking "long showers". This group of adult males began pushing and yelling at Wilson's Client Service Officers, resulting in one of the CSO's being assaulted by an adult male asylum seeker. Adult males threw rocks and hot drinks at the CSO's and two asylum seekers from another culture who happened to be there were also assaulted.

The families from this particular cultural group have expressed repeated concern regarding multiple death threats, threats of violence, and assaults that they have experienced. The majority of these death threats and assaults have been directed towards two adolescent males. The families from these cultural groups that were victims of the bullying and hostility were not safe and did not feel safe to stay at OPC3, and had to be temporarily relocated to the recreational tents for safety purposes. During the multi-stakeholder conference regarding this situation, it was agreed that single mothers had to have a separate area due to their increased vulnerability. However, as of 30 May 2014 this still has not occurred and the families that have been threatened with sexual assault, murder and violence have been moved back to the same area residing in close proximity with some of the perpetrators of these threats. This creates risks for safety and contributes to the deterioration of mental health for these families as a result of living with continual fear for their safety, helplessness, and bullying. (Evidence Document: [REDACTED] Case Review Safety and Security Risk #144). See also Case Study of [REDACTED] [REDACTED] for additional information.

Advocacy to Remove Children from Nauru OPC

Save the Children staff are actively discouraged from advocating for the removal of children by SCA management except in the most extreme cases of documented harm. This is because SCA management indicates that DIBP will not remove children and therefore any advocacy will not make a difference and will be a waste of time. Consequently, many children are living in knowingly unsafe circumstances to their short and long-term health in which staff are unable to intervene due to the unyielding and harsh stance of DIBP.

Lack of Appropriate Clothing and Footwear

Lack of appropriate clothing and footwear places child at risk of injury due to lack of proper footwear (many children are wearing adult sized thongs with holes placing them at risk and resulting in numerous foot injuries). Lack of appropriate clothing for the climate and environmental conditions: (children in long sleeved flannel shirts due to lack of other clothing in 45 degree heat and 90% humidity) placing them at risk for heat related medical issues. It should be noted that staff are not allowed to enter OPC3 without closed toe shoes for workplace health and safety reasons. However, children and adults have been forced to “make do” with thongs that are often broken, have holes or are not the appropriate size despite waiting months for replacement shoes. (Evidence Document #10, 50, 73)

There have been incidents where children have not been provided with appropriate or adequate quantities of underclothing placing them at heightened risk of sexual exploitation, shame and social isolation. These issues were only rectified after multiple written urgent requests were made over the course of several weeks or months (Evidence Document 71, 83, 84, 151)

Lack of Working with Children Checks for Local Employees

There are inadequate measures of safety of children because local Nauruan employees do not have “Working with Children” checks as no such system exists in Nauru. However, local Nauruan employees are employed as security guards, and in other capacities by all service providers. They have ongoing and close contact with children despite the fact that they are not checked to ensure they can work with children safely. It is our understanding

that criminal background checks are not always completed on local Nauruan staff thereby increasing the risk to children (Evidence Documents 41, 162, [REDACTED] Evidence document 145: Negotiating Draft Save the Children Contract, Clause 5.3.1 (c)). Furthermore, in the SCA contract, clause 5.3.1 (c), the contract does not require SCA to conduct criminal or other background checks on local employees stating that they only need to be conducted on local employees "where practicable" as quoted below:

- a. "The Service Provider must, at its own cost, ensure that all Service Provider Personnel who carry out work or perform duties under this Contract: are, and remain, of good character and good conduct;
- b. are considered suitable by the Department having regard to any issues identified in an Australian Federal Police background check and brought to the attention of the Department;
- c. have a current 'working with children' check or certificate from an Australian jurisdiction or equivalent from the Australian Federal Police, or in the case of any local Personnel, any similar check or certificate where practicable;

Furthermore, it is also our understanding that although Wilson's Security and Transfield Services employs Australian citizens to provide security and other services to children and their families, it does not require their Australian employees to have a "working with children" check but only a police check. This standard would not be acceptable in Australia for employees that had such close contact with children in a residential facility. It is particularly concerning given that there have been several employees accused of physical, verbal, and the sexual assault of children. The employees that work at the Nauru off-shore processing centre in OPC3 have unrestricted access to children and their families. They are in significant positions of power and authority and are responsible for leading child assault investigations. It is surprising that a company in charge of the security and welfare of so many children and their families in a high risk detainment setting would choose not to conduct a "working with children check" despite its availability to Australian employees and would limit their employee checks to criminal

records checks. Criminal record checks are less extensive and not designed to assess the level of risk that an employee poses to the safety of a child which is the purpose of a “working with children” check. It is equally disturbing that the DIBP would not require this additional check, as it would be required in all states in Australia. However, SCA management frequently state that “Australian standards apply in Nauru” and that all services are of Australian standard. This is a key area that is directly linked to the safety of children where an Australian standard is not applied.

As mentioned throughout this document, children have been the victim of sexual, physical and verbal assaults by employees.

Lack of Adequate Child Protection Laws

Limited child protection laws make it very difficult to prosecute crimes against children. Furthermore, as in Australia, children’s ability to testify in court is full of challenges adding to the difficulty of prosecuting abusers. Of course, this increases the likelihood that not only will victims not experience justice, but that they will have to continue to live in close proximity to their abuser. Furthermore, asylum seekers are continually told that regardless of what occurs in the detention environment, they will not be removed. This means that parents and children are aware that they are unable to be removed from their abuser (i.e. parent or another asylum seeker) (Evidence Document 108). This creates an environment of fear regarding retaliation for reporting incidents of abuse. Families and children are concerned that there will be ongoing retaliation as they will have to live in close proximity to their attackers even after disclosure of abuse. (Evidence Documentation 87)

- Families are fearful of reporting abuse by employees due to concerns that it will affect their asylum claim or that they will be subject to retaliation by other employees

Lack of Children's Bathrooms

- There are no children's bathrooms in OPC3 where children live despite parental requests for this increasing the risk of child abuse and exploitation by other adults and older children in the community (Evidence Document 97)

Assault of Children by Employees

- Children have experienced assault on a number of occasions by employees in addition to threatening and intimidating behaviour by employees (Evidence Document 62, 63)

1. Single adult females exposing themselves to male youth (Evidence document:)

There have been reports that certain single female asylum seekers have been exposing themselves to male youth. As a result of this, accommodations had to be moved, however, youth were subjected to this harassment before alternative arrangements were made. (Evidence Document:)

2. [REDACTED] Boat ID [REDACTED] (Evidence Documents: 15, 16, [REDACTED] IR #26). A young boy was verbally abused and physically assaulted by an employee in the presence of others.
3. [REDACTED] (Evidence Documents 91, [REDACTED] IR #11, [REDACTED] Transfield Investigation #15, [REDACTED] IR #118, [REDACTED] Wilson's Case notes #120,

the throats of people, lip sewing kits, and other sharp implements. Although these items were removed without any unrest, it shows the danger and risk of daily violence that children are subject in the OPC3 Camp and highlights that children were at risk of exposure to a riot and the potential murder of a security officer.

Furthermore, during the New Year's Eve search, the majority of children were kept from returning to the OPC3 camp, resulting in a separation from their parents and families at OPC1 for hours until approximately 10PM. Although the children were cared for by SCA staff and parents were informed that their children were safe and cared for, it still created great distress for some families and children as it resulted in a prolonged separation during a time of uncertainty and potential danger. There were a minority of children (approximately 30) that could not be removed from the OPC3 camp prior to the search. Although they were in proximity to their parents, they were also exposed to the potential of unrest while security officers cordoned off sections of the camp, restricted the movement of asylum seekers to a certain area of the camp, and systematically searched their accommodation. Not only did children see numerous security officers searching the accommodation, but they could also see a group of Nauruan police officers in riot gear waiting outside the perimeter of OPC3 in the event of unrest. For children who have been exposed to war, torture, and unjust treatment at the hands of security forces in their own countries, this was a frightening experience and a trigger for their past trauma, exacerbating feelings of unsafety, unpredictability and helplessness.

Physically Hazardous Conditions

Children at heightened risk of injury on Nauru and at Nauru OPC due to the multiple hazards that exist in the camp. Some examples are as follows:

Dog Bites

- Dog Bites while on the island outside of the Nauru OPC [REDACTED] IR #46). In May 2014, a Nauruan girl was killed after being attacked by wild dogs on the beach. Dogs continue to be a danger on the island.

Dengue Fever

- Dengue fever and inadequate clothing for protection. Although the risk of Dengue fever has been present since before the children were detained in Nauru, it was only when after a story appeared in the press of two asylum seekers contracting Dengue fever (in April 2014) that families were provided with long-sleeve clothing and mosquito netting. However, several children had serious allergic reactions to the netting requiring medical treatment. (Evidence documents 53)
- Asylum seekers are not allowed to have mosquito spray in their tents and are told they need to come to the entrance of the camp and apply it in the presence of security. Unfortunately, mosquito spray is continually running out leaving asylum seekers unprotected against the risk of Dengue Fever

Heat Exposure

- Exposure to excessive amounts of sun (Evidence Document 102)

- Children feeling faint and at risk of passing out from heat exhaustion and/or dehydration (Evidence document 55, 30 (under client: [REDACTED] [REDACTED]), 102, [REDACTED] IR #9, [REDACTED] IR #7, [REDACTED] IR #45).

Case Example

A bus with broken air conditioning, no open windows which was also blowing hot air on students was used to transport 11 students. This resulted in students quickly becoming nauseous due to the temperature of the bus which was approximately 50 degrees Celsius. After this safety hazard was brought to the written attention of Transfield by an SCA teacher, SCA was informed that the bus would continue to be used because there were already 9 buses out of commission and that although "Parts had been ordered, repairs have been prioritised to get biggest problems fixed first". (Evidence Document [REDACTED] R #9)

Unexploded Ordinance

Presence of unexploded ordinance on a walkway to child recreation area frequented by solo children, staff and family members (Evidence Document 153)

Inadequate Lighting

Inadequate lighting in newer areas of camp (i.e. restrooms and walkways) placing children at risk when required to use these facilities after dark

Unsafe Accommodation

Unsafe conditions in some areas of the camp – for example one family was living in a tent with water leaking when it rains in the same area of a large electrical box with multiple cords coming down from it (Evidence Documents 43).

Boiling Water Points in Child Recreational and Educational Tents

There were boiling hot water stations in the recreation tents where children routinely play without staff supervision that were reachable by even a 9 year old child. These stations remained for months despite complaints from parents and SCA staff, placing children at risk of burn injuries. SCA staff had to restrain children from helping themselves to this water on a number of occasions.

Lack of Access to Interpreters

- Lack of access to interpreters to conduct timely child protection investigations; follow up to client complaints, and the support of children's mental and physical well-being. Families are unable to communicate concerns related to their safety effectively and immediately which poses risk to their safety and security. Child protection workers have been delayed in their ability to assess, intervene and follow up on child protection issues due to the lack of interpreters posing further risks to child safety. Both adult and child case managers have been limited in their ability to provide consistent emotional support and follow up to adults and families. This lack of ability to see families and adults consistently for assessment and support directly contributes to the deterioration of their mental health, placing children at risk in the following ways: (Evidence Documents 6, 7, 12, 13, 24, 29, 37, 57, 67, 70, 89,)

1) Lack of access to interpreters contributes to the deterioration of parental mental health. This then places children at risk for inadequate supervision, increased family conflict and violence, emotional neglect, and verbal abuse.

(Evidence Document [REDACTED] IR #16, [REDACTED] IR #21, [REDACTED] IR #19). It also increases the risk of self-harm by parents or other adults in the household, further risking the child's exposure to self-harming incidents (Evidence Document [REDACTED] IR #16)

2) Lack of access to interpreters contributes to the deterioration of child mental health which places the child at risk for negative developmental outcomes as well as increases the risk of the child self-harming or engaging in challenging behaviours that place the child at further risk of isolation, aggression by peers/adults, and hopelessness (Evidence documents 20, 24, 36, 40, 46, 51, 61, 69, 72, 87, 89, [REDACTED] IR #3)

Delays for Medical Treatment

- Delays in medical treatments causing further mental distress to children and their parents and increases the risks of exacerbating health issues (Evidence documentation 27, 30, 85, [REDACTED] IR #4, [REDACTED] IR #7)

Case Example: [REDACTED]

On 25/3/14, [REDACTED]'s parents carried [REDACTED] who appeared "limp and non-responsive" to the security entrance of OPC3 where they encountered an SCA staff member and Wilson's Security Guards. The SCA worker found that although the parents believed

they were waiting for an ambulance, as she liaised with Wilson's Security guards, she was informed that an ambulance was "not available" and that the child and his parents would have to take a bus to IHMS which would not be available for at least 30 minutes. She noted that the Wilson's Security guards were "casual" in their approach to this child's serious health concern. After SCA staff was able to locate an SCA vehicle, the Wilson's Security informed her that they needed to escort her and the clients to IHMS but that they were short staffed and they did not have the staffing resources to do so at the time. Shortly after, they were able to find the staff to do so. This child and their parents were removed overnight to the SAA accommodation by IHMS for closer monitoring after their medical appointment. This is an example of how a shortage of both staffing resources and transport placed this child at medical risk. Furthermore, it contributed to parental distress and anxiety regarding the health of their child. The presence of Wilson's Security guards who are unwilling to react in a timely manner to a child health emergency also places children and their parents at risk for negative health outcomes. (Evidence Document: [REDACTED] IR #7)

Delays to Mental Health Assessment and Treatment

Delays in mental health services due to waiting lists or delays in appropriate assessment of mental health conditions resulting in continued mental distress and increased risk of the deterioration of a child or parent's mental health (Evidence documentation 3, 12, 68, 76, 81, 89, 90, 98, 152)

- Outbreaks of gastroenteritis place young children/infants and pregnant women, in particular, at heightened risk for negative health outcomes.

Inadequate Nutrition and access to food

- Inadequate nutrition (milk was only available for a very short time), lack of healthy snacks, and food that is either too spicy or too bland for children and not to their liking resulting in decreased appetite. It should be noted that although the food is prepared by the same company for both staff and asylum seekers and sourced at the same time, the quality and variety of the food available to asylum seekers is much less than what is available to employees. (Evidence document 8, 56, 158m [REDACTED] IR #40, [REDACTED] IR #108)

Lack of Emergency Procedures/Plans/Protocols

- Lack of emergency procedures/plans and protocols and the lack of training of staff in how to manage emergencies (Evidence Document 164)

Inadequate Training of Security Personnel Regarding Child Protection

- Lack of training of security guards in reference to child management strategies and on sensitivity to mental health and trauma issues (Evidence Document [REDACTED] IR #59, [REDACTED] IR 10)
- No training, policies or procedures have been provided to Wilson's Security Guards, and other stakeholders on the processes of reporting child protection concerns, indicators for child protection issues until at least April 2014 despite the fact that children have

been at the Nauru OPC since September 2013. (Evidence Document: [REDACTED])

Document 123 PM Update 22 Dec 2013).

- Lack of training and skill in child interviewing and child protection investigations by Wilson's security guards resulting in additional distress to children being interviewed and a compromise in the ability to collect complete and accurate information which is necessary to protect children (Evidence Document 32, [REDACTED] Public Prosecutor Statement 52 for [REDACTED], [REDACTED] IR #56, [REDACTED] IR 128, [REDACTED] IR 129, [REDACTED] IR 130).

Case Example of [REDACTED]

[REDACTED] is a 13 year old boy who has multiple mental health issues and is at OPC3 with his father. [REDACTED] has very challenging behaviours and has been the subject of frequent bullying, is seen as a "bad kid" in the camp, and is very socially isolated. On one occasion, several women reported that they observed him receiving oral sex in the camp from another boy but when confronted, he fled and denied it. According to these women, they reported this information to Wilson's Security. The response of the Wilson's Security officer at the time was to direct the women to complete a complaint form and to identify the boys in question so he could make note of their identity. No further complaint or incident report was received by Wilson's Security as a result of this incident by SCA; reflecting the inadequacy of the ability of some Wilson's employees to respond to child protection concerns. Furthermore, an incident report in reference to another incident with [REDACTED] was submitted by Wilson's Security approximately 12 days later. In this report, Wilson's

Security indicated that they observed [REDACTED] engaging in sexualised behaviours in public with another boy which included touching each other's groins (over clothing), massaging their own groins and "wrestling" with each other. Although two Wilson's Security officers wrote two separate incident reports describing this behaviour, they allowed it to continue and did not stop these boys. The incident report that they wrote also incorrectly identified a much younger child as the second boy creating serious concerns about this child's safety and whether [REDACTED] was coercive with a much younger child. However, upon further investigation by SCA staff, it was noted that the identity of this younger child was incorrect and that the other boy was closer in size (and most likely in age) to [REDACTED], however could not be identified with certainty. This further demonstrates the inadequacy of training and skill to Wilson's Security officers to intervene in inappropriate sexualised contact between children and to conduct timely and accurate child protection investigations. This gross inadequacy places children at heightened risk for exploitation and abuse. It also almost caused [REDACTED], a 13 year old mentally distressed child, to be inaccurately regarded as a boy who was a safety threat to much younger children (Evidence Document [REDACTED] IR #128).

Case Example 2:

An adult female asylum seeker disclosed to an SCA child protection worker that approximately 10 days prior, she observed older children "having sex from behind" with several younger children, and that other people had informed her that this had occurred for several nights. This woman reported it to Wilson's Security Guards what she had witnessed

and their response to this was for her to "write down" a report. Although all stakeholders are required to complete incident reports on significant safety issues, no incident report or notification was received by SCA staff from Wilson's Security guards. This reflects the gross inadequacy of some Wilson's Security staff to respond to child safety issues and act to keep children safe. (Evidence Document [REDACTED] IR #130)

There is also a lack of appropriate child facilities to conduct child protection investigations resulting in additional stress to families and children, and a compromise in the ability to gather complete and accurate information which is necessary to protect children

Potential for Harm by other Community Members

- Due to close proximity with other community members increases the potential for child abuse/exploitation as parents do not have the ability to supervise their children 24/7 nor choose to live in an area that is safer, nor move their children away from people they do not feel safe with. (Repeated threats or violence need to occur and be well documented by service providers before parents are allowed to move to different areas of the camp. Even in the exceptional circumstance that families are allowed to move location, they will still live in close proximity to these other community members that are aggressive and retaliatory towards them as they eat in the same mess hall, and in most instances share the same showers and toilets. (Evidence Documents 28, 33, 46, 67, 87, 101, 103, 108, [REDACTED] IR #16, [REDACTED] IR #24, [REDACTED] IR #29, [REDACTED] IR #104, [REDACTED] Case Review Safety and Security 144)

Deterioration of Parental Mental Health

The deterioration of parental mental health places children at risk for mental health issues due to their parent's compromised ability to parent, to provide emotional support, and to manage problematic behaviours (Evidence document 51, 92, 94, 102, 119, [REDACTED] IR #22, [REDACTED] IR #93, [REDACTED] IR #95, [REDACTED] IR #97, [REDACTED] R 106, and [REDACTED] Medical Request #44)

Provision of education, recreation, maternal and infant health services

Maternal and infant health services are inadequate as evidenced by the transfer of 8 pregnant families to Australia in March 2014. All the women were 8 months pregnant at the time. DIBP stated that it was because there was no obstetrician on the island.

Currently, we have one infant on the island that does not have access to early childhood services as they have not been developed or implemented yet.

Lack of adequate foot care, clothing for maternity. There were two pregnant women who needed maternity clothing because their normal clothing was too tight and constricting the developing baby's movement. Despite written requests from IHMS indicating the medical urgency of appropriate clothing, it took several weeks before they were provided to these women.

The provision of education services has been largely inadequate due to the lack of appropriate facilities (loud tent with high noise levels, not enough chairs where children had to stand or sit on the floor, lack of air conditioning, and temperatures that were 45 – 50 degrees Celsius) (Evidence Document 94). The Education Team has inadequate supplies for children to

be able to complete homework (i.e. lack of books, lesson plans, writing implements, paper). In addition, children do not have an area in their own accommodation where they can concentrate on their homework and education, as there is only one "room" and it is overcrowded from all family members residing there.)

Since April 2014, all classes are not held in air conditioned classrooms at OPC1, which is a significant improvement. However, there are still insufficient facilities for children. There are only two bathrooms for approximately 200 children to share. There are no recreational spaces (outdoors or indoors) where children can engage in free play during classroom breaks or lunch. This again makes it quite difficult for children to focus and is not developmentally appropriate. There are several children each week that do not come to any classes. (Evidence Document 154). Children also do not have access to toys, educational activities outside of school, books/bedtimes stories, art/craft supplies that they can use in their tent or outside of the structured recreational time. Children are complaining of boredom and are spending their time wandering around the camp, or engaging with other children in aggressive ways as they lack positive things to do with other children and with themselves. (Evidence Document 117). Furthermore, parents have difficulty teaching and engaging children in productive ways to spend their time and to build positive relationships because they lack toys and things that they can play and do with their children.

Children frequently spend their time playing with rocks and dirt, or fighting by throwing rocks at each other as rocks are one of the few things that are in abundant supply. Of course,

this results in many incident reports detailing injuries to children who have been hit with rocks or accidentally injured themselves with the sharp rocks that they are playing with.

Educational Curriculum Not Meeting Individual or Special Needs

Education is not tailored to individual needs creating learning challenges for children and contributing to frustration. Most of the children at OPC3 are English as a Second Language learners and are very limited in their ability to understand English. Furthermore, due to the inconsistent schooling, past trauma, and mental health issues; children are not at their expected academic or social level for their age. However, there is no special needs curriculum that is being used for these special needs children. In addition to this, there are children who are suspected of having developmental disabilities, speech and language problems, and intellectual disabilities. However, testing has not been provided to obtain an accurate diagnosis of the child's condition and their special educational needs. This places them at further risk by denying them their ability to receive appropriate intervention and education services. (Evidence documents 3, 12, 41, 52, 76, 81, 98, 101, 150, 152)

Supervised Recreational Activities

The SCA recreation team has been chronically understaffed for several months. Due to the staff shortage, employees from other teams have been asked to assist with the supervision of recreational activities. Many children complain of bullying, fighting, and their exclusion from activities to staff. However, the recreational staff is unable to closely supervise all children due to staffing shortages or facilitate in resolving the fighting and aggression that comes up between children. As a result, some children are becoming increasingly angry and distressed

and feeling that there is no-one to protect them from bullying from their peers. This is further contributing to the deterioration in their mental health. Furthermore, the recreational program does not have adequate resources such as toys, crafts, and athletic equipment to use with children. Consequently, the few items that exist are fought over intensely contributing to additional problems between children, and additional episodes of bullying and exclusion. The recreational staff are often purchasing their own supplies (i.e. craft supplies and yarn) and bringing them over, due to the resource shortages of the organisation.

As discussed elsewhere in this submission, there are extremely high noise levels in the recreational space because all the various activities occur in one large tent that has been sectioned into different areas. However, as the areas are open, the noise travels making it difficult for children to have meaningful conversations or to calm themselves. This only contributes to stress levels for many of the children. (Evidence documents 52). Furthermore, because there is no ability to have privacy in a particular area of the recreational tent, some girls do not feel able to participate in the recreational program. This is because their cultural and religious beliefs prevent them from being in the same area as males. This contributes to additional social isolation for these females which then negatively impacts their mental health.

Limited Excursions outside OPC3

As there continue to be serious issues with staffing shortages with both SCA and Wilson's, as well as a shortage of transport vehicles, very limited excursions occur outside of the camp for the children. This only creates additional feelings of helplessness, distress, and

frustration due to the overcrowded nature of the camp and the limited ability for privacy or recreation.

The separation of families across detention facilities in Australia

Despite the willingness and ability for family members in Australia to host children and adults that are currently detained, the current practices of DIBP result in the separation of family members from each other. It is particularly concerning that there are children who have parents living in the Australian community who have been denied the ability to live with them.

- [REDACTED] is a mother and has either a brother or a son at OPC2 in the Single Adult Male area.
- Children have been frequently subjected to prolonged separation from family members across Australia (Evidence Documentation 34)
- [REDACTED] Boat ID [REDACTED].

[REDACTED] is living at OPC3 with a substitute caregiver despite the fact that she has a parent who is living in Australia. [REDACTED] has been diagnosed with post traumatic stress disorder and major depression according to IHMS medical records. Her substitute caregiver's mental health is poor and child protection concerns have been raised about the substitute caregiver's ability to care for [REDACTED] appropriately. This substitute caregiver has attempted to self-harm and has participated in voluntary starvation. At times, [REDACTED] has not wanted to attend school out of concern for her caregiver's mental health. (Evidence Documents [REDACTED] IR #36, [REDACTED] IR #37, [REDACTED] IR #38, [REDACTED] IR #39, [REDACTED] IR #40, and [REDACTED] IR #43). There have also been allegations that [REDACTED] has been sexually

abused by an unknown abuser at OPC3 however as [REDACTED] has avoided disclosing any information to service providers, these allegations could not be substantiated. However, it is unclear regarding where [REDACTED] is reluctant to disclose ongoing abuse due to feelings of fear, shame, or guilt as would be common among children who have been sexually abused, or if it is because the allegations are not true. The risk remains that [REDACTED] is continuing to be sexually abused but is too afraid to disclose this due to the lack of support she is receiving from her caregiver and potential fear regarding the consequences of disclosure. It is concerning that DIBP refuses to allow this child to be reunited with her parent in Australia despite the multiple child protection concerns that continue to exist for this child.

- [REDACTED]

The children of this family have been separated from their father for several months. Although he was originally at Nauru, the father's health was clearly poor and he was medically evacuated to Australia for treatment for several months, separating him from the rest of the family with very limited phone contact between them. The children and their mother wanted to be with their father desperately while he was undergoing treatment for months but were denied this. DIBP and IHMS chose to return the father to Nauru despite his and his family's concerns about his ability to be in Nauru with his ongoing health conditions. Unfortunately, shortly after his return, the father continued to have significant health problems and was subsequently carried out of OPC3 on a stretcher, causing the children and relatives great worry and distress. Shortly after this incident, he was medically evacuated to Australia, where he remains.

The children and their mother have asked repeatedly to go to Australia as other families have been allowed to do as it is causing them serious distress to remain separated.

However, DIBP has refused to reunite them despite the documented deteriorating mental health of all family members. The children have stopped attending school and have become more and more socially isolated. The mother's mental health is extremely poor to the point where she is unable to provide support, supervision and comfort to the family due to the state of her mental health. Although the children have an adult sister in Australia, DIBP will not allow them to stay with their father or their sister. (Evidence Documents 93, 128, 131, 133, [REDACTED] Document: Case notes for [REDACTED], [REDACTED] Document 147 IMP Review for [REDACTED].

- [REDACTED] has a mother in Australia (Evidence Document 92)
- [REDACTED], a single father, was separated at Christmas Island from his young sons due to the need for medical treatment despite being asked not to be separated. (approx. 45 days)

[REDACTED] Family Boat ID [REDACTED]

[REDACTED], a 7 year old boy was separated for approximately one month from his mother and sister due to his sister's need for medical treatment in [REDACTED]. He was left in the care of his father who had serious mental health problems where he absconded from the centre on numerous occasions and assaulted another minor, resulting in an overnight stay in jail and assault charges. [REDACTED]'s sister was separated from her father and brother while she received medical treatment in [REDACTED].

When families are transferred to another in or out of Nauru, it is done secretly and families are not informed in advance. They are prevented from contacting family members on the day of transfer, from communicating with others in the camp or via social media. Although most people are very happy to be leaving Nauru, it causes unnecessary distress as they are unable to receive social support and are unsure when or if they will be returning to Nauru.

Boat ID

's mother is currently living in Melbourne on a bridging visa. He is at Nauru OPC3 with his father who has been emotionally neglectful of and has not provided adequate supervision. is also suffering from mental health and behavioural problems, bullying by other children and has been the victim of assault and threats by other adult asylum seekers. (Evidence Documents IR 92, IR 93, IR 94, IR 95, IR 97, IR 98, IR 99, IR 100, IR 101, IR 102, IR 104, IR 105)

The guardianship of unaccompanied children in detention in Australia

- It is not clear how guardianship duties have been delegated to children in Nauru. (see email discussing this).
- UAM's have not been seen by their guardian or had their needs assessed adequately. The guardian has not making recommendations in their best interests as evidenced by their self-harming activity and the negative mental health state that their detainment contributes to. (Evidence Document 99 IR #3). Concerns were raised on 19 October 2013 regarding the "marked deterioration in the coping ability and resilience"

of the UAM's however they were not medically evacuated out until 22 November, 2013 after their mental health had deteriorated further.

- UAM [REDACTED], Boat ID [REDACTED], self-harmed multiple times, even while she was on high watch by Wilson's Security. She was medically evacuated to a mental health facility in [REDACTED] on 22 November, 2013. She remained at Nauru OPC3 over an extended period of time despite a previous history of self-harming behaviour on Christmas Island, anxiety attacks, depression, hopelessness and self-harming behaviour. She had two of these self-harming episodes while she is under the close supervision of Wilson's Security and staying in the SAA accommodation for closer observation. The isolation, uncertainty, and lack of appropriate facilities for her needs that she experienced on Nauru further contributed to the deterioration of her mental health and compromised her safety. (Evidence Document #99, [REDACTED] Document 131 Case Discussion Meeting 20 11 2013)
- UAM [REDACTED] was identified as a UAM on 4 October. As a result, she had to be kept in the SAA section which is socially isolated from her peers and all others in the OPC3 camp. She was not transferred back to Australia until 22 November, 2013 despite threats of self-harm, lack of attendance at school, depression and other mental health concerns. (Evidence Document 92, 96, 99, 100)

UAM's were forcibly detained at Nauru OPC for an extended period of time in 2013 despite DIBP's awareness that there were no adequate facilities for them. This resulted in them required to be socially isolated from their same age peers and when they did participate in school/recreation they had restricted freedom of movement (not able to leave the

recreation tent unless to attend the toilet) as compared to other same age peers and needed to be escorted by Security Guards everywhere further stigmatising them and differentiating them from their same age peers. The lack of appropriate accommodation and program for UAM's contributed to the deterioration of their mental health (Evidence document 92, 99, 100, 111, 129, 136). UAM's were required to stay in the same accommodation where sick asylum seekers were medically isolated.

UAM [REDACTED] Boat ID [REDACTED] was sent to Nauru from CI. The age determination process conducted on CI incorrectly listed him as 18 resulting in his transfer to Nauru. On 3 December 2013, DIBP formally notified that the child was actually 16 years old. He had been inappropriately sent to Nauru living with single adult males when, in fact, he was 16 years old placing him at risk of abuse/exploitation and without the additional protection required for unaccompanied minors under the UN CRC (Evidence Document 129, 136)

Assessments conducted prior to transferring children to be detained in 'regional processing countries

- No information is provided regarding the mental health or psychosocial functioning of the people transferring into Nauru to SCA staff.
- Children with histories of self-harm have been transferred to Nauru (i.e. [REDACTED] had a history of self-harming on Christmas Island)
- Children have been transferred here despite full knowledge that they have relatives in Australia (or even parents/siblings in some cases)

Additional impacts on how detention affects the health, well-being and development of children

Dehumanisation of children:

One of the most prevalent impacts that the institutionalisation and detention of children is seen is by the dehumanisation of children.

One way that this occurs is the practice of referring to children by their “boat numbers” instead of their name. Unfortunately, this is a common practise that occurs among ALL service providers including SCA, a child rights organisation which seeks to show that even the most fervent advocates of child’s rights begin adapting practises that are prevalent in the institution despite awareness of the detrimental impacts of these practises. In emails with service provider organisations and between service provider organisations, all asylum seekers (including children) are often referred to ONLY by their boat numbers. (Evidence documents:) Furthermore, in face to face conversations with children, service providers will seek to identify who the children are not by asking them and taking note of their name, but by asking them for their boat number. Service providers will then approach other employees to discuss the child by referring to the child only by their boat number. In fact, when employees are asked to provide the child’s name, it is a common occurrence that they are unable to because they did not seek out that information. Furthermore, when organising groups of asylum seekers to get on a bus to OPC1 for school, SCA teachers can often be heard calling out children by their boat number as a direction to get them on or off the bus. This also occurs with other service providers that are seeking to transport asylum seekers somewhere or to locate a particular

asylum seeker. In official incident reports, asylum seekers are also often referred to only by their boat number. Children are impacted by this as they identify themselves as a number more than by their name. Children have disclosed in meetings with SCA staff that they are "just a number" and "it's like we are animals and not people". Children have also often been seen drawing pictures and signing them not with their name, but their boat number, and calling themselves by their boat number instead of their name. Some of these pictures by children signed by their boat number are displayed in SCA and IHMS facilities. (Evidence Documents 27, 28, 38)

Social Isolation from friends/family/social support systems

- Although children and families have been at OPC3 since September 2013, children did not have access to the gym or internet so that they could keep in contact with family and friends overseas until after December 2013 further increasing their social isolation from loved ones and negatively impacting their emotional wellbeing (Evidence Document 77, 121, 127). Although they have access, the times are extremely limited and frequently cancelled if there are issues with transportation, short staffing, or other activities take precedence. In addition, frequently the internet runs extremely slow taking over one hour to load the page to sign in for email, further restricting children's ability to maintain contact and social support from family and friends overseas. (Document Evidence: 73, [REDACTED] IR #1, [REDACTED] IR #2, [REDACTED] IR #3)
- Very limited phone contact (Evidence Document 100, [REDACTED] Request Form 111, 127)
- Very limited internet times

- Inability to receive phone calls
- In particular when being moved out of the detention centre, unable to say "goodbye" to people in the camp, exchange details or inform loved ones where they are being moved to

Dignity, Shame and Self-Worth

Conditions at the camp create issues in relation to human dignity. Children that are bedwetting have to sleep in the same bedding that is urine stained when laundry/water shortages occur. In addition to concerns regarding sanitation, this impacts a child's mental health by creating issues with stigma, shame and social exclusion. (Evidence Document 75)

██████████ is a 13 year old male who bed wets. His father is a single parent. Despite written requests from STTARS (the torture and trauma service) regarding the need for more sheets and detergent to clean the room due to ██████████'s bedwetting, this was not provided. (Evidence Document 75)

A 13 year old female, ██████████ had only two pairs of underwear and only one she could use while on her period. She felt shame because she was an adolescent girl and each day she had to wash her underwear and hang them to dry in front of her father which was not culturally appropriate. She went for months without additional underwear despite multiple written requests. (Evidence Document 71, 84)

████████████████████ had his private parts showing in public because the only clothes that he was given were two pairs of short, one of which was badly torn. As he

was not provided with any underwear, his private parts were exposed with the torn shorts.

(Evidence Document 151)

Lack of access to religious practises/services

Although there is currently a multi-faith prayer tent, for several months no prayer space existed and families were required to use their own room. This posed problems for certain religious groups, as it was not culturally appropriate for males and females to pray in the same space. Some groups of different religions are unable to engage in religious ceremonies at anniversaries of deaths or other important occasions, resulting in distress, guilt and shame for not being able to perform their cultural and religious duties. As mentioned elsewhere in the submission, even Easter Sunday church services were unable to be held for asylum seekers due to the pastor's "unsafe" foot wear.

Child Mental health

As mentioned throughout the submission, detainment at Nauru OPC3 contributes to profound distress, and risks to the health and safety for the children that are detained here. SCA staff see a marked deterioration in the mental health of children and their parents the longer that they are detained at OPC3.

A weekly internal SCA meeting "Vulnerable Minors Meeting" (VMM) is held to discuss particular children of concern. In addition, a weekly multi-stakeholder meeting to discuss "Complex Behaviour Management" for particularly vulnerable asylum seekers is held. Minutes

of these meetings are submitted to provide a background on the mental health and complexity of problems that many children experience.

There is a pressure from SCA and other stakeholders to remove children from both of these lists as quickly as possible and to only refer the most urgent and significant of mental health/behaviour concerns. Consequently, the number of children that are placed on VMM and CBM do not reflect the frequency or magnitude of mental health problems that exist in the general child population at OPC3.

Mental health and behavioural problems in children

(Evidence Document 21, 36, 40, 61, 69, 72, 87, 89, 98, 101, 102, 104, 114, 115, 120, 126, 127, 128, 131, 132, 145, 158, 159, [REDACTED] IR #1, [REDACTED] IR #2, [REDACTED] IR #3, [REDACTED] IR #43, [REDACTED] IR #54, [REDACTED] IR #63, [REDACTED] IR #64, [REDACTED] IR #66, [REDACTED] IR #68, [REDACTED] Medical Request #70, [REDACTED] IR #72, [REDACTED] SME Management Plan #73, [REDACTED] IR #74, [REDACTED] IR #78, [REDACTED] IR #86, [REDACTED] IR #90, [REDACTED] IR #94, [REDACTED] IR #96, [REDACTED] IR #98, [REDACTED] IR #99, [REDACTED] IR #101, [REDACTED] IR #102, [REDACTED] IR #110, [REDACTED] SCA Referral #112,)

1. Lack of adequate mental health care and psychosocial support (waiting lists for STTARS, clients complaining of not being seen by IHMS consistently, waiting list for relaxation groups) (Evidence Document 76, 81, 89, [REDACTED] Medical Request #88)
2. Lack of an appropriate space for a psychosocial assessment meeting resulting in difficulties communicating with people and providing support to them as a lack of privacy makes it difficult for people to share their concerns)

3. No ability for parents to seek out better mental health care for their children appropriate to their needs as they would have the option to do in Australia (Evidence Document 81, 89, 101)
4. Uncertainty and hopelessness (Evidence Document 99)
5. Lack of constructive things to do with their time (Evidence Documents 93, 121)

Double vulnerability of single parents:

- 1) When they need to attend medical appointments, mental health appointments/excursions in order to improve and maintain their mental and physical health, there are no child minding services. A parent has to rely on the goodwill of neighbors which is not always possible. Furthermore, if a child or parent has mental health issues, it is less likely that they will have a robust support system, as they are often avoided and stigmatised in the community because of the problems they or their child are exhibiting. If they were in Australia, they would have the freedom to make connections with other groups of parents or people with common interests for this type of assistance. Furthermore, many of the asylum seekers would have relatives in Australia who could assist whereas they are isolated from a natural support system in detention. This leaves the child more vulnerable because the parent may be reluctant to engage in treatment due to child supervision issues, or because the child has to be left in the care of strangers that are not well-known or particularly trusted by the parents. On one occasion, a single mother

complained that some of the men that were helping her with her child during the day were then expecting sexual favors from her at night. As a result, she felt harassed and very unsafe and even more isolated. She then left her son unattended on a number of occasions, resulting in further risk to her son.

- 2) Parenting is more difficult for single parents as they have less social support than a two parent family. Single parents are at increased risk to the effects of stress due to a lack of parenting support, stigmatisation within the community, and mental health issues as a result of the increased stress. This makes children in turn more exposed to stress, family conflict and at risk of abuse/neglect (Document Evidence 92, 93, 130, 131, 135).

- As children develop challenging behaviours due to their deteriorating mental health, increased anger, and helplessness regarding their detainment; they also begin to experience more stigmatisation from the community by peers and their adult caregivers. One child was the subject of multiple threats from multiple parents due to his challenging behaviours further exposing himself and his mother to trauma, risk of harassment and violence, and social isolation. (Evidence Document 87)
- Children are exposed to a number of events that are traumatic occurring frequently in the community such as physical fights, threats, and yelling between adults, medical emergencies such as people collapsing, adult mental health episodes (panic attacks, emotional breakdowns, self-harming attempts) resulting in 1) further exposure to trauma 2) further triggers to past traumas 3) further distress, worry and fear for their

and DIBP's written assurance that they would do so. Nor has DIBP provided a timeframe or further follow up of when this will occur (Evidence document 58)

Additional Evidence Documents

The additional evidence documents that have been enclosed with this submission are to provide the Australian Human Rights Commission with a comprehensive understanding of the mental health and behaviour of the children at Nauru OPC3, their family circumstances, and the services they receive which we believe provides comprehensive evidence of the systematic violation of their human rights and a history of wrong-doing in the Nauru Off-Shore Processing Centre.

Meeting Minutes for the following meetings have been submitted for this purpose:

Child Protection Team Meeting

Vulnerable Child Team Meeting

Complex Behaviour Management Team Meeting (formerly referred to as Preventative Meeting)

Operations Manager Meeting Minutes

Wilson's Case Notes

Wilson's Daily Intelligence Notes

SME Case Plans

Incident Reports

Recreation Team Notes

Email Correspondence