DAL (darwin Airport Lodge) is fenced all around and fences have been filled in with shade cloth so they couldn’t interact with public. Very few open spaces for play and the place is elevated and set up on various levels with walkways throughout. The elevation means kids can run under buildings and walkways in an environment where snakes and spiders are prolific. Kids have also been observed running and jumping over railings as they rush around the centre.

Rooms are generally without any real privacy. At one point very small rooms were housing families of three and so there would be a bunk with an extra mattress to lay on the floor at night. It was cramped and there was no other space for parents to go if they needed space and no space inside for decent play. It was outside on walkways for separation from each other as family members but then you have all the other detainees with you. Even larger rooms had no privacy as they housed larger families within.
During visits I sometimes overhead Serco officers discussing detainees in public area in negative ways, one incident involved an officer speaking loudly to another officer about the older kids on the bus returning from school and how badly they behaved. He stated "they need a good belting" The amount of play space provided was small compared to how many children might be in the centre and toys were not readily available. Even toys brought in by visitors or donated often didn't reach the children. In terms of living some kids stopped eating because the food was unfamiliar mass produced and in some cases unsuitable. Parents expressed desire to cook for themselves because it was not only better for them to provide for their children dietary habits but also a normal activity in daily life which is very important in recovery from trauma and interactions with children I often found they were usually highly affected by their boat journeys. The need for normalisation and capacity for parents to parent is very important in child development and this environment did not offer that at all. Basic things like a child growing out of an items of clothing became difficult as you needed to fill request forms in for new items and the time taken to actually receive it was quite considerable for simple items such as shoes, Children often asked parents for items or to do certain things and parents were powerless to respond, causing family issues as children began to see parents very differently in terms of how a child may seem normal parent child relationship and you could observe a breaking down of some of the relationships.

Issues between adult men and UAM's sometimes got out of control and in one incident a adult man when after a 15 year old boy because he was flirting with her on the bus from school. I observed Serco and DIPB staff stand back and the incident escalated to people getting injured as more and more joined the fight. The access to Trauma and Torture was limited as IHMS appeared to be acting as a gatekeeper to people accessing services and people that had disclosed to myself of other workers with me about specific trauma and torture and had said they wished for counselling were not receiving it because IHMS when we followed up deemed that it wasn't a trauma and torture issue because it hadnt been disclosed to them or their mental health workers. The removal of personal property sometimes cause people to become distressed particularly the rules around photographs. Not being allowed to have a personal picture of a family member for some caused significant distress especially if that person was missing or dead.

a couple of years ago a rape victim who was 16 had been transferred to the DAL from CI away from alleged attacker and placed in the centre where family and friends of the alleged attacker resided. She became subject constant harassment as did her parents and eventually she refused to leave her tiny room and her parents had to bring her meals. Her father got into altercations with other detainees and it took over a month to convince the department to have her moved. The sense in the darwin centres is that all decisions to be made took considerable time because it seemed everything was being micro managed from canberra and so everything had to be cleared at that level creating a bottleneck and so increased time frames for decisions to be actioned.
The darwin centres appeared very differently run to other states and territories and there seemed to be more autonomy in places in melbourne or even curtin than the darwin centres.

I think the impact for children is dangerous. their is a need for children for uninterrupted capacity for families to normalise and be proper families with the family roles to remain intact and reduce the eventuality of family disfunction.

They need ability to explore safely and be creative as well as see their parents as parents with their capacity for decision making for their family to be undiminished. They need privacy as much as their parents and also with issues around over crowding there is also risks of abuse or other such traumas becoming an issue.

Access to toys and to be children are important, developmental theory tells us that. After a period of time in detention when parents had severe mental health issues or severe trauma and torture and the detention environment exacerbated that through an excess of daily triggers you saw children sometimes take on parental roles as the parents were no longer able to do so.

I did see programs come and go that were beneficial but because of the temporary nature of positions in terms of all the fly in and fly out workers there was no continuity and a highly motivated individual would begin something only for it to fall apart at the end of their 3 or 6 month time in that environment.
The impact of the length of detention on children

- Does the timeframe of the detention have a particular impact on children? For example, is there any difference in the ways in which a child responds to immigration detention after 1 week, 1 month, 3 months, 6 months, 1 year? Please give examples.

Generally I noted that in this environment children tended to manage reasonably well in early stages, they believed it was temporary and it was new and something to explore. As time progressed however post 2-3 months you saw marked changes in children in terms of their care and management and often self harm of older children wasn’t an uncommon event.

One young boy stopped eating, he cried for his mother to cook something familiar and in a matter of a week dropped half his body weight. I saw children become disengaged and wouldn’t interact and in the UAM’s I often saw a rise in aggression or extreme withdrawal all signs of Trauma and torture issues being continuously triggered. When children hit a 12 month mark you sometimes didn’t recognise them from the person you met when they arrived in detention. One little boy would let you touch him despite being very engaged and happy when I first met him 6 months prior and when he saw a uniform would completely withdraw. One child was fighting everyday with his parents saying they were useless and blamed them for his situation in detention. He said they couldn’t make any decisions and what were they, they were not his parents.
I did meet with many children who experience trauma before arrival, particularly Sri Lankan, Rohingya and Afghan children. Though also many other children ended up being quite traumatised by boat journeys themselves or in some situation when they were seeing from others in detention or absorbing parental or other detainee trauma in that environment because there was simply no escape from exposure of other people’s trauma. One girl (12 years) told me she had dreams about being beaten and raped even though that had never happened to her. She had repeatedly heard stories from women in centre around her and became affected by what she was hearing. One girl was terrified of water as she had fallen from the boat during the transfer to naval vessel and had to be rescued. Some were affected significantly by the boat tragedies the day of the CI boat tragedy every TV in every room was on watching it and one man was screaming because 11 of his family was on that boat. I was in the centre on that day and children present had no escape from watching what could have potentially been their boat be destroyed. Each subsequent disaster was the same.

Measures to ensure the safety of children

- Can you describe the measures to protect children from harm?
- Is there support for children who may be suffering from trauma either as a result of previous life experiences or in relation to the experience of detention?
- Please describe the security checks for children as they enter and leave immigration detention facilities. Do you think these checks are appropriate for children?
Provision of education, recreation, maternal and infant health services

- Is formal education available to children? Please describe the types of education that are available. Is it appropriate for the age, the educational level and needs of the child?
- Are there playgrounds and play equipment for children?
- Can you describe the medical services and support that is available for expectant mothers and new mothers? Can you describe the medical support for babies and infants? Do you think these services are appropriate?

Education is available through local schools in Darwin. The issues raised by children tend to be the fact they are so distinct from other students. Things like no money for tuck shop going on a different bus to and from school. Can't hang out with non detainee school friends after school is finished and play. The lunches given to kids was daily sandwiches which most children were highly unfamiliar with and in some cases could not tolerate... Lunches were provided by Cafeteria in centre.

Medical services in the centre I think were limited in some senses.... IHMS staff were not often trained in issues around In trauma and torture some cases children with health issues had difficulties accessing health care, after 4.30 health care personnel were off and so if someone got sick Serco contacted a triage phone line, if the IHMS person on call didn't see it as a problem they were often offered Panadol and sent back to rooms. I met with a pregnant woman at one point who went with pains before due date and was told to go lie down and rest via triage line and ended up miscarrying her child. In a normal situation the woman would have taken herself to an after hours gp or hospital and received treatment. She may have still lost the child but she would have been in a position where she could have done everything possible.
Other issues were around unfamiliarity with health system here and that with trauma and torture issues often memory is affected significantly. Often I would see nurses get angry at clients in once case slamming a door in the face of a mother and her child because she stated she had told the woman multiple times what she needed to know and the woman was repeating the question. Other times when I was in a private interview with a client about missing family overseas or another private issue some medical practitioners would burst in saying and pull the person out saying they needed blood taken and that it takes priority. Sometimes the detainee had no idea what was happening. Often detainees expressed confusion about their health status and when I spoke to health practitioners they would get annoyed and say they had spoken to the person about the issue, and when explained that the memory for some people with significant trauma is impaired and capacity for linear thinking sometimes as well, you may get understanding or you may get a derogatory comment. It was hit and miss..... they too were often transitory workers and fly in fly out for 3 month periods in some cases. I think that the issue around provision of adequate baby materials such as clothing and other items necesssary were not very good and I saw groups such as dassan providing parents with additional items because they had exceeded their "quota"with what they were allowed.
The separation of families across detention facilities in Australia

- Do you have experience of family separation due to immigration detention?
- Are you aware of instances of family separation as a result of immigration detention?
- What forms of contact are available for families to maintain communication?
- What efforts were made to reunite children with siblings and parents?
- What are the effects of family separation on children?

I did see families arrive with sometimes nephews or nieces arrive as part of family group and When some males turned 18 they were placed in NIDC with limited visit arrangements take place. In Domestic violence cases you saw separation with no view in some situations that children still needed to see removed parent even in supervised situation.

Some instances when family members came on separate boats days apart they wouldnt be placed together, with the logic when asking immigration why, well if they wanted to be together they would have traveled together. In some cases they would have a family member across the country. Or I did observe a family where the immediate family unit of mum dad and children, were placed in Community detention down south and the male brother remained in NIDC.

One girl I observed getting very distressed being seperated from a particular uncle who she had a very strong relationship. She wasnt allowed to visit NIDC being a child but the visits were harder to take place for him to come to the DAL for the visit.
The guardianship of unaccompanied children in detention in Australia

- What care and welfare services are available for children who arrive in Australia without parents or family members?
- Are the supports adequate?
- Is closed detention appropriate for unaccompanied minors? How can they be best supported?
- The Minister for Immigration and Border Protection is the legal guardian for unaccompanied children in detention – is this an appropriate arrangement?

In particular for young men in detention I observed that there was some supports in place but when placed with families you often saw some clashes and animosity. It was often forgotten that for many young Afghan men they had been sent alone because they were targets for kidnapped or had suffered kidnap. In many instances they had no knowledge of where some or in some cases any of the family were. One young man that stood out for me was I never forgot his desperation to know what happened to his mother and siblings. They disappeared after he had fled and he blamed himself for it. He had heard rumours they had been beheaded when the Taliban couldn't find him. Another young man was searching for his mother as well and told me how he had been kidnapped and sexually tortured by the Taliban before escaping and making his way to Pakistan where he met cousins who helped him get out of the country. It was often not very well understood by services in detention that for young males in Afghanistan kidnap was a common event and many boys were often used as dancing boys or sexual slaves. Even if they fled into Pakistan boys described that Taliban often hunted them around Balochistan province where there was a high population of refugees. These boys found disclosure of sexual abuse very difficult given they were young adolescent males in the process of developing their own sexual identity and Islamic Shia's as well. Disclosure was rare and only occurred when there was a sense of absolute safety and trust with a particular individual. In situations of high turnover of detention staff, getting that relationship is almost impossible. Supports need to have continuity to be useful otherwise it becomes a long list of broken attachments so that eventually the UAM's don't engage at all because that person to will be moving on in a short space.
Assessments conducted prior to transferring children to be detained in ‘regional processing countries’

- Can you describe the pre-transfer assessments conducted prior to transferring children to regional processing countries?
- Are the pre-transfer assessments appropriate for children?
- Does the Department of Immigration and Border Protection respond appropriately to the findings in the pre-transfer assessments?

No don’t know enough about that
I think changes haven’t been enough. I think the environment in itself is completely inappropriate for anyone particularly trauma and torturer sufferers. Community detention did improve but the offshore actions I think are creating a new set of problems and damage to a whole other generation. Children are without their normal familial networks and supports, and though children have a certain amount of resilience with constantly disrupted attachments they lose the capacity to heal and recover from their experiences. Strong attachments are necessary for anyone and in particular with children who are still in development. It decreases capacity to “bounce back”: I think there is a long way to go with compliance to laws regarding children and we are having an extreme detrimental change to children’s well being. Current arrangements hold no benefits to any detainee currently. There is no value to the process and I have deep concerns as to what we are doing to other human beings regardless of the border they cross to get here......