Silove, D., Austin P. & Z. Steel

Abstract
The final decades of the twentieth century were accompanied by an upsurge in the number of persons fleeing persecution and regional wars. To stem the flow of asylum seekers, several countries in the west introduced policies of deterrence, including detention. Although many countries detain asylum seekers, Australia has been unique in establishing a policy of mandatory, indefinite detention. The impact of prolonged detention on the mental health of asylum seekers drew commentary from mental health professionals soon after the policy was introduced, but administrators and politicians disputed the assertion that detention was a factor in causing or exacerbating mental disorder. This overview examines the impact of mandatory, indefinite detention on the mental health of asylum seekers by drawing on evidence gathered during Commissions of Inquiry, from observations of health and mental health professionals who have worked in detention centres, and from the small body of systematic research undertaken among immigration detainees. The data from all sources converge in demonstrating that prolonged detention has adverse mental health and psychosocial impacts on adults, families and children. Recent studies suggest that the mental health effects may be prolonged, extending well beyond the point of release into the community. The Australian experience offers general lessons to health professionals worldwide about the importance of remaining vigilant in protecting the rights of vulnerable groups, and more specifically, to ensure that the traumas that cause mental suffering in refugees are not compounded as a consequence of immigration policy decisions in recipient countries. Documentation and research can be vital in achieving policy change in these settings.

Key words asylum seekers • deterrence • human rights • immigration detention • mental health • refugees

Steel, Z. & Momartin, S, & Bateman, C. & Hafshejani, A. & Silove, DM

Abstract
Objective: To document the psychiatric status of a near complete sample of children and their families from one ethnic group held for an extended period of time in a remote immigration detention facility in Australia.
Method: Structured psychiatric interviews were administered by three same-language speaking psychologists by phone to assess the lifetime and current psychiatric disorders among 10 families (14 adults and 20 children) held in immigration detention for more than two years.
Results: All adults and children met diagnostic criteria for at least one current psychiatric disorder with 26 disorders identified among 14 adults, and 52 disorders among 20 children. Retrospective comparisons indicated that adults displayed a threefold and children a tenfold increase in psychiatric disorder subsequent to detention. Exposure to trauma within detention was commonplace. All adults and the majority of children were regularly distressed by sudden and upsetting memories about detention, intrusive images of events that had occurred, and feelings of sadness and hopelessness. The majority of parents felt they were no longer able to care for, support, or control their children.
Conclusions: Detention appears to be injurious to the mental health of asylum seekers. Implications: The level of exposure to violence and the high level of mental illness identified among detained families provides a warning to policy makers about the potentially damaging effects of prolonged detention on asylum seekers. In their attempt to manage the international asylum crisis, it is important that Western countries do not inadvertently implement policies that cause further harm.
Mares, S. & Jureidini, J.

Abstract

**Objective:** This paper reports the clinical, practical and ethical issues arising in the assessment of 10 consecutive referrals from a remote Immigration Reception and Processing Centre to a child and adolescent mental health service (CAMHS) between February and August 2002.

**Method:** The 16 adults and 20 children (age range 11 months to 17 years) were comprehensively assessed by allied health clinicians and child psychiatrists. All children were also assessed by the statutory child protection agency.

**Results:** There were very high levels of mood disturbance and post-traumatic symptoms in this population. All children had at least one parent with psychiatric illness. Of the 10 children aged 6-17 years, all (100%) fulfilled criteria for both post-traumatic stress disorder (PTSD) and major depression with suicidal ideation. Eight children (80%), including three pre-adolescents, had made significant attempts at self harm. Seven (70%) had symptoms of an anxiety disorder and half reported persistent severe somatic symptoms. The majority (80%) of preschool-age children were identified with developmental delay or emotional disturbance. Few clinically based recommendations were implemented.

**Conclusions:** Very high levels of psychopathology were found in child and adult asylum seekers. Much was attributable to traumatic experiences in detention and, for children, the impact of indefinite detention on their caregivers.

**Implications:** Multiple obstacles to adequate service provision are identified. Adequate clinical intervention and care was not possible. The impact on involved clinicians is discussed.

D. Silove & M. Fazel
Download: http://www.bmj.com/cgi/content/full/332/7536/251

Abstract

More than 7 million of the world's 17 million refugees remain "warehoused" under conditions of confinement, raising serious human rights issues about the treatment of people fleeing oppression. The British policy of expanding detention centres for asylum seekers adds to this concern, making it timely to consider what lessons might be learnt from Australia's recent reversal of its mandatory detention policy.

Medical observations in Britain concur with those from Australia, with attending doctors noting that detainees, particularly those held for long periods, suffer from profound hopelessness, despair, and suicidal urges. Doctors face complex ethical challenges in balancing the responsibility to provide care without discrimination to a vulnerable group against the risk of becoming complicit in a system that by its very nature causes psychological harm. Questions remain whether it is possible to offer effective psychiatric treatment in a setting—prolonged detention—that is the root cause of the mental disturbance. Doctors also face the ethical dilemma of how to respond to requests by authorities to certify asylum seekers as fit to be detained or to be forcibly removed.

The lessons for Britain are clear. Australia represented the vanguard of the detention policy in the developed world, yet its present administration has acknowledged the failure of that approach. There is ample evidence that models of community accommodation for asylum seekers lead to better mental health outcomes and that humane but rigorous forms of monitoring can still be instituted in these settings. By continuing to document the psychosocial impact of detention, the medical profession is well placed to add its expert voice in shaping humane immigration policies.
Abstract
A 6-year-old child, held in detention with his parents pending the outcome of their application for refugee status, manifested psychological distress by repeated episodes of refusing to eat or drink. This case presented clinical and ethical dilemmas for health professionals who were constrained from acting in the child’s best interests by government policy of mandatory detention.

Hutchinson, T. & F. Martin

Abstract
This article seeks to analyze recent findings of mental illness of children in detention centers in the context of Australia’s human rights obligations under the U.N. Convention on the Rights of the Child (the CROC). This article discusses the Australian immigration legislation and the principles under the CROC and then examines the extent to which Australia is adhering to its human rights obligations in regard to these children. It suggests that further harm is being inflicted on the children, and questions whether this situation is in the long-term interest of the Australian people, as the majority of asylum seekers including children will be granted refugee status and released into the community.

The arguments put forward in this article are substantiated further by the findings of the recently released report of the HREOC Inquiry titled A Last Resort? This report was released by the Australian Human Rights and Equal Opportunity Commission, under the powers given to it in the Human Rights and Equal Opportunity Commission Act 1986 (Cth). The Commission’s evidence was obtained through a variety of methods, including public hearings and receipt of submissions from government agencies, medical experts, and other interested persons. As part of this process, representatives of the Commission visited all immigration detention centers throughout Australia. The Report states that the overwhelming evidence before the HREOC Inquiry demonstrates that the Commonwealth failed to take all appropriate measure to protect and promote the mental health and development of children in immigration detention over the period of the Inquiry and therefore breached the CRCQ. However, Attorney General Philip Ruddock has continued to insist that while there were problems, the policy of detaining children is sound, and the Australian Government has reiterated that the detention policies have been effective in deterring refugees from accessing Australia’s borders.

This article argues that the detention of children is a method that contravenes human rights norms and that Australia’s system should not be emulated by other nations seeking a solution to refugee issues.

Mares, S., Newman, L., Dudley, M. & F. Gale

Abstract
Objective: To record observations made by the authors on a series of visits between December 2001 and March 2002 to two of Australia’s immigration detention centers and to consider the mental health consequences of Australia’s policy of mandatory immigration detention of asylum seekers for families and children.

Conclusions: Parents and children in immigration detention are often vulnerable to mental health problems before they reach Australia. Experiences in prolonged detention add to their burden of trauma, which has an impact not only on the individual adults and children, but on the family process itself. Immigration detention profoundly undermines the parental role, renders the parent impotent and leaves the child without protection or comfort in already unpredictable surroundings where basic needs for safe play and education are unmet. This potentially exposes the child to physical and emotional neglect in a degrading and hostile environment and puts children at high risk of the developmental psychopathology that follows exposure to violence and ongoing parental despair. Psychiatrists have a role in advocating for appropriate treatment of these traumatized and vulnerable parents and children.

Key words: asylum seekers, Australia, children, families, mental health, trauma.
HREOC

Abstract

The National Inquiry into Children in Immigration Detention was announced in November 2001. It was established to consider whether Australia's immigration detention laws and its treatment of children in immigration detention comply with the United Nations Convention on the Rights of the Child.

The Inquiry received substantial evidence about the treatment of children in immigration detention centres between 1999 and 2002.

The information contained in this publication provides a summary of some of the important issues, findings and recommendations of the National Inquiry into Children in Immigration Detention. It is not an exhaustive account of all the information contained in the Inquiry report.

Crawley, H. & Lester, T.
Download: https://www.savethechildren.org.uk/en/54_2344.htm

Abstract

Increasing numbers of asylum-seeking children are being detained by the UK Government for immigration purposes. Little is known about the reasons for their detention, the length of time they are detained, or the impact it has on their well-being. There is growing concern that this use of detention contravenes a range of international human rights standards relating to the treatment of children, and has a negative impact on already vulnerable children.

No Place for a Child examines the experience of children who are detained for the purpose of immigration control. Based on case studies of children who have been detained in the UK, and interviews with professionals, it explores:
• the government’s practice in relation to the detention of children
• the impact of detention on children
• alternatives to detention
• safeguards to protect children and prevent detention becoming prolonged.

The evidence in this report suggests the need for an entirely different approach towards children who are subject to immigration control. The report makes a series of recommendations that place children’s needs and interests at the centre of decision-making. It also puts forward a series of urgent recommendations to help children who are in detention now.
Abstract

The practice of imprisoning asylum seekers who flee to America to escape torture, abuse, and persecution in their own countries has damaging effects on the well-being of these individuals.

In the first systematic and comprehensive study examining the health of detained asylum seekers, the Bellevue/NYU Program for Survivors of Torture and Physicians for Human Rights found that the mental health of asylum seekers interviewed for this study was extremely poor and worsened the longer that individuals were in detention.

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