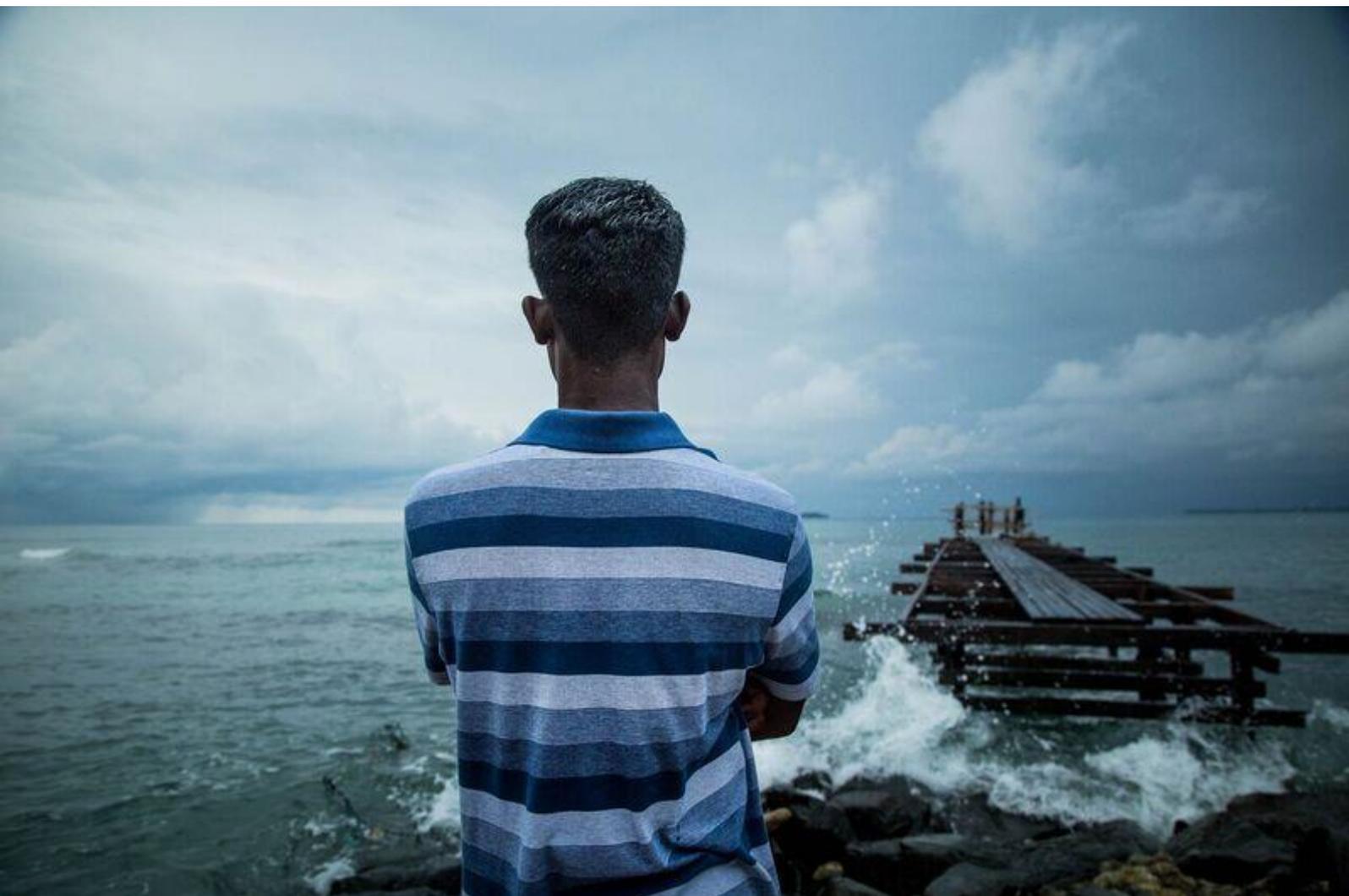




## Refugees on Manus: an impending mental health crisis

Report from the ACFID Fact-Finding Mission to Manus Province, PNG to bear witness to the conditions and welfare of refugees and asylum seekers sent by the Commonwealth of Australia



**28 November 2017**

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**Purpose of the Fact-Finding mission**

The Australian Council for International Development (ACFID), the peak body for Australia's humanitarian and international development agencies, sent a fact-finding mission to PNG from 22 to 27 November 2017. The purpose was to bear witness to conditions of refugees and asylum seekers brought to Papua New Guinea (PNG) by Australia, and to have a humanitarian focus given a protest being carried out by refugees at the former Australian and PNG detention facility at the Lombrum naval base. The Panel comprised the Rev. Tim Costello, World Vision's Chief Advocate, Mr Marc Purcell CEO of the Australian Council for International Development (ACFID), Ms Meg Quartermaine, Oxfam's Humanitarian Manager, and two Documenters, Mr Andrew Blyberg, and Mr Nick Ralph. The panel travelled with the permission of the Government of PNG and consulted throughout.

The views expressed here are those of the authors and do not necessarily reflect the views of ACFID, World Vision, Oxfam or of ACFID Members. Any errors or omissions are the authors.

In Port Moresby we met with the Chief Migration Officer Ms Solomon Kantha and his Deputy Ms Esther Gaegaming; the Australian High Commissioner Mr Bruce Davis and representative of the Australian Department of Foreign Affairs and Trade (DFAT) and the Department of Immigration and Border Protection (DIBP). We met with the General Secretary of the Catholic Bishop's Conference Fr. Victor Roche, who has visited the detention centre at Manus, and we met with a dozen refugees moved to Port Moresby for medical treatment.

On Manus island we met with the Provincial Police Commander, Mr David Yapu, Manusian landowners to ascertain their views, and with refugees. We also spoke with local church leaders and health workers. Other international agencies also informed our discussions. We also had a chance to hear views from a national politician regarding Australia's role on Manus Island.

We met with dozens of refugees during the course of our trip and acknowledge and thank them for their preparedness to share their stories.

Our visit coincided on 23 and 24 November with the forcible removal of men on the Lombrum naval base who had been protesting since its closure on October 31. We witnessed their removal from the base over these two days to the transit centre in East Lorengau and were able to talk with some of the men on 24 and 25 November.

On 27 November we visited the East Lorengau Transit Centre and spoke with a number of refugees.

We were able to drive through Westhaus and see for ourselves the state of facilities and incomplete construction on the building site. We were able to drive by and view Hillside transit centre.

We were relieved that what could have been a deteriorating standoff is over. However, the crisis for the refugees has simply shifted location from one part of Manus to another.



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*"We know that these men are suffering physically and mentally. From our conversations with refugees we are hearing stories of deep sadness, these men are frightened and they don't know what's going to happen to them."*

*"Their future has been held in the balance for four and half years, surely that is long enough. Their well-being, their care is the responsibility of the Australian Government. Australia needs to step in and work with parties to ensure the safety and wellbeing of these men."*  
- Meg Quartermaine, Oxfam

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### Observations of the Panel

#### **1. The refugee situation in PNG is a protracted crisis**

The closure of the facilities on Lombrum Naval Base on 31 October triggered an immediate crisis whereby the refugees and asylum seekers, already experiencing quite high levels of trauma and mental health distress, felt compelled to stay as opposed to moving to a new location where they could not be assured of their safety or wellbeing. While the immediate humanitarian crisis that ensued in regard to their critical lack of water and food in the closed facility was ended by the forced removal of men to the East Lorengau Transit Centre, we believe that there is a protracted crisis for the refugees in PNG and an associated, large impost on the Government of PNG. Three critical factors have combined to create the protracted nature of this crisis:

1. the length of time people have been held by the Commonwealth in PNG: four to four and half years;
2. the deterioration of their mental health, and in many cases their physical health and wellbeing, exacerbated by lengthy deprivation of freedom of movement outside of Manus Island and in Port Moresby; lack of case management; and the lack of resettlement options;
3. the conditions and systems are not adequate to meet the needs of people with complex mental health and medical needs and a draw down in services, particularly case management, has exacerbated this situation since the closure of the detention centre on October 31, 2017.

#### **2. The Commonwealth of Australia is not fulfilling its responsibility to care for the refugees and asylum seekers held in PNG.**

We note the statement made by the PNG Immigration and Border Security Minister in his media release of 8 November 2017, that the refugees in PNG are the Australian Government's responsibility:

"domestic and international law is that Australia is still responsible for any person transferred to PNG under the Regional Resettlement Arrangement (RRA) as they have initially sought asylum in Australia and Australia has an obligation as a signatory to the 1951 Refugee Convention. This responsibility cannot be transferred or passed on to PNG. These persons were only transferred to PNG for the purpose of being processed to determine their status as either genuine refugees or not and if they have any complimentary protection needs".

"Further, the RRA is very clear that PNG does not have any obligations on refugees refusing to settle in the country and non-refugees that cannot be returned. Australia maintains the responsibility of finding durable outcomes for persons who cannot reside or remain in PNG."

Given the observations we made and claims we heard regarding the mental health of people, it is our view that the Commonwealth of Australia is not fulfilling this responsibility.

#### **3. The Commonwealth of Australia's Humanitarian Strategy and Policy is being flouted**

DFAT's *Humanitarian Strategy* states that Australia will adhere to humanitarian principles, many of which we believe are being violated regarding the refugees and asylum seekers held on PNG. These include:

1. **Respect for humanity:** The Commonwealth is not respecting humanity by its mistreatment of people;



2. **Respect for international law:** The Commonwealth is flouting international law by maintaining an offshore detention regime, as many UN bodies have reported recently;
  3. **Placing people at the centre of humanitarian assistance:** The Commonwealth is treating people badly with prolonged detention and restricted movement exacerbating existing Post Traumatic Stress Disorder and other mental ill health;
  4. **Being risk informed:** The Commonwealth is falling to provide effective case management to the refugees in PNG and continues after four and half years to hold them under restriction in Manus and Port Moresby, so risks are being poorly managed for their mental health and other needs.
  5. **Doing no harm:** The Commonwealth of Australia is doing harm to refugees by holding them in a developing country first in detention and then with restricted movement for four and half years causing damage to their mental health;
  6. **Accountable to affected communities:** The Commonwealth has placed a significant complex case load burden of approximately 600 people on an impoverished provincial hospital in a developing country. Secondly, the refugees should be managed against Australian Government's humanitarian policy, but they are not.
  7. **Effectiveness and innovation:** the regime put in place by the Commonwealth is ineffective because it breaks people down mentally over time and the Government doesn't take account of this fact.
4. **PNG is not a viable place of resettlement for a vast number of the refugees and asylum seekers.**

The Panel finds it extraordinary that Australia, which is one of the wealthiest countries in the world, is placing these types of demands on the PNG Government which has incredible pressures as a developing country to support its own populations' health and education. It undermines all of Australia's rhetoric about being a good neighbour and does substantial damage to the relationship between our two countries and peoples. As described below, there are numerous practical reasons as to why refugees should not be settled in PNG including high rates of unemployment, subsistence livelihoods for much of the population; communal land tenure inhibiting land ownership for outsiders; the lack of social security system, trauma counselling, public housing and settlement services for refugees.

#### Recommendations to the Australian Government

1. **An Australian Government, humanitarian medical assistance (Ausmat) team, focused on mental health as well as medical conditions, should immediately visit refugees in Port Moresby and Manus to triage the most urgent cases.**
2. **Urgent mental health and medical cases must be immediately medically evacuated to Australia for treatment; and all other refugees should be brought swiftly to Australia to allow for medical assistance and appropriate psychosocial support while settlement options are being pursued.**
3. **Australia should take responsibility for facilitating and fast-tracking the resettlement of the refugees, whether that be to Australia or another safe country. This includes: fast-tracking processing of resettlement to the US; fast-tracking an agreement to resettle refugees in New Zealand and asking New Zealand to take more than the 150 people**



currently offered; and resettling in Australia any refugee that cannot be resettled elsewhere, including those who are too ill to be resettled in the US.

4. Australia should fund trauma counselling services for refugees resettled in New Zealand for a mutually agreed period.
5. Judicial review of adverse Refugee Status Determination decisions should be immediately carried out by Australia, with the permission of the PNG Government, with a focus on those that declined initial assessment and merit review (such as some Iranians). Any successful review of adverse findings and granting of refugee status may assist in increasing the likelihood of resettlement. Those who are unsuccessful in their Refugee Status Determination and are unable to return to countries such as Iran which prohibit involuntary returns must be allowed to remain in Australia. They must not be left to deteriorate in semi-detention in PNG.



Image: Incomplete construction at West Lorengau Haus



**Observations of the Panel:**

The following section details what the Panel saw and were told about the conditions of the refugees and asylum seekers on Manus Island.

**Aftermath of protest at Lombrum Naval Base**

1. We interviewed some of those removed on November 21 and 22 and heard stories of iron bars used to beat them; punches thrown and threats to use bolts cutters to cut their arms, and the naval centre ransacked. Refugees reported to us that police were unmarked by insignia and were not identifiable.
2. A senior national politician told us that the Commonwealth of Australia officials directed the police operation.
3. Of concern was independent doctors on standby over four days were prevented by authorities from treating the men and Médecins Sans Frontières (MSF) were later to issue a statement calling for access. We can verify that some people who were hit punched and beaten did not receive medical checks afterwards by the Commonwealth. We were told by a range of people that it appears that IHMS, the Commonwealth medical contractor, did not treat all who had been injured and three days later people who were injured had not been seen. The removal of men from the naval base to the East Lorengau Transit Centre on the Thursday and Friday led into the weekend when IHMS staff are not contracted to work. We visited the centre on Sunday 26 November and confirm that they were not present.
4. We visited the East Lorengau Transit Centre with permission and spoke with a number of refugees. They asked us if we were doctors and one said he had been beaten on the back and was in pain. Another approached us and asked us to come to see his friend who had mental illness and had not been out of bed for 25 hours and he was not sure if he had been drinking or eating. Another who had been in the protest said he was mentally unwell and asked us for help. One had a bandaged hand and asked if we could look at it and we said we could not. We asked why the contracted medical provider IHMS had not seen it and he said that he had made a request and had been told that he needed to fill in a form and wait three days.
5. We had met other refugees outside the centre who had been struck in the head and the back but not seen by IHMS and we were able to connect to the independent MSF team.
6. Some of those who were forcibly removed also reported that their personal belongings were stolen during the process.
7. We visited the West Haus accommodation and saw for ourselves as we were curious to verify Minister Dutton's assertions that it is ready for occupation but 'for polishing the tiles'. We saw some complete dongas, but around half the camp is still under construction and a building site with concrete mixers, earth moving material and open drains set around a large excavated area. It is surprising that in a Commonwealth funded facility, that is clearly still

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*"The big issue at this moment is that many people who were injured yesterday are deeply traumatised and need psychological treatment. It's very hard to accept being beaten by someone after nearly 5yrs in prison. I have not seen deeper suffering than seeing humans humiliated."*

*- Behrouz Boochani*

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being built, people have been brought there to live and this raises concerns and a question as to whether Australian Work, Health and Safety legislation and Comcare requirements are being ignored.

8. People held in West Haus reported to us that there are around eight showers and eight toilets for approximately 190 men but two of the toilets are overflowing with effluent. Electricity supply was intermittent. Laundry facilities are not fully operational. There are no recreation areas that are functioning it was reported. The latter claim raises further concerns about the mental health and wellbeing of these individuals and what 190 people held there will do 24 hours a day? There is no outside seating and no shade. There is confined space around the Hillside site and no space for recreation.

### A mental health crisis

9. The Commonwealth of Australia's practice of prolonged detention of people and (since 2016) under restricted movement on Manus Island, has meant refugees and asylum seekers have had their liberty deprived for four and half years on average.

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*"For four-and-a-half-years I feel like a prisoner, I did not do any crimes, I did only ask for asylum in Australia.*

10. Further to reports by the 2014 Cornell report and the UNHCR which documented people having Post Traumatic Stress Disorder and many with significant depressive illness, we can confirm that we witnessed people that demonstrated behaviours of depression and other mental health issues. Reference was made by some to other people that we did not meet, who manifested signs of alleged psychotic behaviours. Refugees and asylum seekers we spoke to were clearly still deeply disturbed by the violent outbreak of 16-18 February 2014 at the Regional Processing Centre.

*"32 years civil war in my country, we move to lots of places, so we lost our full life in my country so we wanted a good peaceful country.*

*"I hope that Australia will find a third country to settle us."*

*-Raj, from Sri Lanka*

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11. The Commonwealth has failed to provide trauma counselling services for large group of people, many of whom were already suffering pre-existing trauma from the conditions from which they fled from in their country of origin.

### A medical burden on Manus

12. While a GP clinic is often adequate in a normal setting, in a remote country province of a developing country, dealing with people with complex health needs who need specialist and expert treatment and case management is beyond the scope of the service. The Commonwealth's provision of medical services is inadequate to deal with a potentially complex caseload of approximately 600 additional people with high rates of mental health needs in a developing country. IHMS the Commonwealth's contracted health provider, we were informed has a GP service with: senior medical officer, two GPs, an emergency medical doctor and a para medic, and three primarily health care nurses, and five mental health nurses, a visiting psychiatrist and ancillary staff. The staff do shift work and attend between 9-1 and 2-5 five and half days a week but it has no coverage on weekends, and no outreach and little emergency treatment capacity. On weekends refugees must raise medical and



health and mental health needs with DIBP sub contracted local security. Any more serious, chronic or emergency needs are referred to the provincial hospital.

13. A big issue is the availability of pharmaceuticals – IHMS are not dispensing pharmaceuticals in the main - and refugees are referred to local hospital and pharmacy. Panadol and sleeping pills seem to be the default prescription. In a remote province, obtaining expensive and specialist pharmaceuticals is difficult. The cost of pharmaceuticals is high, and most must be purchased at the local pharmacy from the allowance of 100kina a week they receive which is inadequate for expensive medicines. This allowance has not been paid for three weeks in some cases for those protesting at the Naval base it was claimed, meaning that many may not have had the opportunity to purchase prescribed medicines.
14. Since October 31, 2017, it was reported to us that the Commonwealth has shifted the burden of care from anything that cannot be treated by IHMS the GPs and nurses to a very under resourced provincial hospital that has less than forty beds, and needs to cater for a population of approximately 60,000 people.
15. Having an additional case load of approximately 600 men placed on it with allegedly little or no consultation or adequate staffing and specialist resources is not sustainable at all. For example, despite potentially high rates of poor mental health among the refugees, the Provincial hospital has only one mental health worker for the entire population. There is no equipped ambulance service with medics on Manus Island. Reportedly at the time of our visit the Hospital was at capacity with the sole mental health worker on leave.
16. The Commonwealth does allow movement of people to Port Moresby upon referral from the Provincial hospital. There are over 100 people residing there mostly in two hotels with local security paid for by Australia, many are there for medical reasons. However, while not clinicians, we met with people in Port Moresby who claimed conditions that had not been resolved for various reasons in the PNG health system: e.g. colo-rectal and renal problems. These conditions had been ongoing for periods for up to a year for some.
17. It was further reported to us that the Commonwealth's health provider's IHMS staff were ceasing dispensation of non-prescription drugs in Port Moresby and while we could not verify we reported this to the Australian High Commission
18. It was reported to us that there was a very ill man who was 'paralysed' in a hotel in Port Moresby and had not been able to leave his room for eight months; and it was claimed he had suspected MS [multiple-sclerosis]. Another man, it was reported, was a diabetic in hospital in Port Moresby and had been languishing there for many months. While we could not verify these cases due to security preventing access, we reported them to officials from DFAT and DIBP at the Australian High Commission requesting they check.
19. It was reported to us that the Commonwealth appeared to have a current practice of not having medical evacuation to Australia for serious cases thus increasing risk of deterioration in medical condition.
20. Local medical authorities reported a lack of effective coordination and information sharing between Commonwealth health contractors and PNG medical authorities on health issues.



Given the pre-existing illnesses or congenital conditions and rising rates of mental ill-health, including anecdotal reports of psychosis, this lack of coordination increases the likelihood that health needs are not being addressed effectively.

21. Several men we met in Port Moresby claimed that since October 31 they had not been escorted to medical appointments by IHMS anymore indicating there may be a drop off in the level of service, and that they may have been taken by security instead.

### **The View of Papua New Guineans**

22. In Port Moresby we met with the Chief Migration officer and his Deputy and whilst protecting the confidentiality of what we discussed we draw attention to the position of the Immigration Minister of PNG who publicly states that resettlement of refugees is Australia's responsibility. Everywhere we went there was unmistakable disappointment from officials and citizens about the perception that Australia had walked away from its responsibilities for care and resettlement of the refugees. In this we agree: Australia remains responsible and accountable for the welfare of the people seeking asylum and refugees held in PNG.
23. We met the Provincial Police Commander David Yapu who led the forced removal of men in the Naval base and when we asked what message he wanted us to take back to Australia, he said that it remained Australia's problem to find resettlement options as it was an unfair burden on Manus. He pointed out that he had only 55 police officers for a population of 60,000 plus now hundreds of refugees in town many with mental health problems, and said he had suggested that all refugees stay inside after 1800 hours. This raises serious concerns about maintaining safety for the refugees and local people.
24. Papuans New Guineans we spoke to feel Australia has not acted like a good neighbour with the refugee arrangement of PNG. We heard consistently from the people of PNG that the responsibility for the refugees is Australia's. The people of Manus bear no ill will to the refugees but feel sorry for them. However, Manus is a very poor province and people have a hard struggle to live subsistence lives, with no social security and a poor hospital.
25. We find it extraordinary that after five years of Manusians hosting Australia's refugee problem that Australia has not made more efforts to improve the health system in Manus for the whole population - they remain with a hospital with less than 30 beds for a population of 60,000 people.

### **Resettlement prospects in PNG**

26. As humanitarian and development agencies, we are familiar with the challenge that PNG Government services must meet their needs of their own population. PNG is a developing country – 154 on the UN Human Development Index so it is a very poor country for the bulk of the population. It has a level of public services ill- equipped to meet the health and other needs of a complex case load of refugees and asylum seekers.
27. Since October 31, 2017, we ascertained that there does not appear to be any access to vocational training, no interpreters, no other activities, no English or Tok Pisin (PNG Pidgin) lessons that might assist resettlement; in short, these men are being left without any



support or pathway to effectively resettle or support their wellbeing and already have parlous mental health.

28. Land ownership is communal, and outsiders have no rights, so it is not possible for refugees to resettle on Manus and acquire land. This holds for much of the rest of the country too. Marriage into the community does not automatically bestow title to land. Permanent residents visa takes many years to provide citizenship and reportedly family reunion under such visas in PNG only exist after eight years.
29. We met a refugee who had moved with permission to Port Moresby to escape Manus, and because of lack of funds he had located himself in a dangerous settlement community. He lived with three others. It was reported to us that they are fearful of being killed as they are living as outsiders in the community where random violence is a daily occurrence.
30. Moreover, employment prospects in PNG for the refugees and asylum seekers are little to negligible we heard from the Department of Immigration. It is claimed by refugees that the Commonwealth's job provider has not been able to provide employment. PNG Immigration also confirmed only a handful of refugees had found employment, and in one case a refugee who found a job was not granted the relevant work permit and so lost the job.
31. The same refugee said he and his three colleagues in Port Moresby are searching for work but have found none as the job provider of the Commonwealth had not called them and did not respond to calls. The lack of job opportunities for refugees in a country that has a large informal economy, high rates of unemployment and a young population hinders resettlement. The PNG government made it clear to us that to resettle one must have a job. All this makes resettlement in PNG extremely difficult, leaving refugees with the choice between returning to the country they have fled because of persecution that is untenable, or to wait indefinitely for a resettlement pathway to open.
32. Our observation is that resettlement in PNG of the bulk of the hundreds of refugees is an unrealistic expectation and a policy directed this way is futile.
33. There is a lack of clear information and communication regarding resettlement and all the men we spoke to remained unclear about their fate. This confusion adds to the mental health stress upon them.
34. Further, we understand that the position of the Iranian Government is to not to accept involuntary returns, if so, this would leave the many Iranians that have unsuccessful refugee status, in limbo on Manus.
35. We understand that an absence of any effective form of judicial review of Refugee Status Determination decisions – (which we are told is provided by the Commonwealth on Nauru) means that cases where people had an unsuccessful determination or failed to participate in initial determination and review are unable to have legal re-assessment of their cases.
36. Amongst the group of people who have had unsuccessful determinations, there is significant concern about forcible returns – re-foulment - of people. The view is that people have been



placed under significant duress by Commonwealth Government – delays of RSD processing, the lack of the adverse detention environment and may be coerced.

Cover and image below: Dennis, 36 of Sri Lanka. Manus Island November 2017.  
Photographs: Nick Ralph

