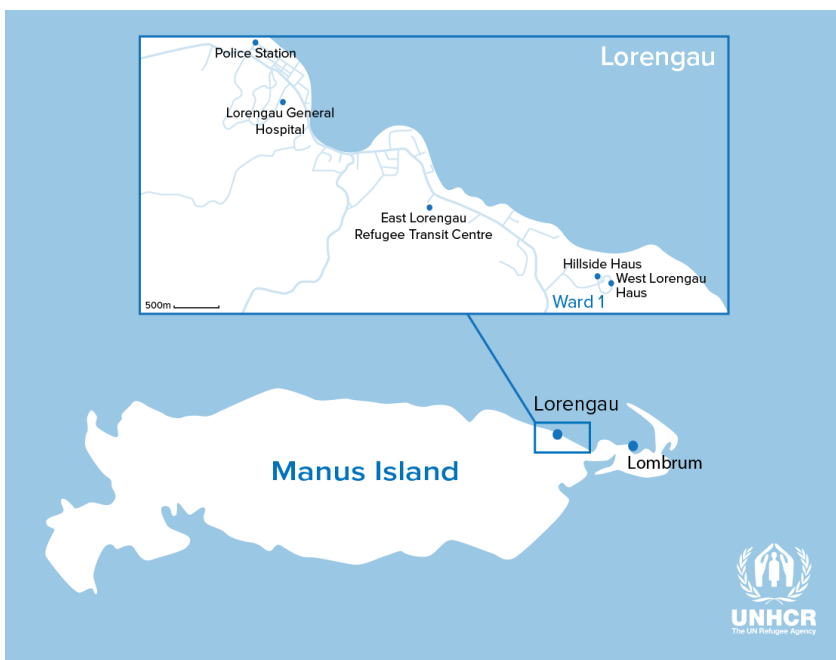


UNHCR FACT SHEET ON SITUATION OF REFUGEES AND ASYLUM-SEEKERS ON MANUS ISLAND, PAPUA NEW GUINEA

5 July 2018

Key Findings and Recommendations

Background¹



3,172 refugees and asylum-seekers have been forcibly transferred by Australia to facilities in Papua New Guinea and Nauru since the introduction of the current ‘offshore processing’ policy in 2013.² Of these, some 750 people remain in Papua New Guinea, including approximately 580 on Manus Island. Some 287 refugees are accommodated at East Lorengau Refugee Transit Centre, along with 175 refugees at West Lorengau Haus and 130 asylum-seekers at Hillside Haus. The facts in this document were collected during UNHCR’s most recent monitoring mission to Papua New Guinea from 28

May to 2 June 2018, which was undertaken with two expert medical consultants – a psychiatrist and general practitioner with expertise in primary care systems.



Key Findings

- With the continued handing down of decisions under the bilateral relocation agreement between Australia and the United States of America, specific planning and risk mitigation is critical for those who may not be admitted³ to the United States. Clear alternatives and information-sharing with refugees on their options for a safe and adequate solution outside of Papua New Guinea are urgently needed.
- UNHCR protection staff and medical experts observed a high level of tension and further deterioration in the mental health of refugees and asylum-seekers on Manus Island. Separation from family members and a deep seated fear of being abandoned in Papua New Guinea by

¹ These findings follow earlier UNHCR Fact Sheets of 15 December 2017 and 21 January 2018.

² Senate Legal and Constitutional Affairs Committee, Parliament of Australia, Additional Estimates Hearing, AE17/170, 27 February 2017.

³ Diverse reasons for non-admission to any resettlement country do not necessarily have any bearing on either an individual’s ongoing refugee status or their continued need for an urgent durable solution.

Australia without adequate support has contributed to an acute sense of insecurity and helplessness. It can be anticipated that an ongoing lack of support for vulnerable individuals will lead to serious, adverse outcomes, in the context of high levels of anxiety and depression⁴. These negative consequences are clearly foreseeable and preventable. Various reliable sources consistently advised UNHCR staff that coordination and planning for critical incident management and response had not been put in place with relevant local authorities, including the hospital and police forces.

- Caseworkers visit refugee and asylum-seeker accommodation sites for the purpose of identifying and providing support for vulnerabilities such as medical needs and mental health issues. For people who have withdrawn and are unable to seek assistance, however, no follow up interventions are made. For those with serious mental health needs, such withdrawal may in fact be a sign of greater vulnerability. There is no systematic, ongoing process to identify those at low, medium or high levels of risk, and tailor assistance accordingly. This means that those with the most significant needs have not been monitored on a regular basis since October 2017.
- Differing views persist between stakeholders regarding who has operational authority and responsibility for certain services on the ground on Manus Island. Notably, UNHCR staff asked diverse stakeholders who is responsible for follow up of identified vulnerable people, and received inconsistent answers. Service providers work in silos, without clear information as to the role of others - which should be complementary and coordinated.
- The Government of Australia has no continuous or regular on the ground presence to coordinate and supervise the fulfilment of contractual obligations by those it has engaged to provide basic assistance and support to refugees and asylum-seekers on Manus Island. The Government of Australia, rather than the Government of Papua New Guinea, is the contracting party for all medical, security, infrastructure, garrison and caseworker services.
- The Papua New Guinea Immigration and Citizenship Authority has a presence of up to six staff on Manus Island, and plays a liaison role only. Without being a party to contracts between the Government of Australia and service providers, they have no authority to instruct. Similarly, each of the companies engaged by the Government of Australia reports directly to them, and not to the Government of Papua New Guinea. While the Papua New Guinea Immigration and Citizenship Authority monitors the three accommodation sites, there is an evident disconnect between this function and the management of services and contracts.

Recommendations⁵

- The Government of Australia should ensure that a clear strategy and critical incident response plan includes significantly bolstered mental health support, risk mitigation and a multistakeholder approach involving all service providers, relevant local authorities, the local community, refugees and asylum-seekers. This should also specifically provide ongoing required support to refugees who may not be admitted to the United States of America.
- The Government of Australia should immediately identify and secure alternate durable solutions outside of the bilateral arrangement between Australia and the United States of America, including

⁴ United Nations High Commissioner for Refugees (UNHCR), *Submission by the Office of the United Nations High Commissioner for Refugees on the Inquiry into the serious allegations of abuse, self-harm and neglect of asylum seekers in relation to the Nauru Regional Processing Centre, and any like allegations in relation to the Manus Regional Processing Centre referred to the Senate Legal and Constitutional Affairs Committee*, 12 November 2016.

⁵ See also UNHCR, *UNHCR Fact Sheet on Situation of Refugees and Asylum-Seekers on Manus Island, Papua New Guinea*, 15 December 2017 and UNHCR, *UNHCR Fact Sheet on Situation of Refugees and Asylum-Seekers on Manus Island, Papua New Guinea*, 21 January 2018.

acceptance of the continuing New Zealand offer. Clear information on all appropriate available options outside of Papua New Guinea should also be communicated to refugees.

- An intensive outreach effort to comprehensively identify vulnerable individuals and assess their level of current risk should be undertaken in a coordinated manner between service providers with clear referral pathways for assistance. Individualized management plans to monitor and provide the required support for the vulnerable individuals need to be developed, coordinated and maintained on an ongoing basis.
- The Government of Australia should re-establish a constant and adequate physical presence on Manus Island to oversee, instruct and coordinate the service providers it has contractually retained.
- Given the increasing mental health needs of the refugee population, the number and expertise of caseworkers should be increased to a level commensurate to different degrees of risk and vulnerability.



HEALTH

Key Findings

- The reduction of operational hours of former healthcare provider International Health and Medical Services (IHMS) in November 2017 to weekday business hours and Saturday mornings resulted in significant additional strain on the local 120-bed Lorengau General Hospital. While transition arrangements from former healthcare provider IHMS to Pacific International Hospital management of the small clinic at the East Lorengau Refugee Transit Centre continued until mid-June 2018, the model remains an outpatient service which is primarily patient-driven and does not meet the needs of refugees and asylum-seekers.
- Outside of the Pacific International Hospital clinic's hours of operation, primary care, emergency service provision and surge service provision in the event of any major health crisis are to be provided by the Lorengau General Hospital, with already very limited capacity to even provide care for Manusians. UNHCR staff and medical experts confirmed there is no attending anaesthetist, surgeon or psychiatrist available.
- Outreach medical assistance is critically needed, particularly for the most vulnerable and those with mental health concerns, who may be unable or unwilling to engage proactively with service providers. Medical care for those who do not speak English is seriously compromised by the complete lack of on-site interpreters.
- Clear transfer procedures for those requiring medical treatment unavailable in Papua New Guinea are not in place.
- The absence of a facility for refugees and asylum-seekers for whom large group accommodation is unsuitable is highly problematic. This is particularly the case for those with serious mental health concerns (who may need to be admitted into a mental health facility) and other vulnerabilities.

Recommendations

- There is an urgent need for outreach medical care, enhanced general medical and specialist mental health care. The tragic death of a Rohingya refugee on 22 May 2018 underscores the criticality of these unmet needs. An intensive outreach effort to comprehensively identify

vulnerable individuals and assess their level of vulnerability, notably with regard to mental health, should be undertaken in a coordinated manner between service providers, Pacific International Hospital and local first responders - with clear referral pathways. Individualized management plans to monitor and provide the required support for the vulnerable individuals need to be implemented and maintained on an ongoing basis.

- Trauma and torture counselling services, along with necessary interpretation services, should be immediately reinstated on-site at all three accommodation facilities.
- Appropriate resourcing and support for the Lorengau General Hospital should be urgently provided commensurate to increased demands in order to address the health needs of the asylum-seekers and refugees after hours, as well as those requiring hospitalization.
- Procedures for medical evacuations outside of both Manus Island and Papua New Guinea more broadly should be clearly defined and streamlined.



Key Findings

- Following the fire at Hillside Haus on 20 May 2018, UNHCR staff observed an absence of smoke detectors and fire alarms at both Hillside Haus and West Lorengau Haus. Fire extinguishers are not accessible to refugees and asylum-seekers, and are held only by service providers. Various sources advised UNHCR that the refugees and asylum-seekers are at serious risk in both Hillside Haus and West Lorengau Haus in the event of another fire, given a lack of coordination and contingency planning for emergency responses.
- Accommodation capacity at West Lorengau Haus has increased with the construction of 13 accommodation blocks (10 rooms in each).⁶ No appropriate indoor communal space is available, though UNHCR staff observed a small prayer room.
- Rooms for refugees at East Lorengau Refugee Transit Centre remain below the standard for accommodation intended for a period of three months, for those living with twelve people in a shared apartment.⁷
- Rooms for asylum-seekers at Hillside Haus remain below the standard for accommodation intended beyond a period of three months.⁸ No appropriate outdoor communal space is available. The singular indoor recreation room was closed at the time of UNHCR's visit, following the fire of 20 May 2018.

⁶ As reported in January 2018, two refugees are intended to be accommodated in each room measuring 2.9 x 3.2 metres. This space of 4.6 m² per person is significantly below the standard of 6 m² for accommodation intended for over three months. See International Federation of Red Cross and Red Crescent Societies - *Emergency Sheltering – Guidelines on Emergency Sheltering of Refugees in Germany*, 2016.

⁷ As reported in January 2018, In East Lorengau Refugee Transit Centre, up to four refugees are accommodated in shared bedrooms measuring 4.0 x 2.8 metres. In addition, each group accommodation unit has a cooking and dining space measuring approximately 4.0 x 7.0 metres which is shared between eight or 12 refugees, depending on the bedroom configuration of the unit. This space of 5.1 m² for 12 people is below the standard of 6 m² for accommodation intended for over three months. See International Federation of Red Cross and Red Crescent Societies - *Emergency Sheltering – Guidelines on Emergency Sheltering of Refugees in Germany*, 2016.

⁸ As reported in January 2018, two asylum-seekers are intended to be accommodated in each room at Hillside Haus measuring 3.9 x 2.6 metres with some asylum-seekers living with three men to a room. This space of 5.1 m² per person is below the standard of 6 m² for accommodation intended for over three months. See International Federation of Red Cross and Red Crescent Societies - *Emergency Sheltering – Guidelines on Emergency Sheltering of Refugees in Germany*, 2016.

- At Hillside Haus, UNHCR observed once again that some rooms on the ground floor continued to have water leaking from the upstairs bathroom pipes causing mould to grow, with the ceiling of one room black with mould.

Recommendations⁹

- A fire safety audit and inspection needs to be urgently undertaken at all three accommodation sites to check compliance with Papua New Guinea and Australian standards. Fire alarms, fire safety equipment and smoke detectors should be installed at West Lorengau Haus and Hillside Haus immediately.
- Living space for refugees and asylum-seekers at West Lorengau Haus and Hillside Haus should be expanded to meet a minimum standard of 6 m² per person.



WATER AND SANITATION

Key Findings

- UNHCR staff observed 24 squat toilets available at West Lorengau Haus for approximately 175 refugees, which now meets the standard of 1:8 for accommodation intended for over three months.¹⁰ As previously observed, squat toilets continue to pose accessibility issues for refugees with physical impairments.
- UNHCR staff observed 22 showers (an increase of 11) available at West Lorengau Haus for about 175 refugees. Two additional showers were not functioning. This ratio is now within the standard of 1:8 for accommodation intended for over three months.¹¹
- UNHCR staff observed 10 showers, 10 seated toilets and six urinals were available for 130 asylum-seekers within the main accommodation site at Hillside Haus. In addition, new ablution areas had been constructed in one of the container vans providing an additional six toilets and six showers for the population. This ratio of 1:8 showers and 1:8 toilets has significantly improved to now meet the standard of 1:8 for accommodation intended for over three months¹².
- As previously observed on 12 January 2018, UNHCR staff again noted the bathroom ceiling of the ground floor of Hillside Haus had exposed ceiling pipes dripping waste water, compromising sanitation and restricting access.

Recommendations

- Seated toilets should be installed at West Lorengau Haus in order to allow accessibility for refugees and asylum-seekers with mobility difficulties.
- Waste water leakage from the pipes upstairs into the downstairs bathroom and living areas at Hillside Haus should be addressed as a matter of urgency.

⁹ See also UNHCR, *UNHCR Fact Sheet on Situation of Refugees and Asylum-Seekers on Manus Island, Papua New Guinea*, 15 December 2017.

¹⁰ International Federation of Red Cross and Red Crescent Societies and German Red Cross, *Emergency Sheltering – Guidelines on Emergency Sheltering of Refugees in Germany*, 2016, p. 58

¹¹ International Federation of Red Cross and Red Crescent Societies and German Red Cross, *Emergency Sheltering – Guidelines on Emergency Sheltering of Refugees in Germany*, 2016, p. 51.

¹² *Ibid*, at p. 51 and p. 58.