



THE ROYAL AUSTRALIAN COLLEGE OF GENERAL PRACTITIONERS

Health Care for Refugees and Asylum Seekers

Over 50 000 refugees or asylum seekers have entered the Australian community over the past five years. This immigration flow is beginning to bring regular challenges to Australian medical practitioners in terms of health service provision for asylum seekers and refugees in detention and in the Australian community. A review and development of health care policies and standards of health care delivery for all refugees and asylum seekers is necessary.

The RACGP believes that access to appropriate health care is a basic human right in any civil society and calls on its members to provide and advocate for compassionate high quality health care services for all people living in Australia. The RACGP believes that standards ensuring access to quality health care for all asylum seekers and refugees need to be implemented and enforced.

As the body representing GPs who provide the bulk of medical care to such people, the RACGP is concerned that standards of basic health care similar to those received by all Australians are accessible to all refugees and asylum seekers being processed by Australia, on and off shore.

The evidence base on health problems of refugees and asylum seekers in Australia is thin, due to the lack of research being funded in this area of population health. Many refugees are in good health and are seeking to positively engage with the new society in which they find themselves. Other refugees arrive with, or develop, a range of health care needs. In addition to the range of complaints similar to those of the rest of the Australian population, the following health problems are likely to be common amongst refugees:

- psychological disorders such as post traumatic stress disorder, anxiety, depression and psychosomatic disorders
- direct physical consequences of torture such as musculoskeletal pain or deafness
- under recognised and under managed hypertension, diabetes and chronic pain
- poor oral health, a result of poor nutrition and diet, lack of fluoridated water, poor dental hygiene practices and limited dental care in the past
- infectious diseases including TB and intestinal parasites
- delayed growth or development in children.

The RACGP believes the following areas need to be addressed concerning the delivery of health care to asylum seekers and refugees:

Quality health care:

All people living in Australia, no matter what their legal status, should have access to the same standard of basic health care services. While many onshore asylum seekers within the

Australian community do have access to Medicare and the PBS, a significant minority have no access to the benefits of Medicare or the PBS. The College is committed to the maintenance and extension of Medicare funded access for all asylum seekers and refugees.

An understanding of refugee and asylum seeker health care needs:

The RACGP encourages the primary health care needs of asylum seekers and refugees to be researched as a matter of priority and suggests that the role of traditional healers interfacing with western medical care be part of the research agenda.

A system to monitor the health care status of detainees:

The RACGP strongly supports the position taken by the Committee of Presidents of Medical Colleges (CPMC) that public accountability and monitoring of health status of asylum seekers in detention centres is a priority in Australia today. It is important that contractors employed by the Australian Government meet health care standards.

Mental health of refugees and asylum seekers:

The RACGP has considerable concern that the detention of asylum seekers for prolonged periods of time contributes to further psychological and physical health problems for the individuals concerned. Access to mental health care should be available to all detainees, and asylum seekers and refugees in the community, regardless of their access to Medicare benefits. Initiatives should be developed to provide support and counselling, address existing, and prevent further psychological damage.

Welfare of children in detention centres:

The RACGP is concerned about the significant effects on the psychological and emotional health and development of children in detention. The RACGP recommends that the Government seriously considers providing alternative and supportive arrangements for children and unaccompanied minors in detention centres, whilst trying to keep children with their families wherever possible. The RACGP supports the *Alliance of Health Professionals concerned about the Health of Asylum Seekers and their Children* in their submission inquiry into children in immigration detention to the Human Rights and Equal Opportunity Commissioner, which recommends that children not be held in anything other than minimal detention for processing purposes only.

Detection, prevention and treatment of communicable diseases:

Protocols need to be improved regarding the identification and treatment of communicable diseases. The RACGP is concerned at the, albeit small, potential public health risk of

communicable diseases such as tuberculosis, hepatitis and HIV infection as a consequence of the lack of access to health services amongst asylum seekers in the community and the delay in immigration screening until applicants are accepted. Screening for communicable diseases should be timely and thorough. All humanitarian entrants and asylum seekers should be offered immunisation according to the current Australian Standard Vaccination Schedule.

Easy access to interpreter services:

Fundamental to the GP process of providing quality care is the access to properly trained health care interpreters, when needed. The College calls on the Government to ensure adequate funding for medical interpreter services, and that access to health interpreters be available to all asylum seekers and refugees. Also, information regarding how to access health care in the community should be easily available in languages understood by asylum seekers and refugees.

Ethical and professional obligations of health care providers:

The RACGP is opposed to agreements that restrict the professional independence of medical practitioners attending to the health care needs of those held in detention centres. These restrictions may affect not only their ability to provide information about their observations on the health of patients in detention centres but also may interfere with their professional and ethical obligations.

The RACGP recommends that its members fulfil their ethical and professional obligations to patients in detention and not sign agreements that compromise their professional independence. This lack of accountability is particularly concerning regarding children.

Support and training for providers of health care to asylum seekers and refugees:

There are a number of general practitioners who have taken a lead in responding to the needs of refugees and asylum seekers around Australia. Many have made a contribution to health care in detention centres as well. These GPs have developed practical expertise and have a role to play in assisting other Australian GPs to provide good quality care to this group of people in our population. The College acknowledges that much of the strain of dealing with refugee health issues is currently being felt by GPs. Whilst GPs are the best placed to work with asylum seekers and refugees, they require support from all other players in the health sector to maintain this role.

The RACGP calls on its members with special skills and knowledge to identify themselves to their peers, and assist their peers with the provision of high quality health care to all asylum seekers. The RACGP calls on all bodies concerned with the delivery of health care to refugees and asylum seekers to contribute and cooperate in the development of standards and health care policies pertaining to the delivery of this care.

To maximise better health outcomes in the future, the RACGP encourages all undergraduate and post-graduate medical training institutions to include asylum seeker and refugee health in its programs.

The RACGP calls on its members to take positive steps to upgrade their own knowledge and skills regarding refugee health, and encourages relevant Divisions of General Practice to include this issue on their training agendas. The RACGP encourages education providers to develop Continuing Professional Development (CPD) activities relating to this topic.

The RACGP encourages the review of existing and development of new standards regarding the provision and access of quality health care to all refugees and asylum seekers in the Australian community and Australian run detention centres. Quality health care should be of the same basic standard as we expect for all Australians, and should include dental care, vaccinations and mental health. The Australian Government should ensure these standards are implemented and enforced. The RACGP encourages research into health care needs of refugees and asylum seekers, and asks for support and training for those who provide the care.

The RACGP is ready to work with others in the community to ensure that a coordinated approach to the health needs of onshore asylum seekers and refugees is achieved involving government and non-government agencies.

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