Submission to the Exposure Draft of Australia’s National Human Rights Action Plan 2012

National Human Rights Action Plan Secretariat
Human Rights Policy Branch
Attorney-General’s Department

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This submission was prepared for the Australian Psychological Society by Ms Emma Sampson, Dr Susie Burke, and Ms Heather Gridley, in consultation with the APS Refugee Issues and Psychology Interest Group, APS Gay and Lesbian Issues and Psychology Interest Group, and key participants from the National Roundtable on Research on Racism towards Indigenous Australians.
1 Summary and recommendations

The Australian Psychological Society (APS) recognises the important relationship between human rights and mental health and wellbeing. As such, we welcome the draft *Australia’s National Human Rights Action Plan* as an important mechanism for realising and improving the Government’s human rights response. We particularly commend a number of proposed new initiatives that accord strongly with the community wellbeing priorities of the APS, and also with the commitment to human rights espoused in the *Universal declaration of ethical principles for Psychologists* (Assembly of the International Union of Psychological Science (2008)).

While we endorse the Government’s commitment to improve human rights through this action plan, and welcome greater scrutiny of legislation for compliance with human rights obligations, the APS believes that a stronger human rights legal framework is required to ensure respect and equality for all people, particularly those who are vulnerable and marginalised, and therefore recommends that the Australian Government introduce a Human Rights Act or Charter, as part of its commitment to strengthening human rights in Australia.

The APS also recommends a strengthening of protection for individuals and groups that experience discrimination and disadvantage. A summary of these recommendations is provided below.

**Aboriginal and Torres Strait Islander peoples**

1. The APS endorses the four key points in the Boatshed Declaration, made at the Racism Roundtable (2009):
   - Constitutional - that there be a preamble to the Constitution that recognises the rights of First Nations peoples, followed immediately by the establishment of a treaty that details a formal agreement between the Australian Government and Aboriginal and Torres Strait Islander peoples, and a framework for national action.
   - Policy - that policies that affect and impact on Australian Aboriginal and Torres Strait Islander peoples must be based on their full involvement and engagement to ensure appropriate agendas and appropriate levels of resourcing are applied.
   - Practice - that effective and genuine partnerships with governments and capacity building agendas be recognised as essential pathways to improving the outcomes for Aboriginal and Torres Strait Islander peoples' education, health and wellbeing.
Standards - that all actions must be based on, and be an expression of, the articles in the UN Declaration of the Rights of Indigenous Peoples, particularly Article 3 (the Right to Self Determination) and Article 42 (calling on the states and agencies of the United Nations to implement the Declaration).

2. In relation to freedom from racism and discrimination, we recommend that:

- Constitutional protection against racial discrimination be strengthened; for example, this would mean ensuring that initiatives like the Stronger Futures (NT) better reflect the aspirations of Aboriginal and Torres Strait Islander peoples;
- Formal recognition of the capacity and the right of Aboriginal and Torres Strait Islander peoples to self-determine their futures;
- The National Anti-Racism Partnership and Strategy be developed in close collaboration with, and meaningful input by, Indigenous people; and
- Greater effort be dedicated in education and research to the elimination of racism and discrimination.

3. The APS recommends that the action plan specifically commits the Australian Government to better data on Aboriginal and Torres Strait Islander peoples. This data collection must be done within an Indigenous framework and Indigenous people must be involved in all stages of the design and delivery processes.

**Gay, lesbian, bisexual and sex and/or gender diverse people**

4. Psychological research provides no evidence that would justify legal discrimination against same-sex partners and their families, but there is ample evidence that such discrimination contributes significantly to the risk of mental ill-health among gay, lesbian, bisexual and sex and/or gender diverse people, especially young people. The APS therefore supports full marriage equality for same-sex couples on health and wellbeing grounds, and specifically recommends that:

- The Australian, State and Territory governments repeal all measures that deny same-sex couples the right to civil marriage, and enact laws to provide full marriage equality to same-sex couples;
- The Australian Government extend full recognition to legally married same-sex couples, and accord them all of the rights, benefits, and responsibilities that it accords to legally married heterosexual couples.
5. Gay, lesbian, bisexual and sex and/or gender diverse people have the right to live free from violence and discrimination. The APS therefore recommends that;
   - The Australian, State and Territory governments strengthen Anti-Discrimination laws to protect all Australians from discrimination on the basis of sexual orientation and gender identity;
   - Police programs which liaise with sexuality and/or gender diverse communities and seek to make reporting easier should be protected and expanded (beyond Victoria).
   - The Australian Education Departments should provide clear policies and adequate resourcing to ensure all Australian schools have, and implement, a specific policy on homophobic bullying, which offers well-publicised protection to same-sex attracted and gender-questioning young people.

6. The APS also recommends that the human rights plan include all recommendations from the Human Rights Commission’s ‘Sex files’ report (www.hreoc.gov.au/genderdiversity). Change to documents should be legally possible regardless of whether or not the person has had gender reassignment surgery.

Refugees, asylum seekers, migrants and people from culturally and linguistically diverse backgrounds

7. Immigration detention has been found to have an independent, adverse effect on mental health by exacerbating the impacts of previous traumas, and is in itself an ongoing trauma. It is therefore recommended that the Australian Government remove the policy of mandatory detention and that:
   - Detention be only used as a last resort, as a short-term option, and only for as long as is needed to enable appropriate security and health clearances to be completed;
   - Community-based alternatives to detention be prioritised ahead of detaining people offshore or in remote locations;
   - in the best interests of the child, no child should subject to detention at any point in their immigration processing;
   - Based on the evidence linking longer periods of detention with poorer mental health outcomes, specific time limits be placed on the duration of detention, with ongoing detention being based on individual assessment and subject to judicial review.

8. Where detention is deemed necessary, the APS recommends that better conditions are needed to meet human rights standards, including:
• Significant improvements in detention centre facilities and services, including increased access to mental health services, with acknowledgement however that ethical delivery of such services is seriously compromised, particularly in offshore and remote facilities;
• Provision of adequate resources, support and training in mental health, human rights and cross cultural issues for all detention centre staff, to ensure the optimal health, safety and wellbeing of staff and contractors as well as detainees;
• Locating detention centres in areas where professional support networks are readily accessible, rather than in remote and offshore locations, to support more effective provision of mental health services.

9. It is imperative that greater accountability mechanisms be developed to ensure that the priority human rights areas are addressed in practice. This includes more specific targets and timelines, greater reporting requirements and further responsibility to act on findings of reports.

10. The APS recommends that persons in immigration detention receive physical and mental healthcare commensurate with care to the broader community, service agreements between Commonwealth and State governments be prioritised, and mental health employment and service delivery contracts be developed in line with National Practice Standards.

11. The APS encourages governments to recognise that culture-based discrimination has far-reaching health, mental health, social and economic consequences for individuals and communities. We endorse the development of a National Anti-Racism Partnership and Strategy in close collaboration with those affected by racism and with associated actions and resources that enable racism and discrimination to be fully addressed.

Climate change and human rights

12. The APS is concerned that the human rights action plan does not adequately address the likely human rights implications of both climate change and the impacts of a climate adaptation and mitigation policies on vulnerable individuals and communities. We therefore recommend that climate change impacts and climate mitigation and adaptation policies be addressed more substantively in the human rights action plan.
The APS also particularly welcomes a number of new actions in the Action Plan which are in keeping with previous APS submissions and/or are in accord with our own Code of Ethics and public commitment to community wellbeing:

- Exploring options for establishing a new National Children’s Commissioner

- A process to obtain ratification of the Optional Protocol to the Convention Against Torture (OPCAT)

- Work to lay the foundations for launch of a National Disability Insurance Scheme that will entitle people with significant disability to the care and support they need

- Investigating ways that the justice system can address the needs of people with a mental illness and/or cognitive disability (including intellectual disability and acquired brain injury)

- Research into rates of imprisonment, focusing on vulnerable groups including Indigenous Australians, youth and those with a cognitive disability, and analysis of utilisation of alternative sentencing options

- A review of federal legislation for any barriers to older people participating in productive work

- Work with the States on the regime governing the sterilisation of women and girls with disability, and

- Ensuring accessible communications for people with disability in the event of an emergency.

The APS stands ready to advise and assist with the development and implementation of any of the above initiatives where the knowledge and expertise of psychologists might be helpful.
2 The Australian Psychological Society

The Australian Psychological Society (APS) is the premier professional association for psychologists in Australia, representing more than 20,000 members. Psychology is a discipline that systematically addresses the many facets of human experience and functioning at individual, family and societal levels. Psychology covers many highly specialised areas, but all psychologists share foundational training in human development and the constructs of healthy functioning.

A range of professional Colleges and Interest Groups within the APS reflect the Society’s commitment to investigating the concerns of, and promoting equity for, vulnerable groups such as Indigenous Australians, sexuality and gender diverse people, minority cultures, older people, children, adolescents and families. The promotion of a peaceful and just society and protecting the natural environment are the focus of other APS Interest Groups.

Psychology in the Public Interest is the section of the APS dedicated to the communication and application of psychological knowledge to enhance community wellbeing and promote equitable and just treatment of all segments of society.

3 Psychology, the APS and the commitment to human rights

Psychologists regard people as intrinsically valuable and respect their rights, including the right to autonomy and justice. Psychologists engage in conduct which promotes equity and the protection of people’s human rights, legal rights, and moral rights (APS, 2007). The APS Code of Ethics reflects psychologists’ responsibilities which include principles of respect for the rights and dignity of people and peoples, propriety, and integrity. The Code is complemented by sets of ethical guidelines, including guidelines on the provision of psychological services to Aboriginal and Torres Strait Islander people, lesbian, gay and bisexual clients, and older adults, amongst others. *The Universal declaration of ethical principles for psychologists* (2008) explicitly recognises that Psychology as a science and a profession functions within the context of human society, and as such has responsibilities to society that include using psychological knowledge to improve the condition of individuals, families, groups, communities, and society.

Psychologists work to understand important issues facing society and to enhance community wellbeing by improving the social and environmental conditions that impact on wellbeing. The APS specifically has raised concerns and contributed to debates around human rights, including the rights of
clients receiving psychological services, and of marginalised groups in society, and has highlighted the established links between human rights, material circumstances and psychological health.

In particular, for over a decade the APS has been raising concerns about the impact of policies of deterrence (e.g., immigration detention, Temporary Protection Visas) on those seeking asylum in Australia (see http://www.psychology.org.au/community/public-interest/refugees/).

In addition, the APS has also actively advocated for the rights of Aboriginal and Torres Strait Islander peoples. This has included supporting an Aboriginal and Torres Strait Islander Peoples and Psychology interest group, co-facilitating a Racism Roundtable in 2009, attended by over 40 researchers and public figures from across Australia, supporting the establishment of the Australian Indigenous Psychologists Association (http://www.indigenouspsychology.com.au), and currently developing a Reconciliation Action Plan for the APS itself (www.psychology.org.au/reconciliation).

4 The APS response to the Action Plan

This submission provides a response by the Australian Psychological Society (APS) to the Australian Government’s National Human Rights Action Plan. It builds on our submission to the National Human Rights Consultation (2009).

It is beyond the scope of the APS to address the plan in detail and we are not in a position to comment on the specific legal context of the plan. Our response draws on the evidence from the psychological literature on the links between human rights and mental health and community wellbeing.

Following a discussion of the importance of human rights to individual and community wellbeing, the submission provides general comment on the draft action plan, followed by a focus on specific groups who are particularly vulnerable to human rights violations.

Finally, the submission includes a discussion of the importance of incorporating climate change into a human rights framework and action plan.
5 Importance of human rights to individual and community wellbeing

Human rights promote human happiness and wellbeing because they protect people's vital needs and fundamental interests. The protection of these basic rights further enables people to pursue those things they find enjoyable and worthwhile. This is expressed in the Universal Declaration of Human Rights, which states that "everyone has the right to a standard of living adequate for the health and wellbeing of himself and his family, including food, clothing, housing and medical care" (Universal Declaration of Human Rights, Article 25).

The social and economic conditions that affect whether people become ill, and whether they develop mental health problems, are well known, and point to the importance of human rights provisions that protect the rights of people to live in conditions that adequately meet their basic needs. Poor social and economic circumstances affect health throughout life. The social gradient in health reflects material disadvantage and the effects of insecurity, anxiety and lack of social integration.

For example, research has consistently pointed to the detrimental impact of racism, discrimination, poverty (as examples of the failure to protect human rights) on the psychological health and wellbeing of individuals and communities. Individuals who have experienced racism are more likely to suffer poor physical and psychological health (VicHealth, 2008), while those living in poverty struggle to meet their material needs (such as food and shelter), which impacts directly on psychological health, individual life satisfaction and the ability to participate more broadly in society. Psychological research, for example, has highlighted the impact of a failure to protect the economic rights of one of society’s most vulnerable groups (single parents) on the emotional and social health of families, pointing to the detrimental effects of poverty on social and emotional wellbeing (Barth & Gridley, 2008).

Violations of human rights cause serious harm to individuals but also more generally undermine the community’s expectations that they can count on having their own human rights respected. When gross human rights violations are being enacted and run unchecked, this can lead to learned helplessness in society at large. It can also engender a pervasive sense of fear and insecurity which should not exist in an open democratic society.
6 General response to the Action Plan

Australia is committed to promoting human rights as a signatory to many international human rights treaties, such as the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the 1951 Convention Relating to the Status of Refugees, and the Convention on the Rights of the Child.

The APS welcomes the draft human rights action plan as a mechanism for realising this commitment to human rights, and improving its human rights response for all Australians.

The APS recognises the important relationship between human rights and mental health and wellbeing, and therefore particularly endorse the following new actions proposed by the Australian Government in the draft action plan:

- Establishing a national Commissioner for Children and Young People – an important step in monitoring and improving Australia’s obligations under the Convention on the Rights of the Child, and particularly in ensuring that vulnerable children are protected, such as Indigenous children and those subject to immigration detention;
- The ratification of the Optional Protocol to the Convention Against Torture (OPCAT) - as a commitment to preventing the mistreatment of people in detention and a way of facilitating a greater level of transparency and accountability with regard to conditions for, and treatment of, people in immigration detention in Australia;
- Initiatives to support the human rights, social inclusion and optimal participation in Australian society of people with disabilities and older people;
- Investigating ways the justice system can better work for those with mental health issues and particularly for Aboriginal and Torres Strait Islander people - this should include a strong preventative focus and alternative sentencing options; and
- The development of a new National Anti-Racism Partnership and Strategy – in close collaboration with individuals and communities most affected by racism and alongside a commitment to address the harmful consequences of racism and discrimination.

While we endorse the Government’s commitment to improving human rights through this action plan, and welcome greater scrutiny of legislation for compliance with human rights obligations, the APS believes that a stronger human rights legal framework is required to ensure respect and equality for all people, particularly those who are vulnerable and marginalised.
Successive governments have been able to suspend human rights obligations when the political necessity arises, with several recent examples of rights violations pointing to the inadequacy of existing laws and policies to fully protect the human rights of all Australians, especially the most vulnerable and disadvantaged. These violations not only have a significant impact on the psychological state of individuals and the wellbeing of communities, but reflect poorly on Australia as a fair and just nation.

Australia’s policies of immigration detention, temporary protection and suspension of entitlements for those seeking asylum and the 2007 suspension of the Racial Discrimination Act in the Northern Territory are two stark examples of where Australia is widely believed to have violated human rights norms under international law.

The APS therefore believes the Australian Government should introduce a Human Rights Act or Charter, as part of its commitment to strengthening human rights in Australia.

As identified in our 2009 submission to the National Human Rights Consultation Committee, strengthening the legal framework for protecting human rights by introducing a Human Rights Act would:

- Provide protection for the most vulnerable people in our society;
- Provide a mechanism to meet Australia’s human rights obligations under international treaties, including holding governments accountable for their actions if transgressions occur;
- Set out the fundamental rights that Australians agree should be protected;
- Require governments to recognise and protect human rights, and assess all new legislation by how it measures against the Human Rights Act;
- Bring all human rights together and protect them in the same way;
- Ensure that as a democratic society we all bear the responsibility to protect the rights of others.

Furthermore, of the 35,014 people who made submissions to the National Human Rights Consultation Committee, an overwhelming 29,153 were in favour of a Human Rights Act.

Recommendation 1: The Australian Government should introduce a Human Rights Act or Charter, as part of its commitment to strengthening human rights in Australia.
7. The human rights experience of specific groups in Australia

Given that some individuals and groups within the community experience discrimination and disadvantage, and are particularly vulnerable to human rights abuses, the APS endorses the focus on specific groups in the draft plan. In particular, the APS would like to see priorities and actions strengthened for Aboriginal and Torres Strait Islander peoples, gay, lesbian, bisexual and sex and/or gender diverse people and refugees, asylum seekers, migrants and people from culturally and linguistically diverse Backgrounds. The following section outlines how we believe the human rights of these groups could be strengthened in the plan.

7.1 Aboriginal and Torres Strait Islander peoples

The inequality experienced by many Aboriginal and Torres Strait Islander people and communities is one of the most pressing human rights issues facing Australia today. The human rights of Aboriginal and Torres Strait Islander peoples are not sufficiently protected or promoted currently. The widely documented poor outcomes in relation to health, education, incarceration, child protection, morbidity and mortality and the average life expectancy gap between Indigenous and non-Indigenous Australians (around 11 years, ABS, 2009), is a stark demonstration of the failure to protect the most fundamental human rights.

Of particular concern to the APS are the poor outcomes in relation to individual and community wellbeing. In terms of social and emotional wellbeing, the rate of suicide in the Indigenous population is almost three times greater than that of the non-Indigenous population (3.7% compared to 1.3%) and Indigenous Australians are three times more likely to be hospitalised for intentional self-harm than other Australians. Hospitalisation for ‘mental and behavioural disorders due to psychoactive substance use’ was almost 5 times higher for males and 3.3 times higher for females than those for their non-Indigenous counterparts (ABS & AIHW, 2008).

In addition, Aboriginal and Torres Strait Islander peoples do not have access to justice. Extensive existing data indicates that Aboriginal and Torres Strait Islander peoples experience race discrimination at every stage of the justice system. For example, in Western Australia 43% of prisoners are Indigenous from 3.5% of the population (Kelly, Gee, Dudgeon & Glaskin, 2009).

Many Aboriginal and Torres Strait Islander children lack access to safe, culturally appropriate, resourced, and accessible quality education. Along with significant improvements to the quality of education, the right to
language needs to be realized through the education system. Teaching in language is an important protective factor and this is widely evidenced (Kelly et al., 2009).

The right to safe, culturally appropriate, resourced and accessible services to support social and emotional well-being is essential for good ‘mental health’. This includes the recognition of historical and cultural contexts for social and emotional well-being and needs to be included in psychological and psychiatric assessments.

The above mentioned issues have been supported in many major Government reports including: the Social Justice Reports, the Bringing Them Home Report, the Little Children are Sacred Report and the Royal Commission Report into Aboriginal Deaths in Custody. These reports point to human rights violations in the areas of land rights, removal of children from families and lands, the lack of access to safe, culturally appropriate, resourced, accessible education and adequate access to the justice system.

The continuing inadequate circumstances of many Indigenous communities clearly point to a need for a stronger human rights framework and action plan in Australia. In particular, the following priority and action areas should be strengthened.

7.1.1 Self-determination and consultation (63-70)

Central to individual and community wellbeing is the concept of self-determination. A person’s right to determine their own destiny impacts directly on happiness and health, and is particularly significant for Indigenous communities because of the denial of this right in the past.

Self-determination must go beyond consultation to active engagement and partnership with ATSI communities to be fully realised. The APS endorses the plan’s actions to work with the National Congress of Australia’s First people, as well as support by the Government to recognise Indigenous people in the National constitution. But these should be starting points within a broader commitment to recognition, reconciliation and respect.

Land and connection to land is at the core of Aboriginal spirituality and well-being. Aboriginal people have a right to their lands and the resources which they have traditionally owned. While the APS supports the strengthening of native title arrangements, further action is needed to address the watering down of the Native Title Act as a result of the 1998 amendments having weakened the position of Aboriginal and Torres Strait Islander peoples within native title law. The native title system is unnecessarily lengthy and
complex and this process has been divisive for many Aboriginal and Torres Strait Islander peoples, impacting significantly on their wellbeing.

The APS endorses the four areas in the Boatshed Declaration, made at the National Roundtable on Research on Racism towards Indigenous Australians (2009):

- **Constitutional** - that there be a preamble to the Constitution that recognises the rights of First Nations peoples, followed immediately by the establishment of a treaty that details a formal agreement between the Australian Government and Aboriginal and Torres Strait Islander peoples, and a framework for national action.
- **Policy** - that policies that affect and impact on Australian Aboriginal and Torres Strait Islander peoples must be based on their full involvement and engagement to ensure appropriate agendas and appropriate levels of resourcing are applied.
- **Practice** - that effective and genuine partnerships with governments and capacity building agendas be recognised as essential pathways to improving the outcomes for Aboriginal and Torres Strait Islander peoples' education, health and wellbeing.
- **Standards** - that all actions must be based on, and be an expression of, the articles in the UN Declaration of the Rights of Indigenous Peoples, particularly Article 3 (the Right to Self Determination) and Article 42 (calling on the states and agencies of the United Nations to implement the Declaration).

7.1.2 **Freedom from discrimination (81)**

Racism against Aboriginal and Torres Strait Islander peoples exists in various forms and in all systems in Australia today and is a key barrier to the progress of Australian Aboriginal and Torres Strait Islander peoples towards improved futures.

Racism has a destructive impact on Aboriginal and Torres Strait Islander peoples' education, health and wellbeing, considerably beyond its immediate impact. Racism works strongly against all agendas which aim to close the gaps in health and other outcomes between Aboriginal and Torres Strait Islander peoples and other Australians.

The APS therefore strongly endorses a National Anti-Racism Partnership and Strategy, which is developed in close collaboration with Indigenous people and involves meaningful and ongoing input and appropriate resourcing for actions that emerge from the strategy.
Of particular concern to the APS was the suspension of the Racial Discrimination Act (1975) with little or no consultation. Although the action plans states that this Act has now been reinstated, there remain concerns that this has not been done fully or unconditionally and that issues remain (i.e., it excludes discriminatory actions already taken under the intervention from the scope of the RDA such as compulsory welfare quarantining based on race) (Human Rights Commission, 2011).

It is imperative that the Principles of the Declaration on the Rights of Indigenous Peoples, in particular the right to free, prior and informed consent are realized.

**Recommendation 2: The APS therefore recommends that:**

- Constitutional protection against racial discrimination be strengthened; for example, this would mean ensuring that initiatives like the Stronger Futures (NT) better reflect the aspirations of Aboriginal and Torres Strait Islander peoples for themselves;
- There be formal recognition of the capacity and the right of Aboriginal and Torres Strait Islander peoples to self-determine their futures;
- The National Anti-Racism Partnership and Strategy be developed in close collaboration with Indigenous people;
- Greater effort be dedicated in education and research to the elimination of racism and discrimination.

### 7.1.3 Better data collection

It is imperative that the Australian Government collect accurate qualitative and quantitative data on Aboriginal and Torres Strait Islander peoples to enable the fundamental right to proper planning, policy development, service delivery, and allocation of funding. This data collection must be done within an Indigenous framework and Indigenous people must be involved in all stages of the design and delivery processes. This suggestion is in accordance with Recommendation 103 of the Durban Review Conference outcomes document.

It is important that all states establish mechanisms to collect, compile, analyse, disseminate and publish reliable and disaggregated statistical data, and undertake all other related measures necessary to regularly assess the situation of all victims of racism, racial discrimination, xenophobia and related intolerance, in accordance with the Durban Declaration and Programme of Action.

Further to this we recommend that Aboriginal and Torres Strait Islander peoples should have options to be identified by their language group, tribal
group or specific community (if that is their preference) in all data collection, including ABS data collection, as is done successfully elsewhere in the world even with large numbers of affiliated groups.

Recommendation 3: The APS recommends that the action plan specifically commits the Australian Government to better data on Aboriginal and Torres Strait Islander peoples. This data collection must be done within an Indigenous framework and Indigenous people must be involved in all stages of the design and delivery processes.

7.2 Gay, lesbian, bisexual and sex and/or gender diverse people

The APS is concerned that a disproportionate number of lesbian, gay, bisexual, and sex and/or gender diverse (LGBSGD) people experience poorer health and well-being outcomes than their non-LGBSGD peers in a range of areas, in particular mental health and suicidality. These disproportionately poor outcomes are found in all age groups of LGBSGD people. For example, ABS data (2007) indicates that LGBTI people are 4 times more likely to have ever been homeless, twice as likely to have a high/very high level of psychological distress, almost 3 times as likely to have had suicidal thoughts, and 4 times as likely to have attempted suicide. So while the APS supports the priorities identified in the draft human rights action plan to protect against discrimination based on sexual orientation and gender identity, we believe further actions are needed to ensure the human rights and mental health of LGBSGD communities are adequately addressed.

7.2.1 Same-sex relationships (138-139)

The APS recently endorsed a resolution of the American Psychological Association (APA) for marriage equality for those in same-sex relationships, on health and wellbeing grounds. For the full endorsement, please see http://www.psychology.org.au/Newsandupdates/22Dec2011/.

Psychological evidence points to the mental health benefits of marriage and the harm caused by social exclusion and discrimination arising from not having the choice to marry for same-sex couples. This evidence included:

- There is no scientific basis for the assertion that lesbian, gay, bisexual, and transgender persons are not fit to marry or to become parents of healthy and well-adjusted children (Kurdek, 2004; Peplau & Fingerhut, 2007).
- The denial of marriage rights to same-sex couples can adversely affect the health and well-being of the individuals involved, as well as their families and friends (Herdt & Kertzner, 2006).
Beyond the negative effect of marriage restrictions for LGBTI individuals, research indicates that the families of origin and allies of sexual minorities may suffer from some of the same serious negative physical and mental health consequences experienced by their loved ones (Arm, Horne, and Levitt, 2009).

Being denied the right to marry reinforces the stigma associated with a minority sexual identity, and can particularly undermine the healthy development of a well-adjusted emotional and social attachment style among adolescents and young adults (Herdt & Boxer, 1993).

Psychological research provides no evidence that would justify legal discrimination against same-sex partners and their families, but there is ample evidence that such discrimination contributes significantly to the risk of mental ill-health among gay, lesbian, bisexual and sex and/or gender diverse people, especially young people.

**Recommendation 4: The APS therefore supports full marriage equality for same-sex couples on health and wellbeing grounds, and specifically recommends that:**

- The Australian, State and Territory governments repeal all measures that deny same-sex couples the right to civil marriage, and enact laws to provide full marriage equality to same-sex couples.
- The Australian Government extend full recognition to legally married same-sex couples, and accord them all of the rights, benefits, and responsibilities that it accords to legally married heterosexual couples.

7.2.2 Freedom from discrimination and violence (140-142)

Discrimination against LGBTI people is widespread and includes stereotyping, ostracizing, harassment and violence (Rosenstreich, 2011). Disparities in the health between LGBTQ people and the assumed-to-be-heterosexual and non-trans general population have often been understood as a product of both societal and interpersonal anti-LGBTQ prejudice in health care settings and from health care professionals (Clarke et al, 2010).

Researchers have consistently shown that gay men and lesbians exposed to the stigma of homosexuality have a higher risk of experiencing distress and adverse psychological outcomes (Peplau & Fingerhut, 2007). A Canadian report starkly makes this point through comparing mortality statistics for non-LGB and LGB people, documenting ‘the number of “pre-mature” deaths caused by homophobia’ (Banks, 2003: 9). This report calculated that the number of LGB suicides caused by homophobia is 818–968 per year.
Young people in particular are vulnerable to discrimination. A comprehensive Australian research project, Writing Themselves In (Hillier et al., 2010), found that young people suffer high levels of verbal and physical homophobic abuse in the community and particularly at school. 61% reported verbal abuse, 18% physical abuse and 26% other forms of abuse. The most common place of abuse was at school (80%). There were strong links between homophobic abuse and feeling unsafe, excessive drug use, self harm and suicide attempts. Support was found to be a buffer against negative health outcomes of homophobia, including an important role for schools to address homophobia and deliver inclusive sex education, and police programs which liaise with LGBTI communities.

Recommendation 5: Gay, lesbian, bisexual and sex and/or gender diverse people have the right to live free from violence and discrimination. The APS therefore recommends that;

- The Australian, State and Territory governments strengthen Anti-Discrimination laws to protect all Australians from discrimination on the basis of sexual orientation and gender identity;
- Police programs which liaise with sexuality and/or gender diverse communities and seek to make reporting easier should be protected and expanded (beyond Victoria).
- The Australian Education Departments should provide clear policies and adequate resourcing to ensure all Australian schools have, and implement, a specific policy on homophobic bullying, which offers well-publicised protection to same-sex attracted and gender-questioning young people.

7.2.3 Sex and/or gender diverse people (143-146)

One of the key human rights concerns that emerged in the Human Rights Commission (2009) sex and gender diversity project was that many people who are sex and gender diverse are unable to change the sex markers in official documents or government records, for example birth certificates. This report makes recommendations for changing the system and provides options for implementing these changes.

Recommendation 6: The APS recommends that the human rights plan include all recommendations from the Human Rights Commission’s ‘Sex files’ report (www.hreoc.gov.au/genderdiversity). Change to documents should be legally possible regardless of whether or not the person has had gender reassignment surgery.
7.3 Refugees, asylum seekers, migrants and people from culturally and linguistically diverse backgrounds.

Overwhelmingly Australia has had a successful experience of multiculturalism over a period of five decades. Both individually and as a society, cultural diversity has been linked to better health, social and economic outcomes.

However forms of prejudice, racism and discrimination exist and inequalities among migrant and refugee communities have been well documented.

The APS therefore welcomes the government’s priorities of;
- Implementing the newly developed multicultural policy;
- Evaluating service access by CALD groups, and
- The development of a new National Anti-Racism Partnership and Strategy.

However, the APS has significant concerns in relation to asylum seekers subject to immigration detention, and believes the draft human rights action plan needs to be strengthened to ensure Australia is meeting its obligations under the UN Refugee Convention and upholding the fundamental right of refugees to seek protection, by adopting a fair refugee status determination process.

7.3.1 Immigration detention (191-201)

While the draft action plan commits the government to a range of actions (such as regularly reviewing the length and conditions of detention, moving more people from detention into the community and using the least restrictive form of immigration detention for children), the APS is concerned that the policy of mandatory detention remains, conditions within detention are likely to lead to further adverse mental health outcomes and there are inadequate accountability mechanisms to ensure that human rights of those detained are fully protected.

7.3.1.1 Mandatory detention is harmful

Since the policy of mandatory detention was introduced, over 25,000 people have been detained, many with traumatic experiences in their country of origin.

While efforts to minimise harm have been taken by the government in recent years (such as releasing many children from detention and providing training to some detention centre staff), these steps fail to acknowledge that
detention is a risky environment and a source of trauma in and of itself. Prevention of further mental health problems and recovery from the harm inflicted by detention is unlikely to be achieved while the policy of mandatory detention remains.

Mental health evidence does not support the continued policy of mandatory, indefinite detention. Immigration detention has shown to have an independent, adverse affect on the mental health and wellbeing of those detained, In summary, research has found an independent association between the experience of detention and poor mental health, and that detention:

- Exacerbates the impact of other traumas
- Is linked to increased suicidal and self-harm behaviours
- Is associated with a higher incidence of psychological and psychiatric conditions, and
- Causes harm beyond the period of detention and compromises the capacity of refugees to benefit from eventual settlement in Australia.

Holding children and young people in detention is particularly harmful - it accentuates developmental risks, threatens the bonds with significant caregivers, limits educational opportunities, has destructive psychological impacts and exacerbates the impacts of other traumas (APS, 2004; Thomas & Lau, 2002). These impacts were amply documented in the Human Rights Equal Opportunity Commission inquiry into Children in Immigration Detention (2004), which found alarming levels of suicidal ideation and acts of self harm amongst young detainees; alarming levels of Major Depressive Disorder and Post Traumatic Stress Disorder amongst young detainees; diagnosis of other mental health problems, including anxiety, nightmares, bed wetting, dissociative behaviour, emotional numbing and a sense of hopelessness. Evidence also suggested that the levels of mental health care required by these young people could not be delivered effectively in a detention setting.

Research also demonstrates the harm associated with extended periods of detention. This research indicates that “longer periods of detention are associated with worse outcomes” (Robjant et al, 2009, p. 310). For example, those who were detained for longer than 6 months showed greater levels of traumatic distress related specifically to detention compared to those who had been detained for shorter periods (Steel et al, 2006). Those who had been detained for extended periods (three years on average) were struggling to rebuild their lives in the years following release from detention, and for most the difficulties experienced were pervasive (Coffey et al, 2010).
The key to avoiding mandatory indefinite detention is to explore and implement alternatives to detention. Two reports last year document viable alternatives to detention (Latrobe Refugee Research Centre (2011) & UNHCR (2011), and cite most other countries around the world, who do not have a policy of mandatory detention. Importantly, the UNHCR (2011) finds that there is no empirical evidence that detention deters irregular migration, with alternatives being significantly cheaper than detention, and with people released into the community reporting better outcomes in terms of self-reliance, overall health and wellbeing.

Recommendation 7: Immigration detention has been found to have an independent, adverse effect on mental health by exacerbating the impacts of previous traumas, and is in itself an ongoing trauma. It is therefore recommended that the Australian Government remove the policy of mandatory detention and that:

- Detention be only used as a last resort, as a short-term option, and only for as long as is needed to enable appropriate security and health clearances to be completed;
- Community-based alternatives to detention be prioritised ahead of detaining people offshore or in remote locations;
- In the best interests of the child, no child should subject to detention at any point in their immigration processing;
- Based on the evidence linking longer periods of detention with poorer mental health outcomes, specific time limits be placed on the duration of detention, with ongoing detention being based on individual assessment and subject to judicial review.

7.3.1.2 Better conditions within detention

Where immigration detention is deemed necessary, further human rights protections are needed for asylum seekers who are detained.

During the previous decade the policy of indiscriminate mandatory detention has led to the numbers within immigration detention reaching unsustainable levels particularly at times of high periods of irregular migration to Australia. Over-crowding magnifies the above-mentioned concerns, particularly intensifying mental health difficulties faced within the detention environment.

The lack of access to mental health services is also of particular concern, especially within remote and offshore detention centres, such as the Christmas Island detention facility. While recently there have been additional resources allocated for mental health service provision,
the system of mandatory detention, particularly in remote and offshore locations, inevitably compromises the ethical delivery of psychological services. As Davidson (2010) points out, there are concerns about the suitability of clinical expertise and assessment instruments in this context, along with the lack of suitable interpreter services or mental health services for children and young people. Suitable continuing professional development and peer supervision is also unlikely to be available for mental health professionals providing services in offshore detention centres.

Refugees’ experiences of immigration detention have also offered compelling evidence that detention has impeded efforts to address their mental health needs, while mental health professionals have noted the challenge “to remain advocates for the civil and human rights of these detainees, while retaining the counselling role” (Gordon, 2011, p. 12).

While the Detention Health Advisory Group on which the APS is represented has developed mental health policies and procedures in regard to the health and wellbeing of detainees, particularly around suicide and self harm issues, the implementation of these policies in practice has remained poor. Concerns have also been raised about the mental health of detention centre staff and the development of services outside existing systems of state and commonwealth health and mental health services.

Where detention is deemed unavoidable, significant improvements are necessary in the delivery of mental health services. Services should be provided as part of State and Commonwealth service systems, adhering to National Practice Standards and professional codes of ethics and retaining clinical autonomy from detention providers, while the training and support of all staff working within the detention network, including mental health professionals, needs to be significantly improved.

Regardless of the capacity of existing mental health supports, the APS has concerns that the system of mandatory detention of asylum seekers, particularly in remote, offshore locations, inevitably compromises the ethical delivery of psychological services.

Australia’s policy of mandatory detention has led to overcrowding and deteriorating facilities. Where detention is deemed necessary, the APS recommends:

Recommendation 8: Where detention is deemed necessary, the APS recommends that better conditions are needed to meet human rights standards, including:
• Significant improvements in detention centre facilities and services, including increased access to mental health services, with acknowledgement however that ethical delivery of such services is seriously compromised, particularly in offshore and remote facilities.

• Provision of adequate resources, support and training in mental health, human rights and cross cultural issues for all detention centre staff, to ensure the optimal health, safety and wellbeing of staff and contractors as well as detainees.

• Locating detention centres in areas where professional support networks are readily accessible, rather than in remote and offshore locations, to support more effective provision of mental health services.

7.3.1.3 Greater accountability

While the APS supports many actions listed within the draft plan, we acknowledge a greater need for accountability to ensure the priorities are realized in practice.

For example, while the plan states that ‘the Australian Government will continue to ensure that detention is not indefinite or otherwise arbitrary’, and that children will be moved into community detention, the latest ABS data shows:

- There are currently over 4500 people in immigration detention facilities
- Over 500 children are currently in detention facilities
- Over 2000 people currently held in detention for over 12 months (32%), with some more than 3 years.

Similarly, while the plan acknowledges the role of the Commonwealth Ombudsman and the Australian Human Rights Commission to have powers to enable it to report on conditions within detention centres, there is no obligation or responsibility for the government (DIAC) to accept or act on these recommendations.

The APS is also concerned that mental health services within detention are provided outside existing state health systems and in some cases, in contravention of National Practice Standards and professional codes of ethics.

Recommendation 9: It is imperative that greater accountability mechanisms be developed to ensure that the priority human rights areas are addressed in practice. This includes more specific targets and timelines, greater reporting requirements and further responsibility to act on findings of reports.
Recommendation 10: The APS recommends that persons in immigration detention should receive physical and mental health care commensurate with care to the broader community; service agreements between Commonwealth and State governments be prioritised; and that mental health employment and service delivery contracts be developed in line with National Practice Standards.

7.3.2 Community attitudes and multiculturalism (208)

The APS also acknowledges that key to realising the human rights of refugees and asylum seekers is positive and accurate representation of refugee issues (e.g., in the media, by government). This includes the promotion of personal survival stories, use of accurate language in reference to refugees and asylum seekers, education about the contexts from which refugees have fled, anti-racism education, and the identification of the contributions made by refugees to the broader community.

More generally, while the expression of racism and prejudice may have changed over recent decades from overt to more covert and subtle forms, there is strong evidence to suggest that it is still prevalent in Australia (Dunn, Forrest, Babacan, Paradies & Pederson, 2011; Paradies, 2006; APS, 1997).

There is compelling evidence of a link between ethnic and race-based discrimination and poor mental health and wellbeing (Paradies, 2006). Evidence suggests that many Australian migrants and refugees experience discrimination and intolerance (Fozdar & Torezani, 2008). The perception of discrimination in the community by refugees significantly affects their wellbeing and integration into Australian society (Davidson, Murray, & Schweitzer, 2008).

Evidence suggests that negative attitudes are largely based on information (Turoy-Smith, in press) and can move in a more positive direction with adequate education targeted at multiple levels and campaigns aimed at changing attitudes and promoting accurate and positive stories about migrants and refugees (Pedersen et al, 2011).

Recommendation 11: The APS encourages governments to recognise that culture-based discrimination has far-reaching health, mental health, social and economic consequences for individuals and communities. We endorse the development of a National Anti-Racism Partnership and Strategy in close collaboration with those affected by racism and with associated actions and resources that enable racism and discrimination to be fully addressed.
Climate change is arguably as much a human rights and equity issue as it is an ecological problem. Climate change is already undermining the realization of a large number of internationally protected human rights (ICHRP, 2008), like the right to health, the right to food, the right to work, the right to a place to live. Furthermore, the worst effects of climate change are likely to be experienced by people who are already most vulnerable and disadvantaged, who already have the poorest human rights protection, and who are likely to have least access to resources to effectively adapt to impacts. ‘A vicious circle links precarious access to natural resources, poor physical infrastructure, weak rights protections, and vulnerability to climate change-related harms’ (ICHRP, 2008).

Increasingly, attention is being placed on the physical, health and psychosocial impacts of climate change (e.g., Costello et al., 2009). It is here that most of the negative impacts on human rights are experienced. The changing climate is affecting the basic requirements for maintaining health: clean air and water, sufficient food and adequate shelter (WHO, 2009). Health and psychosocial impacts include:

- Acute health effects from epidemics and natural disasters,
- Increased incidence of infectious diseases like cholera and the diarrhoeal diseases, vector borne diseases including malaria, and dengue,
- Increased transmission of diseases through unclean water and contaminated food,
- Higher levels of air pollutants such as ground level ozone leading to increased respiratory illnesses (WHO, 2009),
- Threats to livelihood from rising sea levels, floods and droughts, and loss of habitat, water and food shortages, and threats to livelihood,
- Displacement, dislocation from community, financial and relationship stress, multiple losses, increased risks of depression, anxiety related disorders, grief and substance use disorders from increased mass migration (Agyeman, Devine-Wright, & Prange, 2009),
- Large-scale social and community effects of issues such as increased conflict and violence (e.g., heat-related violence (Anderson & DeLisi, in press),
• Resource disputes (Reuveny, 2008), and
• Trauma and adjustment following disasters (Norris, Stevens, Pfefferbaum, Wyche, & Pfefferbaum, 2008).

The health and psychosocial impacts of climate change listed above affect numerous human rights: to health, to life, to food, water, shelter and property; rights associated with livelihood and culture; rights to migration and resettlement; and rights to personal security in the event of conflict.

**7.4.1 Climate policies also have human rights impacts**

Climate change mitigation and adaptation policies also have a significant impact on human rights, as is briefly noted in Australia’s important National Human Rights Action Plan.

Mitigation policies have clear human rights implications – any decision to reduce emissions, protect forests, produce biofuels, close coal mines, build wind farms etc will affect food, water, health, livelihood, culture, of numerous people in particular places.

Similarly, adaptation policies will also have human right implications. Pre-emptive adaptation activities undertaken before or during climate change impacts reduce the risk of human rights violations from climate change impacts. However adaptation actions that take place after the impacts have occurred may affect human rights, for example, if communities are relocated away from their homeland due to severe tidal surges that destroyed their homes.

Addressing climate change impacts and climate change policy on human rights is therefore essential.

Human rights provide a framework within which to think through the risks of climate change and the policy structures and mechanisms required to provide effective responses to those that most need them. There are several reasons why including climate change impacts in the human rights action plan is important.

First, human rights prioritise harms to actual persons. Human rights values can help to focus attention on the inherent unfairness of negative climate change effects, in which the costs are borne less by the people who created the problem with carbon overuse, and more by innocent people who have contributed far less to the problem. A human rights focus may help to address the ethical issue of whether this injustice can be redressed with international climate policies, or whether it will be perpetuated.
Second, considering the human rights consequences of climate change focuses attention on the most vulnerable in society. It is widely acknowledged that social and economic vulnerability greatly increases the risk of suffering from climate change impacts. A human rights focus redirects attention to people who are otherwise likely to be ignored or unheard.

Third, including climate change impacts in the action plan opens the way for mitigation and adaptation policies to be framed or evaluated by reference to human rights thresholds. Carbon pricing, deforestation, coal subsidies, will all lead to outcomes that, like climate impacts themselves, can be reviewed in advance for their likely human rights effects. If specific policies are expected to threaten human rights, they could be altered or rejected.

Finally, already people negatively affected by harms due to climate change are turning to the hard law language of human rights for protection (Caney, 2006). This is a pattern that is likely to continue. Including climate change impacts in the human rights plan is therefore a strategic and timely step.

7.4.2 What should be included and where

The reference on p.15 (61) to the Australian Government’s commitment to implement its Clean Energy Future Plan, ‘including a carbon price and financial assistance for those who need help the most, particularly pensioners and low- and middle-income households’ is commendable. Climate change impacts could also be addressed in many other sections of the existing action plan. For example:

- Introduction (p2, para 5). The list summarising key human rights issues for Australia should, in its list of specific groups in society, also include ‘people experiencing poverty, and people living in degraded or climate sensitive environments’. The same addition should be made in the section titled ‘The human rights experience of specific groups in Australia’ (p15).
- The action plan summary (p3) should also include a dot point referring to climate change impacts e.g., ‘ensuring that climate change adaptation strategies are fair and equitable and address existing levels of disadvantage’.
- The section titled ‘Human rights concerns of the general community’ (p9) should include ‘Ensuring climate adaptation strategies are fair and equitable’ in the second sentence.
- Asylum seekers: Certain countries, and large regions of other countries, are becoming uninhabitable, or will soon be so. The number of climate refugees displaced by changed environmental conditions is likely to increase significantly (as high as 200 million, Myers (2002)). There is an urgent need for Australia to develop a
responsible and comprehensive plan for how to receive and support increasing numbers of climate refugees in our region.

- **Natural disasters:** The existing plan makes reference to ‘ensuring accessible communications for people with disability in event of emergency’ but should also include:
  - Ensuring human rights protection following disasters
  - Ensuring that affected persons and their communities are fully consulted and can actively participate in all stages of the disaster response in accordance with their human rights
  - Ensuring vulnerable populations have access to information about disaster risks as well as adequate opportunities to build their resilience to disasters.

- **Aboriginal and Torres Strait Islander peoples (p15):** should include, after the first sentence: ‘They also live in some of the most climate vulnerable areas in the country’.

- **Children and young people (p27):** This section should also include a reference to recognising the importance of protecting future generations from the threat of climate change and widespread environmental destruction.

- **Climate mitigation and adaptation policies:** As in item 61, there should be a section requiring the Australian, State and Territory governments’ to review climate mitigation and adaptation policies through a human rights lens to ensure that they respect the rights of vulnerable individuals and communities.

**Recommendation 12:** Climate change impacts and climate mitigation and adaptation policies need to be addressed more substantively in the human rights action plan.

8. **Conclusion**

The Human Rights Action Plan represents an important opportunity for Australia to realise and strengthen its commitment to human rights.

We particularly commend a number of proposed new initiatives and reforms that accord strongly with the mental health and community wellbeing priorities espoused by the APS.

The APS believes that by improving the legal framework for human rights and strengthening priorities and actions for particular individuals and groups that experience discrimination and disadvantage, the action plan will be a stronger mechanism for protecting the human rights of all Australians.
10 References


www.usask.ca/cuisr/sites/default/files/BanksEconImpact.pdf


http://www.psychology.org.au/inpsych/roundtable_racism/#bd


