Responding to the Christmas Island health care crisis

To the Editor: Recent media reports of unsafe maternal and child health practices at the Christmas Island immigration detention centre suggest an alarming contrast between the care available to asylum seekers and that available to Australian nationals.\textsuperscript{1,2} The reports also appear at odds with the Department of Immigration and Border
Protection’s factsheet that states: “All detainees in immigration detention have access to health care at a standard generally comparable to the health care available to the Australian community” — though the use of “generally” allows for unqualified departure from the standard.

Australia’s low infant mortality rate (3.3/1000 births) is testament to high-quality specialist antenatal, perinatal and child health services. Yet on Christmas Island, where pregnant women are detained and for whom Australia has a duty of care, there is no sonographer. A pregnant woman who was denied an ultrasound and miscarried was apparently told: “They keep telling me that you are in detention centre and should not expect a lot.” This seems somewhat callous — since current policy appears designed to routinely detain pregnant women on Christmas Island. In our view, if this is to happen, then it is reasonable for a mother to expect access to appropriate antenatal and perinatal care, and for that care to be provided.

Doctors providing services on the island have raised concerns that routine developmental screening and assessment does not occur for children, and that specialist paediatric mental health support is not available. While we oppose the detention of children, if it occurs, then adequate child health services must be provided.

Remoteness is not an excuse: Australia has considerable history and expertise in providing health care services against geographical challenges, whether by specialist outreach services or by aeromedical retrieval. Australia also has one of the largest reported paediatric telemedicine services, which has provided specialist advice, including in perinatal care and child and youth mental health, throughout Queensland since 1999. While local clinical resources clearly need to be increased, support could and should be provided to clinicians through the appropriate use of telemedicine. It need not be technically complex or expensive, and the necessary resources exist within Australia.

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