

National Inquiry into Children in Immigration Detention 2014

Sydney Public Hearing

Thursday, 31 July 2014

President	<p>And now we'd like to call the next witness who is Professor Elizabeth Elliott.</p> <p><i>Swearing in of witness</i></p> <p>Thank you Professor Elliott I will pass you over to Counsel.</p>
Ms Sharp	<p>Professor Elliott you are a paediatrician</p>
Professor Elliott	<p>Yes.</p>
Ms Sharp	<p>Could you briefly state your qualifications and your experience in working with children?</p>
Professor Elliott	<p>I'm a consultant paediatrician at the Children's Hospital at Westmead and also Professor of Paediatrics and Child Health at the University of Sydney, so I've been qualified for well over 30 years.</p>
Ms Sharp	<p>Thank you. You have been retained by the Commission to provide some advice on the health of children in immigration detention.</p>
Professor Elliott	<p>Yes, I recently visited Christmas Island with the President.</p>
Ms Sharp	<p>Yes, you were there at Christmas Island for approximately three days earlier in July?</p>
Professor Elliott	<p>We were, and in fact we were delayed for 53 hours I think in Perth due to a problem with the runway which was indicative to all of us of the ridiculous situation of having people stranded 4 hours flight from Perth with very limited access.</p>
Ms Sharp	<p>And prior to your role in advising the Commission have you had any experience in dealing with asylum seekers in immigration detention?</p>
Professor Elliott	<p>No.</p>
Ms Sharp	<p>Is it right that the purpose of your visit to Christmas Island in July was to examine and</p>

	consider the health of the children, the health and wellbeing of the children in immigration detention at Christmas Island?
Professor Elliott	The purpose was, as a clinician, to make observations and to speak with parents and children. I was not there to provide clinical consultations, but we really did have the luxury of unobstructed access to families and opportunities for long interviews with them and opportunities to visit them in their accommodation.
Ms Sharp	How many children, approximately, did you speak with while you were at Christmas Island, in the sense of interviewing them?
Professor Elliott	I understand there were around 200 people that we interviewed collectively. There were five of us in the team.
Ms Sharp	And of those 200, some were children?
Professor Elliott	Yes, in fact we interviewed unaccompanied minors who were boys between the age of 14 and 17, and then a whole lot of families with children.
Ms Sharp	Professor Elliott, for the benefit of those here today, could you tell us about your impressions and observations of Christmas Island and whether you regard it as an appropriate place to detain children.
Professor Elliott	Well I think as we've heard today, it's a totally unsuitable place to detain children. First of all it's isolated, it's remote, it's a tropical climate and very hot. There is a wet season which is characterised by obviously torrential rain and high winds. People are living in small metal containers, as we've heard, in very close proximity so there is inevitably spread of the common childhood infections, again as we've heard, gastroenteritis and respiratory infections. When we visited people living in their rooms they are really incredibly cramped, so often a bunk bed and then if you have a cot beside that bed and put in there a small cupboard and a small fridge, then there's very little space for a child to walk around or play. Perhaps a metre squared, which is totally unsatisfactory for children who are in developmental phases. One of the previous witnesses mentioned the walkway between the rows of cabins and parents were very reluctant to put their children down to crawl on those because they were perceived as being dirty. They said men spat on them, kids sometimes weed on them. People obviously were walking up and down them all day. So it was a very inappropriate place for children to play.
Ms Sharp	And what can you tell us about the space, the spaces other than in the cabins or containers? What spaces were available to children to play in?
Professor Elliott	Well we did see in Construction Camp there is a playground that has been built, and I don't know whether that's been built following the visits by the previous doctors and

	<p>that now has a shade cloth on it, and we did see evidence of another play area being built nearby. You know...one of those sort of... bright coloured kids play areas. We were taken to a room because the women were very concerned about this lack of an appropriate space for children to play and explore, and we were taken to a room which was a reasonably large room, air-conditioned, had been freshly decorated and had some new rugs on the floors and we were shown a cupboard where there was some new toys, and we were told that this was going to be a place that women with young children could take their children to play, but there are so many children on the island. There are 174 children on the island and it appears that people would be rostered to have access to that space, perhaps for an hour a day. We don't know the details and it did look to us that it hadn't yet been used.</p>
Ms Sharp	<p>What about the older kids, what spaces did they have to play and run around?</p>
Professor Elliott	<p>The older boys were particularly concerning because they were a group who was really very distressed and depressed, and they did say that they were taken to the oval, sometimes twice a week to run around. There is a very nice swimming pool that's just been built on Christmas Island, really quite close to the camps, but I don't think the people in detention have ready access to that pool. I personally didn't see any basketball courts or tennis courts or, you know, anything else any of the normal facilities that our children would have access to and indeed need for their development.</p>
Ms Sharp	<p>I take it you would have spent some of your time on Christmas Island just walking around making observations. Is that right?</p>
Professor Elliott	<p>Well it's very restricted. You know, we have to check in, show our passports, get a badge. They asked to give up mobile phones, not allowed to take any photographs. You have to be accompanied by a guard all the time. So, you know, we didn't do a lot of wandering around. We wandered from one camp to another with guards, but we were given good access during our visit.</p>
Ms Sharp	<p>I was just wondering, what sort of activities did you observe children undertaking while you were there?</p>
Professor Elliott	<p>Well as one of the previous witnesses said, I didn't see many children playing. I think that one visit that we had to a room in Construction Camp, I think there were some children playing in the structured play area, but I didn't see children playing otherwise and, of course, one of the issues of great concern to all of us was that these children are not going to school so they're not getting... they haven't got a structure to their day and the normal educational opportunities that we would anticipate as their right.</p>
Ms Sharp	<p>Professor Elliott, what are these children doing if they're not playing and they're not</p>

	going to school?
Professor Elliott	I don't know what they're doing most of the day. I mean there is a structured program which we were shown which identifies that there are outings that people can participate in. Some people said to us, once you've done the bus trip three or four times, and you're not allowed to get out of the bus, then you know it becomes a bit pointless going on that trip again. So, you know, we mainly interviewed parents and we had a set place to interview parents. We didn't, we weren't wandering around the camp sort of observing what children were doing.
Ms Sharp	You mentioned there were 174 children on Christmas Island. About how many of them were babies?
Professor Elliott	Well I don't know that exact figure and the Commission have probably got that figure, but I think there were at least, you know, 26 to 30 that we saw. That is children under the age of 12 months, and then I think there are 26 unaccompanied minors who were the older boys.
Ms Sharp	You mentioned earlier that the mums of the babies were reluctant to let the babies go on the ground and crawl. What effect does that have on the babies?
Professor Elliott	Well, of course, it interferes with their normal motor development. Their exploratory behaviour, their fine motor development. I mean, it's a very odd situation to find a baby in with restricted space. The other concern that they had, and this was raised again and again with us is that Christmas Island is a very bizarre place and it has some very bizarre birds and animals, and one of the complaints from the parents was there are giant centipedes on Christmas Island which really can give you a painful sting, particularly bad if it's a young child, and they were very anxious because these are sprayed for intermittently. They live under the cabins and when the spraying takes place they often come up into the cabin and they're found in shoes or socks. The other issue was these giant robber crabs which pervade the island and which are bizarre creatures, and Christmas Island, I think they're called frigate birds, which dive bomb all the time, so it's really quite an intimidating environment for adults, let alone children.
Ms Sharp	Did the children say anything to you about the crabs or those centipedes?
Professor Elliott	They did. Some of them were having nightmares about crabs.
Ms Sharp	What are you able to tell us about the health of the babies on Christmas Island?
Professor Elliott	Well look, as we know, young children are susceptible to any virus that comes their way and certainly when we were there, there was a group of children who had, I

	<p>would suggest, respiratory syncytial virus. They were coughing and wheezing, breathing quickly, and that's a common virus, but in young children can cause bronchiolitis, lower airway disease, but in older children and adults might cause a cold and a cough. So there was that sort of illness. Gastroenteritis and respiratory illness and some skin illness, and then there were more chronic problems. A lot of children had asthma and adults indeed had asthma, itchy eyes and itchy skin. The issue of phosphate dust was raised earlier and I'm not sure about the association between those symptoms and the environment. And then there were kids with problems that required surgical attention. For example, a child with an abscess under her chin, a boy with an undescended testis that required surgery, and the delays in getting to that specialist care was, of course, of great concern to parents. There were some children, there was a two and a half year old child who wasn't speaking yet, whose hearing had not been assessed. There was a child with glue ear who needed an operation was waiting for transfer to the mainland, and the uncertainty posed by these delays is really very upsetting for parents. And one thing that we found particularly bizarre was that parents were unable to be told, for some reason, when they were to be transferred. So even if they were going the next day and they were highly anxious, they were not told that they were going to be transferred. We were told that was for security reasons.</p>
<p>Ms Sharp</p>	<p>What are you able to tell us about the developmental pathways of babies and young children, and whether they've been affected by immigration detention?</p>
<p>Professor Elliott</p>	<p>Well I think we heard from the psychiatrist earlier that the mental health and state of level of anxiety and depression in mothers is really transferred to young infants. They perceive that it disrupts the bond between mother and child and that can adversely affect outcomes. So for example we know that it is not only deprivation of nutrition that can cause growth failure for example. We know that there is what's called non organic failure to thrive. Failure to grow which is secondary to lack of attention, lack of interaction between the environment and the child. And of course there are all the mental health concerns that we saw. So we saw young children who had regressed to bed wetting, who had started stuttering, who were having nightmares. We saw older children who were having flash-backs associated with the trauma experienced in their own country and were unable to sleep, who said they were crying a lot of the time. Boys, you know, 14, 15, 16 were crying most of the time, felt helpless and hopeless. And we've heard some of the self-harm. We saw children who had withdrawn to their cabins. We went to see one little girl who had been under a blanket for 3 days, she was aged 12, her mother had self-harmed, she was talking about self-harm. She was saying it would be better to be dead than living here and she was refusing to eat, and in a letter that she wrote to us she said that she figured that if she just went to her room and stopped eating, maybe she would die and maybe that would be the best way out.</p>

Ms Sharp	Are you able to put a percentage on the number of children you became aware of or spoke to who were exhibiting signs of mental distress?
Professor Elliott	I would have to say that almost every child we spoke to who could articulate their feelings expressed mental distress. The younger children often expressed their distress through drawings, those who were old enough to make a drawing, and certainly the Commission has some of those drawings. Children describe themselves as living in jail and children drew themselves almost inevitably with tears, and they certainly were very much picking up on the distress of their parents. So we have a situation where people have been traumatised in their own country and have been re-traumatised. Sorry just one last thing. Some of the unaccompanied boys had been, their age determination had been incorrect. So not only had they been traumatised at home, been on a boat trip, arrived in Christmas Island, they had been sent to Manus Island where they were very traumatised because of the protests and disruption that was happening in the men's camp there and then they were sent back to Christmas Island only to be told that as soon as they turned 18 they would be going back to Manus. So there is a lot of anticipatory trauma as well, as people anticipate that their lives are going to get worse rather than better.
Ms Sharp	And of course as a paediatrician you are concerned not only with the mental wellbeing of the children but also with their physical wellbeing. Are you able to put a percentage on the number of children you became aware of at Christmas Island who had problems with their physical health?
Professor Elliott	Look I can't give you a percentage but again a large proportion of the children that we saw had one or other acute or chronic problem.
Ms Sharp	Are you able to make any comments on the nutrition of the children, whether they were well nourished or poorly nourished?
Professor Elliott	Almost universally they described the food as poor and they didn't like the food. The week that we visited they said for the first time ever they had had some watermelon and some mandarins. The children had never seen those before, they had previously only had apples. We had a lot of complaints that there weren't eggs available for children, so eggs as you know, are quite a staple part of the diet of young children and in some cultures have really significance for nurturing children. And we did ask why eggs weren't available. One, apparently they are expensive and two, of course every bit of fresh food has to be flown in. What was rather ironic about the eggs was that the place was crawling with chickens, wild chickens which apparently couldn't be used to harvest eggs and when we pursued this issue of why women couldn't have access to eggs to cook for their children we were told it was an infection risk. So, although we questioned that women would probably be able to cook an egg

	adequately to give to their child we were told that was not the case.
Ms Sharp	Professor Elliott, did you form any view about whether detention interrupts the ordinary parenting roles that are performed by parents in relation to their children.
Professor Elliott	Absolutely and I think as you know when we were there, there were 10 women I think on 24 hour surveillance because they had self-harmed. These were all.
Ms Sharp	I'll come back to those in a minute
Professor Elliott	Well it's in relation to your question. These were all people with young children under the age of 12 months so the fathers had to take on all the parenting and that certainly disrupts the relationships. And the older children often feel responsible for looking after these children if their mother is lying on the bed and not coming out of the cabin or unable to relate to the child. And we certainly saw in our interviews many many women with just desperately sad faces who had a very flat affect and weren't relating to anyone let alone relating appropriately to their child.
Ms Sharp	In your clinical opinion, and based on the observations that you made at Christmas Island how seriously are the conditions on Christmas Island affecting the health and development of the children there?
Professor Elliott	Well I think there is no doubt that the conditions on the island, not only the remoteness and the climate but the living conditions and the high level of mental ill health cannot fail to have an effect on the children. The other issue that I touched on earlier is the lack of opportunities for both free play and structured sporting activities and also the lack of education. At least if these children were in regular schooling they would have some friendships and peer support, the support of their teachers. And many of the older boys particularly expressed the fact that they felt that they were just missing out on education at a crucial time in their lives.
Ms Sharp	Can you tell us what the situation was with respect to schooling and the provision of education on Christmas Island?
Professor Elliott	It was a bit unclear. It appeared that some of the children had gone for some visits to the school outside the detention centre. Although one of the children said that they were bullied by and sneered at by some of the children in that school. Some of the children had attended language, English language classes and they were not going to any schooling at the time we were there. We weren't quite sure why that was, perhaps it was because it was a school holiday break, perhaps it was because the school was due to open soon, sometime soon. So it appeared that there had been really very little in the way of education and remember most of these people have been on Christmas Island now for over a year.

Ms Sharp	So, while you were there was it clear that there was no schooling actually offered within the detention facility?
Professor Elliott	There was nothing when we were there. We did meet at the airport, I think the President spoke to the incoming head of the school, so there is a school that they anticipate opening. We have no details about who will be offered schooling and whether it will be full time schooling or what.
Ms Sharp	But your point is that there have been many many children on Christmas Island for a long period already who have not had access to schooling. Is that right?
Professor Elliott	Absolutely.
Ms Sharp	Are you, and if you are not say so, but are you in a position to state what you anticipate will be the longer term impact on children and the development of children by reason of the fact that they have been in immigration detention on Christmas Island?
Professor Elliott	Well I mean there is no doubt that this sort of trauma in young children can have a lasting impact you know on mental health, on rates of anxiety, depression, self-worth, perception of hopelessness. And I think one of the most difficult aspects is that there, as you alluded to earlier in your questioning, there is no constant child psychologist let alone a child psychiatrist available in these centres and I think it is of great concern. I did see one aspect of behaviour which was of concern. We know that young children who abuse animals are more likely to grow up to exhibit anti-social behaviours and we were told stories of some of the children, not all, a few of the children kicking these wild chickens on the island and picking up and manhandling the chickens. So that sort of behaviour is quite abnormal and concerning and I have no doubt that unless these children get appropriate care many of them could go on to have long term problems.
Ms Sharp	I wanted to ask you a little bit about the care that was available to the children on Christmas Island. In your discussions with the parents and the children did you get a sense of whether a child psychiatrist ever attended at Christmas Island?
Professor Elliott	Look I was told by [redacted] that there was a child psychiatrist who I think had just visited or was about to visit Christmas Island but I don't have any concept of how often that occurred or how many times a child psychiatrist had been on the island. But that information should be available to you.
Ms Sharp	Can you tell me if there ever medical services that are provided and available on Christmas Island adequate to meet the needs of the children [inaudible]?

<p>Professor Elliott</p>	<p>Well I think we've heard very graphically that they are not adequate and in fact everything that we've heard from the witnesses this morning reaffirms the information that we received during our interviews. So when you're interviewing people, particularly people who are distressed, it's hard to know how accurate that information might be, whether it might be exaggerated. But it's all completely corroborated by the information that we've heard. So, first of all, there are lots of kids. They are not getting services quickly enough and they are certainly not getting the specialised services that are only available in some mainland centres. And if I could come to one of the questions you raised in a previous session, we were told that one of the reasons that people are not transferred is that there is not necessarily accommodation available in the place where the medical services are available. So, for example, there's often accommodation available in the detention centre in Darwin but the specialised, let's say paediatric cardiology services, are not available at that site. So, there is a major problem with transfers and we heard story after story of delays in transfers for medical care.</p>
<p>Ms Sharp</p>	<p>Are there any comments that you would like to make regarding the management of medical services on Christmas Island based on your observations?</p>
<p>Professor Elliott</p>	<p>Look, I didn't work in the medical services. I don't think I can really comment although we did have a few disappointing stories that we heard. One of them was a young woman who was suicidal who was to be transferred to the mainland because she was threatening another suicide attempt. And her key support person was her brother. She had been very traumatised in her own country and the President spoke to the Immigration Department and raised this case because it was one that was very distressing to all of us. We heard the next day that she had refused to be transferred to the mainland and when questioned the doctor said it was because he had deemed that the brother ... well it was because the brother was not allowed to go and when we asked why the brother was not allowed to go it was deemed that he was not relevant in the clinical care of this woman. Now this was a mental health problem with a suicidal woman. A young intelligent university student who was being denied that sort of support. So, you know, I think that there seems absolute sort of adherence to policy without any flexibility that you would expect and I think clinicians in this setting, as we have heard, have got a very important role to advocate but appear to have, you know, to struggle to do that.</p>
<p>Ms Sharp</p>	<p>Professor Elliott, can I now ask you about an event which recently occurred on Christmas Island. Apparently there are a number of young mothers who are on suicide watch at Christmas Island at the moment following an incident that occurred I think on or around 7th of July this year. Firstly, can I ask you what was that incident that occurred?</p>

<p>Professor Elliott</p>	<p>Just to take a step back, these women with young children are ... were concerned about the conditions in which they were living, felt that they were detrimental to their children and spoke to the Immigration Department. I think their request was could they be placed somewhere more suitable, at least until their case for consideration for asylum was heard. They were then given a meeting date and they met with the immigration officer and the reports that we got from the mothers was that all that they were told was 'you will never be settled in Australia. You will be going to Nauru or Manus Island and that's the end of the story'. Now I think these women had hoped that, having got together as a big group and gone with their families to give their case on behalf of their children, that they may have, you know, got some sympathetic treatment. But the abruptness of the response really I think set off an episode and many of these women just felt that was the last straw. They were going to be stuck here forever and many of those women self-harmed so I think the total was about 15 that self-harmed and certainly when we were there, there were 10 on suicide watch or self-harm watch. Now, one of the problems with that is that self-harm watch on Christmas Island is often by a big burly man with, you know, with tattoos and piercings who the women and children find quite frightening. They are in these small cabins, they are air conditioned because it's very hot but the door has to be opened all the time for this observation. So it's sort of lack of compassion, lack of humanity. We wouldn't have a young woman with a young baby on suicide watch by a man that they didn't know in the full view of everyone else. We would have a nurse watching that person.</p>
<p>Ms Sharp</p>	<p>And is it right that you actually spoke with some of the women who have self-harmed and spoke with their families?</p>
<p>Professor Elliott</p>	<p>We spoke with all of them and just to go back to the incident, you know, people started screaming and shouting. They threw plates out of their windows, they moved furniture, they didn't know what to do. There were mirrors smashed. People tried them to cut themselves and as I said, there was a whole spate of self-harm in association with that information that they were given. So, coming back, yes we did speak to all of the women who were being watched.</p>
<p>Ms Sharp</p>	<p>Was it just a stunt what they were doing or was this a serious attempt at self-harm?</p>
<p>Professor Elliott</p>	<p>Well, it has been suggested that this was blackmail. That these people were only trying to hang themselves or cut themselves because they wanted to get off the island. I mean, certainly, they want to get off the island but really you have to take a step back. What young woman with a young child would self-harm unless they were absolutely desperate and felt hopeless? Particularly in front of their children and we spoke to a lot of children who had witnessed this episode as well. The smashing of glass, the screaming, the shouting. It was a very frightening episode for everyone</p>

	concerned.
Ms Sharp	Are you able to give us some examples of the women who did self-harm?
Professor Elliott	<p>Yes. I mean there are people who have been persecuted and physically abused in their own country who have got on a boat, which they now see as their crime, to bring their children to Australia. One particular woman had a 13 year old boy and a 12 year old girl and a baby. She, after this announcement that there was no hope of ever ... of moving the children to a better environment. She tried to cut herself. The children witnessed this and she's been very depressed in my opinion, my observation, since then. So, she's got 3 children. The baby is, I think 9 months old and weighs 7kgs and hasn't gained weight for nearly 3 months and you know, I just had a brief look at the baby. Certainly evidence of decreased subcutaneous tissue which usually suggests acute weight loss or failure to gain weight. The next child up is a child who is 12 who had retreated to her room for 3 days. She had refused to eat and speak to anyone. When we went to visit her we did get her to speak, but she really feels that, she's the child that said my life is death and she had been threatening self-harm. One of her other concerns was not only the depressed state of her mother and other people in the detention centre was that there had been a few girls and I don't know their circumstances who had been transferred to Sydney. And she was able to see pictures of them on the internet and just could not understand how she could be different to someone else. So, I think that's another issue of concern is that people don't understand these discrepancies in policy. And the third child was a 13 year old boy. And these children had all been physically abused in their own country by a family member. He had started stuttering and then stopped speaking and he was clearly expressing hopelessness as well. So, within this family there were really 4 people who were suffering from the trauma of this situation and you know, we were all very distressed by this and I think that what also brought it home to me was all the interpreters we were using were crying during our interviews. So it was evident that perhaps they hadn't heard these long discussions with people and hadn't heard the detail and the extent of their distress.</p>
Ms Sharp	Now Professor you had the benefit of speaking with a number of the women who had engaged in self-harm in early of July, how serious did you regard their mental health issues as being?
Professor Elliott	Well I mean, young women are probably the ... you know, young women with young children are not a high risk category usually for suicide and self-harm. You know, unless perhaps they have got post-natal depression for example. But ... can you just repeat that question?
Ms Sharp	Yes. How seriously did you regard their mental health issues?

<p>Professor Elliott</p>	<p>Well I ... very seriously. I think for anyone to resort to self-harm, particularly someone who has dependent children, is extremely serious. And I might just say this while I think of it, that one of the major concerns which came up again and again and again was the uncertainty of the future. So people said again and again we haven't even been assessed. Even if you won't have us in Australia or you're going to send us somewhere else, please tell us when we might be assessed, please get on with this process. And I think that this protest that you referred to earlier was at exactly the time of a year in detention. And I think people sort of go on for a while thinking oh, perhaps there's hope, and then they reach an absolute end point and that end point for a lot of them was that one year anniversary of being in detention. So I think it is very serious the current sort of mood and mental health environment on Christmas Island at present.</p>
<p>Ms Sharp</p>	<p>And Professor in your opinion as a paediatrician is it appropriate for babies to be detained on Christmas Island.</p>
<p>Professor Elliott</p>	<p>No, I don't think it's an appropriate place to have babies unless it's for a very short period of time for processing and I really have a grave fear that there will be an outbreak of a serious disease and in that case people are really 8 hours from the mainland, 4 hours flight either way.</p>
<p>Ms Sharp</p>	<p>And again Professor, in your opinion as a paediatrician is it appropriate for children to be detained on Christmas Island.</p>
<p>Professor Elliott</p>	<p>No.</p>
<p>Ms Sharp</p>	<p>Professor what Morrison, the Minister for Immigration, noted on the 7.30 Report last night that the President of the Commission is not a doctor. He said, and I think this is a direct quote "These are difficult environments and appropriate care is provided by our people". Now Professor you are a doctor, is appropriate care being provided to the children on Christmas Island?</p>
<p>Professor Elliott</p>	<p>I suspect that the people working on Christmas Island are doing their best within the constraints of the system but it is totally inappropriate to have young children in a crowded environment in a very remote location without access to the full range of medical facilities and we've heard many examples of the lack of access to specialised care which is clearly needed in this situation. So the services really cannot be adequate with those considerations.</p>
<p>Ms Sharp</p>	<p>And lastly Professor, is there anything else based on your visit to Christmas Island and your interviews with the parents and children you would like to tell this inquiry about the treatment, the care or the health of children in immigration detention?</p>

Professor Elliott	<p>Well I think we really need a bit of humanity here and a bit of compassion and we didn't see a lot of that on Christmas Island. I think that we're dealing with a very serious situation, I've only been to Christmas Island, I don't know what it's like in the other, particularly the offshore detention centres, in Nauru and Manus Island and I think that as has been said in the media the story does need to get out. I think regardless of the political policy these people are currently in our care and we must treat them humanely and we must offer them, particularly the children, the opportunities for access to health and education and freedom that we would expect for any of our children.</p>
President	<p>Thank you very much Professor Elliott for your evidence. We will now take a break if we may, just a short break until I think about just a 10 minute until about 10 to if you wouldn't mind coming back because we do have a number of other people whose evidence we want to listen to. So thank you again.</p>