

## **Report on Regional Expert Roundtable on Alternatives to Immigration Detention for Children**

19<sup>th</sup> to 20<sup>th</sup> November 2015  
Bangkok, Thailand

### **1. Background to the Roundtable**

Throughout the Southeast Asian region, detention as a response to the irregular entry or stay of refugees, asylum seekers, stateless people and trafficked people, including children, is the norm rather than the exception. The negative and long-lasting physical and psychological impacts of immigration detention on children have been widely documented. ‘Alternatives to Detention’ (ATD) on the other hand, have proven to be effective in meeting states’ migration management objectives including upholding national security and achieving timely case resolution, whilst also removing the negative impacts of detention on children. Yet, little progress has been made in Southeast Asia in developing sustainable and comprehensive ATD for children and other vulnerable populations, including those seeking asylum.

Currently only two of the ten members of the Association of South East Asian Nations (ASEAN) are signatory to either the 1951 UN Refugee Convention or its 1967 Protocol, and national legal frameworks to protect refugees and asylum seekers remain weak. According to the national laws of non-signatory countries such as Indonesia, Malaysia and Thailand, refugees and asylum seekers are considered to be ‘illegal aliens’ or ‘illegal immigrants’, and are thus highly vulnerable to arbitrary arrest, detention and forced deportation. Conversely, all countries in the region have signed the 1989 UN Convention on the Rights of the Child (CRC), which requires amongst other things, that detention be used as a matter of last resort, and that the best interests of the child are the primary concern.

Between 2013 and 2015, National Roundtables were held in Malaysia, Indonesia and Thailand which focused on ending the immigration detention of children. These Roundtables were hosted by the respective National Human Rights Commissions (NHRC) of each of the three countries and also involved representatives from government, academia, civil society and UN agencies. A key outcome of these Roundtables was agreement, in principle, that children should not be subject to immigration detention. Also agreed was the need for the formation of national-level working groups (comprised of government, NHRCs, and civil society), which would focus on exploring the potential for pilot projects on ATD for children. Although agreements were made to establish these working groups, there

remained a need to maintain the momentum generated during the National Roundtables and for these agreements to translate into action.

Against this backdrop, a two-day Regional Expert Roundtable on Alternatives to Detention for Children was hosted by Dr Seree Nonthasoot, Thailand's representative to the ASEAN Intergovernmental Commission on Human Rights (AICHR) and co-organised by the Asia Pacific Refugee Rights Network (APRRN) and International Detention Coalition (IDC). A key objective of the Roundtable was to bring together policy makers, practitioners and researchers to discuss the most recent developments in ATD, as well as to present the latest good practices from the ASEAN region and beyond. Focus was placed on sharing good practices relating to the development and implementation of ATD for children, and participants were given the opportunity to discuss the potential for replication of these practices in their respective countries, specifically through collaboration between civil society and policy makers. Finally, the Roundtable provided participants with an opportunity to identify remaining challenges and appropriate responses required to ensure effective implementation of ATD, as well as furthering understandings of this complex issue and inspiring cooperation at the regional level.

The Roundtable was attended by 50 participants from Indonesia, Malaysia and Thailand, including representatives from the following government ministries: from Indonesia, the Coordinating Ministry of Politics, Law and Security, Directorate General of Immigration, (Directorate of Human Rights and Humanitarian Affairs) Ministry of Foreign Affairs, Directorate of Child Welfare, Ministry of Social Affairs; from Malaysia, the Prime Minister's Office, Immigration Department and Social Welfare Department; and from Thailand, the Immigration Department and Ministry of Justice. The proceedings of the Roundtable were conducted under the Chatham House Rule.<sup>1</sup>

## 2. Key Outcomes and Recommendations

During the Roundtable, participants were given the opportunity to discuss within their country groups the good practices that had been shared and the steps that they felt could be taken in their respective countries to explore and implement ATD for children. These are summarised below

### Indonesia

There was **agreement amongst all participants that Indonesia must to go beyond detention as a migration management tool, and that children must be released from immigration detention centres and moved into shelters**. It was noted that pursuant to Indonesian law, the authorities may use their discretion to place children in facilities outside of detention centres. However,

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<sup>1</sup> When a meeting, or part thereof, is held under the Chatham House Rule, participants are free to use the information received, but neither the identity nor the affiliation of the speaker(s), nor that of any other participant, may be revealed. See: <https://www.chathamhouse.org/about/chatham-house-rule>

participants felt that greater sensitisation amongst local authorities and government ministries on the importance and benefits of ATD for children is needed.

Indonesian participants made the following recommendations:

- A smaller working group (led by the Coordinating Ministry of Politics, Law and Security but which includes representatives from all relevant government ministries, UNHCR and NGOs) be established to **conceptualise possible ATD for children in Indonesia** (first quarter 2016).
- Identify resources, including services needed for ATD, and map stakeholders who could provide or support such resources.
- **Standard Operating Procedures (SOPs) be developed by the working group** to enable the government to assess the vulnerabilities of asylum seeker and refugee children, and to find appropriate placements for them in the community, and outside of detention. The SOPs should be disseminated across the relevant government ministries, supported by information on protection issues provided by Komnas HAM (National Human Rights Commission), Komisi Perlindungan Anak Indonesia (Child Protection Commission) and Komnas Perempuan (National Commission for Women), and include a training component by IOM and UNHCR. In developing the SOPs, some aspects of the national referral, and screening and assessment mechanisms used in Zambia could be incorporated into a model for Indonesia.
- Develop these SOPs as well as materials required to **disseminate the SOPs widely across the country** through socialisation events in three main regions, namely western, central, and eastern Indonesia. In disseminating the SOPs to local authorities, facilitate participation by the Immigration Department, Social Welfare Department, and the Indonesian Police, as well as the support of UNHCR, IOM, NGOs and other relevant stakeholders. It is envisaged that feedback received from the dissemination of the SOPs would then be discussed by the working group and any necessary revisions adopted.
- In order to ease the serious overcrowding in existing immigration detention centres (especially in Medan), **more funding should be allocated to increase the number of shelters for children, especially unaccompanied minors (UAMs), across the country** (including eastern Indonesia). It was noted by participants that there must be clarity on which Ministry would be responsible for managing the allocation of such funds.
- In the meantime, due to the current shortage of shelters for UAMs, UNHCR and CWS' efforts to place UAMs with foster families in the community should also be supported.
- **Increase advocacy efforts** in conjunction with the draft 'Presidential Decree on the Handling of Asylum Seekers and Refugees' in order to prevent the detention of children, in particular recognition of 'refugee' as a legally-recognised status in Indonesia.<sup>2</sup>

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<sup>2</sup> Once signed, the Presidential Decree will provide clear guidance on procedures and responsibilities (for education, protection etc) for managing refugees and asylum-seekers in Indonesia, and will be aligned with international human rights law. Article 19 declares that *"all costs required for the*

## **Malaysia**

The Malaysian participants agreed that knowledge generated from the Roundtable provided them with ideas of the many ways in which ATD for children could be implemented; ATD are not restricted to a single approach or model, but rather, can take many forms, depending upon the country context. Furthermore, **the participants were in agreement that ATD for children should be implemented in Malaysia.**

The tripartite working group in Malaysia (comprised of representatives from the government, SUHAKAM and NGOs, many of whom were present at the Roundtable) has for the past year been exploring the piloting of an ATD model for UAMs, consisting of a temporary/transit shelter into which UAMs will be placed until appropriate care arrangements in the community can be made. UAMs who are referred to the ATD will also benefit from intensive case management to assist the child in achieving case resolution. The Malaysian participants also spent some time discussing the **importance of proceeding with the proposed pilot**, rather than waiting for legislative or formal policy changes, or for all aspects of the ATD model to be perfected. Until the pilot is implemented, it is difficult to know what the issues or challenges could be with the ATD model; by proceeding to pilot the model, the working group members will be able to work collaboratively to address any challenges that may arise.

The participants also noted that cooperation and collaboration between different stakeholders (governments, national human rights commissions, civil society and international organisations, etc.) was an integral element of the ATD examples presented at the Roundtable. Through such partnerships, stakeholders were able to share the challenges and work involved in responding to the needs of children who are in an irregular status. The participants proposed that in order to facilitate such a partnership, **a ‘working document’ should be created** that sets out the roles and responsibilities of each stakeholder, and how the working group members could best support each other.

Other initiatives recommended by the participants were:

- Organising for members of parliament to **visit detention centres**, so that the goal of ending child immigration detention is given more support at higher levels of government
- Working together to collect and make publicly available **disaggregated data on children in immigration detention centres**, including numbers, gender, country of origin, age and whether they are accompanied, unaccompanied or separated.

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*implementation of the Presidential Decree be imposed on the State Budget of the Ministry”, and Article 21 declares that “at the time that this Presidential Decree comes into force, any asylum seekers or refugees who are currently in immigration detention centres and other places, can be placed in local shelters”.*

See: <http://peraturan.go.id/rancangan/download/11e4b28513c7265ea1b4313430323136.html>

- Holding another **national roundtable on ATD in 2016**, as a follow-up to the 2013 national roundtable on ATD hosted by SUHAKAM. The national roundtable would once again provide an opportunity for a wider number of government and non-governmental stakeholders to hear more positive practices in ATD for children, and discuss ways in which such practices could be incorporated in the Malaysian context.
- A **training programme for service providers on working with children**, including age assessment and vulnerability training. Such training should extend to all government departments that come into contact with children in an irregular migration status, not just the immigration department.
- Draft a **guidebook for officers who work directly with children** that highlights relevant laws and policies relating to the rights of children in international and national legislation.

### **Thailand**

During the country group discussions, the Thai participants were drawn almost entirely from NGOs, academics, and international agencies; the Thai government was largely absent from the sessions on Day 2, and therefore the following outcomes and recommendations were developed without their feedback or input.

The participants from Thai NGOs and civil society organisations began by noting that while there were some positive developments in relation to ATD for children in Thailand, these were usually introduced on an ad hoc basis, without being based on domestic or international legal standards. They expressed a desire for **ATD to be developed more systematically, and grounded in formal laws or policies**. They also noted that there are limited organisations in Thailand working with refugee and asylum seeking children, and that more needs to be done to encourage other NGOs to assist refugee, asylum seeking and migrant children, as well as Thai children.

Participants from Thailand recommended that the following initiatives be pursued:

- The Indonesian model of shelters for UAMs run by Church World Service (CWS) (see pages 12-15 below) should be explored for possible implementation in Thailand. There was strong interest from Thai participants in advocating for a Memorandum of Understanding (MoU) to be developed between the Immigration Bureau, the Ministry of Social Development and Human Security (MSDHS), National Human Rights Commission of Thailand, and civil society to work in partnership to establish and coordinate similar shelters for UAMs in Thailand. The model of delegating the day-to-day care of the child to NGOs or the MSDHS is something that could be explored further.
- More could also be done to explore foster care arrangements, so that UAMs could be placed with families from similar countries of origin/ethnic backgrounds, accompanied by case management support.
- Although there has been some research conducted on the situation of children in immigration detention, it was proposed that a follow-up study be carried out to collect updated information on the background of children who

are/have been detained, detention conditions, and the mechanisms for their release.

- As a follow up to this Roundtable and the national roundtable in February 2015, further advocacy and capacity strengthening be undertaken with the Thai government to encourage ATD for children. It was proposed that the outputs from the Roundtable be shared with members of the Thai government who were not present, and to this end, this report of the Regional Roundtable be translated into Thai.
- The National Human Rights Commission of Thailand should conduct regular monitoring of immigration detention centres and make recommendations to the Thai government on improving conditions in the centres.
- Ensure the issue of child immigration detention is included in Thailand's Universal Periodic Review (UPR) process
- A working group comprised of NGOs, academic institutions and international organisations be established to pursue the above recommendations.

### 3. Overview of the Roundtable

#### a. Opening Address

Opening remarks were provided by Dr Seree Nonthasoot, Thailand's representative to AICHR; Vivienne Chew, the IDC's Asia-Pacific Regional Coordinator, and Julia Mayerhofer, APRRN's Interim Executive Director. It was stressed at the outset that although children may have violated immigration laws, they are not criminally liable, and thus should not be subject to immigration detention. Broad agreement had also been reached during the National Roundtables held in Indonesia, Malaysia and Thailand between 2013 and 2015 that children should not, in principle, be subject to immigration detention, given the harmful impact of detention on their physical and mental well-being and the existence of viable community-based ATD. It was also emphasised that the purpose of this Regional Roundtable was to harness the collective expertise of participants to explore solutions to the issue of child immigration detention in Indonesia, Malaysia and Thailand. Dr Seree also expressed his hope that these discussions could be expanded to other countries in the region, so that more countries in the ASEAN region could learn about ATD and the initiatives that have been, and will be undertaken by Indonesia, Malaysia and Thailand.

#### b. Session 1 - Immigration Detention Situation in Indonesia, Malaysia and Thailand

Representatives from Indonesia, Malaysia and Thailand provided an overview of the immigration and detention context in their respective countries.

The overview of the situation in Indonesia was provided by Brigjen. Pol. Drs. Chairul Anwar, the Assistant Deputy of the Coordination and Management of Transnational and Extraordinary Crime Division of the Indonesian Coordinating Ministry of Politics, Law and Security. Brigjen. Pol. Drs. Chairul began by providing an overview of the latest statistics pertaining to refugees and asylum seekers in Indonesia, including numbers of children in detention. He then highlighted some of the

challenges that the Indonesian government faces in responding to the refugee and asylum seeking population, including issues of overcrowding and resource constraints in immigration detention centres. He also spoke of how children in detention have been particularly impacted by such issues. Brigjen. Pol. Drs. Chairul highlighted some of the initiatives that the Indonesian government has undertaken to develop and expand ATD, including expanding accommodation centres for unaccompanied minors (UAMs) and strengthening collaboration between government, non-governmental organisations and inter-governmental agencies.

Mr Ahmad Naser bin Awang, Principal Assistant Director of the Immigration Department of Malaysia, then provided an overview of the Malaysian immigration context. He highlighted relevant provisions of the Immigration Act relating to the arrest and detention of those found without a valid passport and visa, and provided details of the 13 immigration detention centres in Malaysia, as well as the nationalities of current detainees. Mr Naser also highlighted some of the options for ATD in Malaysia, including the '3 Plus 1 Programme' via which people are able to voluntarily depart from Malaysia without being detained, once they have paid a MYR 400 (c. USD 90) levy and purchased air tickets to return to their country of origin. Mr Naser also shared information on the system for the release from immigration detention of 'people of concern' to UNHCR. Finally, Mr Naser spoke of the processes and systems in place for child detainees (for example, contact with families), including collaboration with local NGOs, the ICRC (for family links) and UN agencies, as well as some of the challenges involved in resolving their immigration cases.

Lastly, Pol. Lt Col. Phakit Jiraprasertsuk, the Deputy Superintendent of the Immigration Bureau at the Bangkok Suan Phlu Immigration Detention Centre, provided an overview of the immigration context in Thailand. He outlined some of the standard operating procedures (SOPs) in place at the Bangkok Suan Phlu Immigration Detention Centre, including mechanisms for the 'bailing out' of refugees and asylum seekers, as well as the identification of victims of human trafficking. Pol. Lt Col. Phakit also shared with participants some of the services available for children in the Suan Phlu Immigration Detention Centre, including an immigration day care centre run by the International Organization for Migration (IOM).

### c. [Session 2 - Introduction to Alternatives to Detention and International Standards](#)

Vivienne Chew, the IDC's Asia-Pacific Regional Coordinator, introduced the session by highlighting some of the global trends and developments around ATD. She noted that there is a growing shift from immigration detention being used as a measure of first resort, to a last resort, and that ATD are increasingly implemented at the national level. She also outlined some of the key challenges with the use of immigration detention, including its ineffectiveness as a deterrence measure, inability to support case resolution, as well as the damaging impact of detention, particularly on vulnerable groups such as children.

# WHAT ARE ALTERNATIVES TO IMMIGRATION DETENTION?

More than **250** examples of alternatives to immigration detention have been identified in over **60** countries.

Successful alternatives to detention uphold rights and ensure basic living assistance, legal advice and case management to maximize resolution of cases in the community in a timely, efficient and humane manner.

Alternatives Include			
✓	Laws prohibiting the detention of vulnerable groups such as refugees, asylum seekers, children and their families	✓	Laws or policies requiring alternatives to detention be used in the first instance
✓	Policies providing a discretion for alternatives to be used instead of detention	✓	Comprehensive screening and assessment processes that ensure detention is used as a last resort
✓	Regular review to ensure placement decisions are proportionate and necessary	✓	Maximum time limits on detention
✓	Temporary legal status with work rights	✓	Documentation protecting against arrest and detention
✓	Open reception centres and community housing	✓	Community programs that meet basic needs and uphold basic rights
✓	Children living together with their own family in the community	✓	Alternative family care
✓	Group homes with a guardian	✓	Regular reporting
✓	Directed residence	✓	Release on own recognizance
✓	Bail, bond, surety or guarantors	✓	Care and protection arrangements for unaccompanied minors, including guardians
✓	Return assistance and counselling programs	✓	Individual case managers to provide holistic support and assist case resolution

Grant Mitchell, the IDC’s Director, then outlined the benefits of ATD, highlighting the key findings from the IDC’s latest research, *There are Alternatives*. Drawing from over 250 examples of ATD in 65 countries, the IDC has found that ATD are cheaper, more humane, and can be more effective in meeting government requirements of compliance and cooperation. ATD are defined as “any law, policy or practice by which persons are not detained for reasons relating to their immigration status.”<sup>3</sup>

ATD can broadly be categorized into:

- (a) Mechanisms that prevent unnecessary immigration detention, and
- (b) Strategies for effective and humane case resolution in the community

Mechanisms that prevent unnecessary immigration detention include:

- laws or policies that prohibit immigration detention, including for vulnerable groups
- provision of a temporary legal status, preferably accompanied with documentation to confirm such status, as well as provisions that enable individuals to report to the authorities while their immigration status is being resolved.

<sup>3</sup> Sampson, R. C., Chew, V., Mitchell, G, and Bowring, L. (2015). *There Are Alternatives: A Revised Handbook for Preventing Unnecessary Detention*. Melbourne: International Detention Coalition.



Mr Mitchell explained that screening and assessment by governments of individuals who are at risk of or subject to detention is a key mechanism to both avoid unnecessary, arbitrary or wrongful detention, as well as to identify and assess individuals' levels of risk and vulnerability. A number of governments, including Hong Kong, the United States, and Zambia, already use screening and assessment processes to make informed decisions on whether or not detention should be used, and the most appropriate ways to manage and support the individual as they seek to resolve their immigration status. Through effective screening and assessment, the risk of wrongful, unlawful, indefinite detention, as well as difficulties in achieving case resolution is minimised.

Mr Mitchell explained that there are four key areas that are usually covered in screening and assessment processes:

- (i) ensuring legal obligations are met
- (ii) assessing identity, health and security concerns
- (iii) assessing vulnerabilities (age, gender/diversity, health, loss of family contact, and other protection needs)
- (iv) assessing individual factors relevant to supporting or undermining a person's ability to remain engaged in the immigration process in the community.

This includes relevant strengths and risks of an individual's case, including their intended destination, stage in the migration process, community ties, history of non-compliance, as well as community support options to assist referral and placement.

Mr Mitchell then went on to describe some of the strategies for effective and humane case management in the community. These can be broadly categorised into:

- **Release provisions**, which can take the form of procedural safeguards such as judicial review of detention; parole or time limits on the length of detention; administrative and discretionary release provisions; registration and documentation (e.g. the release of UNHCR-registered refugees in Malaysia); release or non-detention of vulnerable groups (e.g. in Indonesia); own recognizance (e.g. in Hong Kong); the use of guarantors; regularisation; and also ad hoc release.
- **Community models**, which can include open reception centres; ethnic communities; shelters; family/community group/faith-based organisations/NGOs; and case management programmes.
- **Conditional release**, which can take the form of individual undertakings (requirements placed on an individual to comply and cooperate with immigration/enforcement authorities); monitoring and supervision (including home visits, or a requirement that an individual report to the authorities on a regular basis or live at a nominated address); negative consequences for non-compliance (such as forfeit or enforcement of bail, bond and surety arrangements); and intensive case resolution (involving coordination, case management and return programmes).

Mr Mitchell also emphasised the research findings that related to the transit context. He noted the evidence that asylum seekers, refugees and migrants are less likely to abscond in a country they intend to transit if they can: (i) meet their basic needs through legal avenues; (ii) are not at risk of detention or *refoulement*, and (iii) remain hopeful regarding future prospects.

Mr Mitchell then provided a summary of the global momentum towards ending child immigration detention, noting countries in Europe, the Americas and Asia that have taken concrete steps towards preventing or limiting the detention of children. He also noted the statement by the UN Committee on the Rights of the Child in March 2013 that “*States should expeditiously and completely cease the detention of children and their parents on the basis of their immigration status . . . [and] adopt alternatives to detention.*”<sup>4</sup> Examples of ATD for unaccompanied minors (UAM) include group homes and foster care (such as in Canada, Germany, the Netherlands, Spain, Sweden, and the United Kingdom), referral to social welfare ministry shelters (such as in Greece, Mexico, the Philippines, and Turkey), and community group care (such as in Belize and South Africa). Shelters and reception centres are also used in Belgium, Hong Kong, South Africa and Sweden.

Finally, Mr Mitchell explained that through its research on ATD models globally, the IDC has found that these ATD models have developed through one, or a combination of, the following: legislative reform; policy developments; research; the formation of working groups; and/or the use of pilot programmes.

Pilot programmes have commonly been used to test whether a particular ATD model can work in that country context. Such pilots have usually been implemented through a collaboration of government and community service providers who have jointly developed, implemented and monitored the ATD pilot programme, and ensured essential community support measures are provided such as case management, shelter, welfare and legal support.

#### d. Session 3 - Mental Health Impact of Immigration Detention on Children

Ms Roslyn Leary provided an overview of the mental health impact of immigration detention of children. Ms Leary is the Programme Manager for Direct Services, South-East Region & Children, Adolescents and Families with the Victorian Foundation for Survivors of Torture.

Ms Leary began by identifying some of the key provisions of the UN Convention of the Rights of the Child, noting that immigration detention posed certain challenges towards the realisation of such rights. These include:

- the best interests of the child as a primary concern (Article 3(1))

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<sup>4</sup> Committee on the Rights of the Child (2013), *Report of the 2012 Day of General Discussion: The Rights of all Children in the Context of International Migration*, available at <http://www2.ohchr.org/english/bodies/crc/docs/discussion2012/ReportDGDChildrenAndMigration2012.pdf>

- the right to enjoy ‘to the maximum extent possible’ the right to development (Article 6(2))
- the right to the highest attainable standard of health (Article 24(1))
- the right to a standard of living adequate for the child’s physical, mental, spiritual, moral and social development (Article 27(1))
- the right to be treated with humanity and respect for the inherent dignity of the human person, and in a manner which takes into account the needs of persons of the child’s age (Article 37 (c))
- the right to education up to primary level (Article 28(1))
- the right to be protected from all forms of physical or mental violence (Article 19(1))

Ms Leary then highlighted some of the key findings of a national inquiry into children in immigration detention in Australia. From mental health assessments of 243 children in detention centres in Australia and on Christmas Island from April 2014 to June 2014, 34% of children in detention (compared to 2% outside detention) had mental health disorders that would be comparable in seriousness to children referred to hospital-based child mental health out-patient services for psychiatric treatment.<sup>5</sup> The inquiry also found that prolonged detention had impeded the capacity of mothers to bond with their babies, posed unacceptable risks of harm to children including high levels of self-harm. Research submitted for the inquiry also indicated that after approximately six months of detention, the emotional and psychological well-being of detainees tends to deteriorate very quickly. Unaccompanied and separated children (UASC) can be particularly vulnerable.

Ms Leary explained that trauma is the result of an uncontrollable, inescapable, unpredictable and overwhelming life threatening event. It can result from the direct experience of an event, or from witnessing or hearing about an event. Around 10% of the general population who have suffered trauma develop severe symptoms from exposure to that trauma. Refugee and asylum seekers may have experienced trauma through multiple losses of loved ones, such as death or disappearance of family members or friends; being displaced and losing their homes and sense of security, country, culture; waiting in limbo for long periods of time, including in detention; exposure to war-related trauma such as witnessing someone being killed, injured or tortured. Such trauma can in turn result in profound discontinuity and loss in all spheres of life.

Ms Leary described some of the symptoms of trauma, including uncontrollable or frequent crying, sleep problems, depression, anxiety, anger, stress-related physical illness and stomach aches. She also explained that trauma may result in a state of hyper-arousal (so that individuals are wired for attack, even when there is no threat), and/or high levels of cortisol (resulting in numbness or a dissociative state).

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<sup>5</sup> Australian Human Rights Commission, *The Forgotten Children: National Inquiry into Children in Immigration Detention* (2014), available at: <https://www.humanrights.gov.au/publications/forgotten-children-national-inquiry-children-immigration-detention-2014/4-overview>

Ms Leary explained that immigration detention may exacerbate trauma by mirroring the original trauma, and contributing to further deterioration. The detention environment can also provide triggers that constantly link individuals back to the traumatic event.

#### e. Sessions 4, 5 and 7 - Case Studies

During these sessions, participants were divided into their respective country groups; these groups then rotated to hear the following three presentations:

1. Care of unaccompanied minors in the community – Bangkok, Thailand and Jakarta, Indonesia
2. Screening and Assessment - Zambia
3. Guardianship and Age-assessment - Australia

#### **Care of Unaccompanied Minors in the Community: Bangkok Child Protection Programme (Thailand)**

*Mr Tanawin Kosaidilok, Caseworker, Jesuit Refugee Service-Thailand*

The Bangkok Child Protection (BCP) programme was established by the Jesuit Refugee Service (JRS) in Thailand in August 2014, initially as a 3-month pilot project and in response to identified gaps and the need for specific protection for UASC in Bangkok. The BCP programme is implemented through a partnership between UNHCR and JRS.

The purpose of the BCP programme is to respond to the needs of UASC and other vulnerable children residing in Bangkok through providing referrals to service providers, and emergency assistance when needed. Once a child is registered with the BCP programme, a caseworker is assigned who will conduct a 'best interest of the child assessment' (BIA) and 'best interests of the child determination' (BID). Therefore, the objective of the basic needs assessment is to ascertain where protection gaps may be, in order to best manage a case, for example by providing protection through referrals for financial, medical, educational or legal support. The BCP programme also organises educational and sporting activities for their clients, as well as the opportunity to participate in training courses and workshops to enhance their skills. The programme initially started with 80 children, and has now increased to 260 children.

Once a new client has been registered with the BCP project, a caseworker is then assigned who can help to make referrals to other service-providers as necessary, such as to the Bangkok Refugee Centre for medical assistance, or Asylum Access Thailand for legal aid. Keeping forefront the best interests of the child at all times, a needs assessment is conducted by BCP staff based on an interview with the client.

The possible scenarios leading to the resolution of a client's case include:

- A final rejection by UNHCR of their asylum claim and closure of their file. In such circumstances, the UASC must then withdraw from the BCP programme
- Efforts to secure a durable solution for recognized refugees

- ‘Aging out’ from the programme, once a client turns 18 years old and is therefore no longer legally a ‘child’. However, when a client turns 18, s/he does have the option of transitioning into JRS’ Urban Refugee Programme (URP) although this is not always guaranteed

The BCP is facing several challenges in maintaining the sustainability of the programme which include:

- A lack of human and financial resources, which are now insufficient to meet the long-term demands of the programme
- The programme is still developing and there is a need for staff to better understand the complex challenges of managing cases of (often traumatised) UASC
- Overall, the domestic legal, social and cultural context for people seeking asylum in Thailand is challenging, in particular the current unstable political environment. Furthermore, Thailand has not ratified the 1951 Refugee Convention, although it has signed the CRC.

Mr Kosaidilok concluded his presentation by emphasising how the BCP programme can serve as an important ATD for children by reducing the severe overcrowding in detention centres and providing access to fundamental rights for vulnerable children. The programme also offers benefits for the government of Thailand by reducing the burden on local authorities to manage children in detention facilities. Through this programme the psychological well-being of the child is monitored, UASC gain an element of financial stability, a caseworker can ensure that children have safe and secure living conditions, and BCP staff can directly support clients going through the refugee status determination process. Finally, the BCP programme serves as a community outreach and public awareness tool, as BCP programme staff work closely with the local community in Bangkok.

## **b) Care of Unaccompanied Minors in the Community (Indonesia)**

*Ms Thitin Tarigan, Social Worker Coordinator/Shelter Supervisor, Church World Service Indonesia*

Ms Tarigan began by providing an overview of the history and international work of Church World Service (CWS). In Indonesia, CWS has been an implementing partner of UNHCR since 2008. CWS first opened a shelter for teenage boys in Bogor in 2009, but in 2013 they relocated this programme for UAMs to Jakarta, and currently manage two shelters in the city.

She explained that Indonesian law (Articles 83(2) and 85(3) of Law No. 6 of 2011) provides that the Immigration Minister or a designated Immigration Officer may authorise for a child to be housed outside of an immigration detention facility, subject to periodical mandatory reporting. Ms Tarigan then outlined the process for relocating a child from an immigration detention centre to a CWS shelter. CWS is typically given two weeks’ notice in advance of receiving a child, although on occasions very little notice is given. Once UNHCR has identified a child who is being detained, they can submit a release request to the Immigration Department. If this request is approved then UNHCR and the Immigration Department liaise with IOM

to transfer to child to the CWS-managed shelter. Ms Tarigan highlighted the serious negative physical and psychological impacts of detention on children which can include anxiety and insomnia, and also drew attention to the marked differences observed between children who had experienced periods of time in detention, and those who had not.

Ms Tarigan explained that CWS shelters were initially developed in response to the severe lack of shelter options for UAMs in Indonesia. In establishing the shelters, she noted that it was initially a challenge for CWS to identify the most suitable location and building, as well to socialise the local population in the area to having a shelter for unaccompanied refugee and asylum seeking children living in their vicinity. Ms Tarigan further explained that initially there was considerable opposition to the presence of refugees and asylum seekers from local residents, especially due to religious differences amongst the communities. However, CWS have worked hard to address the concerns of local residents and also liaise with local administrative officials.

Ms Tarigan revealed plans for CWS to open a third shelter in Jakarta soon, in addition to the existing two shelters in the city. The cost of managing each shelter is approximately USD 80,0000 per year. The two shelters are currently accommodating 80 teenage boys aged between 13 and 17 years old. The absconding rate in 2015 was as low as 2%. She added that activities provided at the shelter include education classes (in English, Bahasa Indonesia and IT), sport and recreation, and access to health and psycho-social professionals. Training courses in 'life skills are also a key component of CWS' programming in Indonesia. CWS is also developing two other ATD models, namely safe houses which are under the management of the Ministry of Social Welfare, and foster care within the refugee community.

## **2. Screening and assessment - Zambia**

This session was co-presented by Mr Boris Mulengu, Legal and Prosecutions Officer, Mixed Migration and Trafficking Desk at the Immigration Department of Zambia, and Ms Annie Lane, Programme Officer (Migration Management) at the International Organization for Migration (IOM) Zambia.

Ms Lane began by providing some contextual information on Zambia, noting that it shares a border with eight different countries and is a source, transit and destination country for migration. Migration into Zambia is of a complex, mixed nature; the country has a long history of hosting refugees, and also serves as a springboard for migrants looking to reach South Africa, as well as Europe, Asia and the Americas. However, in the past, responses to such migration were inadequate, with poor coordination amongst the key actors and stakeholders; a lack of services available to refugees, asylum seekers and migrants; limited capacity to address their protection needs; and overcrowding in prison facilities (and here it was noted that Zambia does not have specially-designated immigration detention facilities, but instead detains people who are in violation of immigration laws in prisons). At the same time, refugees, asylum seekers and migrants were experiencing violations of their basic

human rights, including discrimination, abuse, forced labour and exploitation, challenges in registering the births of children, as well as the detention of vulnerable migrants in prisons.

Following a Regional Conference on Refugee Protection and International Migration in Dar es Salaam in 2010, a Technical Working Group was formed, comprised of the government of Zambia and its partners (service providers, UNICEF, IOM and UNHCR) to develop tools for the identification, referral and protection of vulnerable migrants, focusing in particular on children. The Technical Working Group was composed of representatives from various Zambian government departments (including the Immigration Department, Prisons services, Police, Office of the Commissioner for Refugees, Department of Social Welfare, and Judiciary), IOM, UNICEF, and one NGO - the Young Women's Christian Association. It was intended that membership of the Technical Working Group would include actors who were best placed to respond to the needs of migrants.

The Technical Working Group developed the following:

- Guidelines for Protection Assistance to Vulnerable Migrants in Zambia (Guidelines);
- Profiling Form for Vulnerable Migrants;
- A National Referral Mechanism (NRM); and
- Training and Participant Manuals on the Guidelines, NRM and Profiling Form.

Under these tools, 'vulnerable migrants' include refugees, asylum seekers (as well as those whose asylum claims have been rejected), victims of trafficking, unaccompanied and separated children, stranded migrants and stateless migrants. Mr Mulengu explained that the Guidelines, NRM and accompanying tools were derived from national and international legislative frameworks and standard operating procedures (SOPs), including the Transnational Organized Crime, Refugee, and Child Rights Conventions. In this sense, the intention of the Technical Working Group was that the Guidelines, NRM and accompanying tools would simply consolidate these laws and principles into a clear and concise document that anyone could utilise to screen and identify the appropriate referral pathways upon coming into contact with a vulnerable migrant. Some of the core principles that underpinned and informed the process of developing the Guidelines, NRM and accompanying tools were: respect for rights, security and safety, confidentiality, information, consent, non-discrimination and impartiality, a migrant-centred approach, and the best interests of the child. These principles were also reinforced during the training for officials on the Guidelines, NRM and accompanying tools.

Mr Mulengu and Ms Lane then described the Profiling Form and NRM to participants, explaining that initial screening through the Profiling Form is intended to be conducted by a wide range of stakeholders, including health workers, social workers, church officials, prison officials, police officers and other 'front-line' officials. Ms Lane highlighted the types of services that are provided to vulnerable migrants under the NRM. These are classified depending on the immediate, medium-term, and long-term needs of the migrant. For example, safety and

security, shelter, practical needs such as food, drink and clothing, emergency medical treatment and regularisation of stay/legal status are considered to be immediate needs, whereas medical care and psychological assistance, legal assistance, family tracing, employment, education and training are considered to be medium-term needs. Long-term needs may include voluntary return, resettlement, regularisation of stay (including granting of refugee status, or permits for victims of trafficking, etc.), and integration/reintegration support. Thus, the intention of the NRM is to emphasise the services that are necessary, rather than to obligate the government to take on the provision of all services on their own. The essence and spirit of this approach is coordination amongst stakeholders; while there are gaps, the intention is to complement the various strengths that exist amongst civil society, UN agencies, government, and the community.

Following an initial piloting phase, the Guidelines, NRM and accompanying tools were rolled out across Zambia. Over 150 front-line officers have been trained to use the tools, and approximately 200 individual migrants identified and provided with assistance. Specialised spaces have now been created in border areas for conducting in-depth interviews to administer the Profiling Form. Initial monitoring has demonstrated the strengthened capacity of front-line officials, and services provided to (i) identify various categories of vulnerable migrants by administering the Profiling Form, (ii) refer migrants to the relevant authorities and service providers, (iii) provide appropriate protective services, and (iv) better coordinate among partners. Most importantly, the use of unnecessary immigration detention has been significantly reduced. Support from the Zambian government has also been received from the highest levels, with the Vice-President publically launching the tools; this has in turn promoted better engagement with the tools by multiple administrative agencies.

Ms Lane then described a further initiative that is currently being undertaken by the Zambian Prisons Service, with the support of IOM, for improved management of data on migrants in detention. As the Prisons Service lacked the ability to identify vulnerable migrants in prison and address their specific needs, a project was initiated to train officials to use the Guidelines and accompanying tools to identify and assess detainees, and then enter this data into a data system. This resulted in improvements in the referral of vulnerable migrants to the appropriate authorities in line with the NRM, as well as in strengthened data collection systems that have in turn helped inform advocacy efforts.

Participants raised the following questions, and responses were provided by the presenters:

*Q. Under what circumstances would Zambia not detain/release migrants into the community?*

- Mr Mulengu explained that Zambia's national laws provide for several ATD options, including regular reporting to the authorities. The compliance rate is generally quite high (over 80%) and more cost-effective than detention. Where an individual is unable to be repatriated due e.g. to lack of documentation or other logistical factors, they will be issued with a temporary permit at a cost of USD 250



that will remain valid until their case is resolved; during this time, they will also be required to report to the authorities.

- Zambian law allows for flexibility, so the decision on what restrictions to apply in an ATD is subject to a case officer's discretion, having regard to the circumstances of the individual at hand.

*Q. What impacts have the Guidelines, NRM and legislation providing for ATD had on the numbers of persons detained in Zambia?*

- Mr Mulengu explained that he did not have the precise statistics to hand, and that numbers of detainees fluctuated from day-to-day. However, he believed that there are around 120-180 migrants at any one time in detention, and up to approximately 3,000 migrants detained annually in Zambia.

*Q. How does Zambia respond to failed (rejected) asylum seekers? Are they able to appeal against negative asylum decisions?*

- Failed asylum seekers can also benefit from ATD in Zambia. Again, the emphasis is on directing resources towards reporting and monitoring of individuals with uncertain immigration status without the need for detention. This is not only beneficial for the individual, but also for the government. Prisons are less crowded, and resources are not being used to detain people who have not committed serious criminal offences.
- Asylum seekers whose asylum applications have been rejected are permitted to appeal by simply filling out a form. In some cases, immigration officials will even help facilitate this process and coordinate their access to legal services if necessary. Additionally, judiciary officials may also visit prisons to determine if asylum seekers are able to access their rights in prison. However, there are instances where asylum seekers may not be aware of this right to appeal; in this respect, more needs to be done to ensure they are aware of their rights under the law.

*Q. How do officials draw conclusions on the status of the migrant (such as asylum seeker, victim of trafficking, etc.)?*

- First-line officials receive training on administering the Profiling Form and conducting the initial screening of an individual migrant. The Profiling Form also contains a number of questions that help guide people through the screening process. The form was also deliberately kept simple, with the intention that will help the first-line officer make an initial assessment of where the migrant should be referred, and their immediate risks and vulnerabilities identified at the outset; an in-depth interview will then be conducted at later stage in the process.

### **3) Guardianship and age assessment - Australia**

Ms Leary started her presentation by emphasising why guardianship and assessment of a person's age are important. She explained that according to international law, states are obliged to grant special protection and assistance to children and young people. All three countries have ratified the CRC, with Indonesia acceding in 1990, Thailand in 1992 and Malaysia in 1995.

However, the lack of mechanisms for age assessment and resources available for children and young people are significant barriers to helping children in the region. Furthermore, accurately assessing a person's age is not easy - a person may look older or younger than they actually are. For example, a child may act older than they are due to trauma they have experienced. In a forced migration context, people are often prescribed an age by an authority, and then given a different age by a different authority. There are also cultural differences that assessors should be aware of, especially around the significance of 'adolescence' and 'adulthood', and the fact that calendars (and therefore dates of birth) may vary between cultures. Further, UASC themselves may be unable to provide accurate or coherent information, and may be vulnerable to outside influences.

An age assessment should only be conducted when there are serious grounds for doubting a person's age. In the case of a dispute, there are professional observational techniques which can be used to try to ascertain their accurate age, although these can be highly subjective, scientifically inaccurate, and dependent on the expertise and competence of the assessor. Before considering these options, it is important for an age assessor to consider whether any documentary evidence is available which could help determine a person's age, e.g. in the form of a birth certificate or identity document. However, Ms Leary cautioned against the exclusive reliance on such documents (should they even exist), as they may not always be easily verifiable or reliable for determining a person's age. A medical assessment may also be considered for age determination, although assessors should be aware that examinations are potentially invasive, may not respect a child's dignity, may not take into account ethnic variations or nutritional levels, and/or have a margin of error which render them scientifically inaccurate.

The UN Committee on the Rights of the Child, which monitors states' adherence to the CRC, has stated that age assessments should:

- include reference to the physical appearance of the person concerned
- include reference to the psychological maturity
- be conducted in a scientific, safe, child- and gender-sensitive and fair manner
- avoid the risk of violating a child's physical integrity
- give the benefit of the doubt to the child.

When attempting to assess the age of an asylum seeker, free, prior and informed consent should always be sought. The procedure for age-assessment, and consequences of such an assessment must be explained in a well-understood language. The person whose age is being assessed should also understand that refusal to participate in such an assessment should not prejudice the outcome of their refugee status determination procedure, and that they have the right to disagree with the decision made, and the right to challenge it.

Ms Leary went on to explain that when undertaking an age assessment, the following information should be considered prior to the interview:

- documentary evidence available, including medical records (if verified as genuine) and other sources of information, for example from community members who know the person
- the appearance of a person, remembering to take into account racial, ethnic, nutritional and medical factors, as well as the years of hardship and/or trauma
- the demeanour of the person, remembering to account for cultural expectations of an adult stranger (possibly of a different sex) interviewing a child, which may influence the person's responses
- personal interactions with the person, and the importance of checking with interpreters or other cultural consultants in order to understand whether the assumptions that are being made about appearance, demeanour and interactions are based on 'shared cultural understandings'
- the general background to the case, including activities over the past few years and current self-care and independence (if UASC) of the person
- information on the social history and family composition (if available), for example accounting for cultural differences where dates are not always recorded or important
- developmental considerations, including experiences of education, labour, and possibly marriage or relationships

Importantly, an assessor should be conscious of the power dynamics between the assessor and the person being assessed, which may influence the course of the interview. Assessors should take time to allow for open questions and long answers, and should not ask leading questions of the person being assessed. Assessors should have appropriate experience and training in child-sensitive interview techniques if possible. The procedure, outcome and consequences of the assessment should be explained clearly in a language that is understood using a trained interpreter as necessary. In order to mitigate subjectivity during an assessment, a number of trained assessors should contribute to the age assessment to provide a variety of perspectives which could then be triangulated.

Ms Leary then provided some examples from other countries where guardianship of UASC is used as an ATD. She gave an overview of the context in Australia where responsibility for unaccompanied 'non citizen' children lies with the Minister for Immigration and Border Protection, under the Guardianship of Children Act 1946. Ms Leary gave further examples from the Netherlands where all children must have a legal guardian, and in cases where a parent is not present, the government ensures that a guardian is appointed and takes on the delegated responsibility. In Sweden, guardianship of UASC is taken on by the state, and daily care is carried out by the local municipal authority where the child lives. In the Philippines, unaccompanied children are referred to the Department of Social Welfare and Development who are delegated as guardians and carry the responsibility to provide essential services (e.g. health, shelter, social support).

Under the Family Law Act in Croatia, the Centre for Social Welfare appoints a guardian to UASC who is usually from the Croatian Social Welfare Department. Ms Leary explained that the Department usually has between two and 12 children in their care, and their staff also serve as social workers.

The final example given was from Belgium where identification verification and age assessments are conducted by the Belgian Guardianship Service under the Guardianship Act 2002. The authorities work collaboratively to find durable solutions by appointing guardians who are registered under one of several voluntary organisations.

## **DAY 2**

### **f. Session 6 - Regional Perspectives on Immigration Detention**

Representatives from Geneva and the Regional Office for Asia and the Pacific, as well as the Indonesia, Malaysia and Thailand Country Offices of the United Nations High Commissioner for Refugees (UNHCR) began Day 2 of the Roundtable.

Mr Olivier Madjora, Senior Regional Durable Solutions Officer at the UNHCR Regional Office in Bangkok, explained that there are some 318,000 asylum seekers and refugees registered with UNHCR in the South-East Asia region, with the majority being in Indonesia, Malaysia and Thailand. Of these, approximately 108,000 (approximately one-third) are minors, including some 9,000 UAMs. Migration flows in the region are of a mixed nature: although the majority of individuals move irregularly, some people arrive by land or sea in a regular manner, but in the absence of a legislative framework for asylum seekers, have struggled to keep their status. It is estimated that from 2014 to the end of 2015, approximately 100,000 people had moved irregularly by boat in or to the region. Over 5,000 persons of concern to UNHCR have been identified in immigration detention centres, with the majority in Indonesia, Malaysia and Thailand, and of these people, 1,600 are children.

Noting that the level of ratification of the 1951 UN Convention Relating to the Status of Refugees remains poor in the region, Mr Madjora highlighted other key international and regional instruments, conventions and tools and that are of relevance. These include the:

- UN Universal Declaration of Human Rights – particularly Article 14, referring to the right to seek asylum from persecution. It follows from this that asylum seekers should not be detained for exercising that fundamental right.
- UN Convention on the Rights of the Child – reiterating the provisions highlighted by Ms Leary on Day 1 of the Roundtable, as well as noting guidance from the Committee on the Rights of the Child that detention on the basis of the parent's immigration status is always against the best interests of the child.
- The ASEAN Charter - which upholds the protection of human rights as a core principle of ASEAN, as well as the ASEAN Human Rights Declaration which provides for the right to seek asylum.

- The Regional Guidelines for Responding to the Rights and Needs of Unaccompanied and Separated Children (UASC)<sup>6</sup> - these were prepared following research in, and consultations with the governments of Indonesia, Malaysia and Thailand, and published in 2013. They contain measures that provide for the non-detention of children as well as preventing the separation of children from their parents during law enforcement activities. The Guidelines also state that where children are detained, dedicated and trained officers should be available in immigration detention facilities to identify minors and facilitate their release.

Ms Marie Huberlant, Global Strategy Specialist for the UNHCR Global Strategy 'Beyond Detention 2014-2019' from UNHCR's Geneva office, then provided an overview of UNHCR's Global Detention Strategy (GDS) and the work that UNHCR has done to support the implementation of ATD globally. Ms Huberlant referred participants to two Option Papers prepared by UNHCR that document over 30 examples of good practices globally.<sup>7</sup> Option Paper 1 highlights the main principles that should guide policy and decision-makers in dealing with asylum-seeking and migrant children and families in non-custodial settings, sets out the key steps to move towards the ending of child immigration detention, and provides examples of family and child-appropriate ATD, with an emphasis on best interests, guardianship and case management. Options Paper 2 explains the essential components for successful ATD and details a number of necessary systems and procedures to protect against arbitrary detention, such as screening mechanisms, timely detention reviews, access to legal services and maximum detention time limits in national law.

Ms Huberlant also highlighted that UNHCR and IDC are collaborating to develop a 'vulnerability screening tool'. The tool aims to assist front-line decision makers, officials and practitioners to successfully screen and identify vulnerable individuals crossing international borders and to inform decisions related to the most appropriate ATD in the individual case, in particular placement and support options in the community. The tool aims to ensure detention is only ever used as a last resort, consistent with fundamental human rights standards, and that ATD are fully utilised in lieu of detention when appropriate. The tool will also assist in determining appropriate referral and support needs in the individual case, and assist in ensuring timely, humane and fair case resolution. As such, the tool also aims to ensure effective use of resources in appropriately managing asylum seekers, refugees and migrants. The tool will be generic in nature and aimed at assisting states and practitioners develop screening processes in their nationally and locally appropriate context.

UNHCR has also supported the sharing of good practices, including:

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<sup>6</sup> UN High Commissioner for Refugees (UNHCR), *Regional Guidelines for Responding to the Rights and Needs of Unaccompanied and Separated Children (UASC)*, September 2013, available at: <http://www.refworld.org/docid/53883ffd4.html>

<sup>7</sup> Option Paper 1, 'Options for governments on care arrangements and alternatives to detention for children and families', and Option Paper 2, 'Options for governments on open reception and alternatives to detention', can be found at <http://www.unhcr.org/5538e4e79.html>

- The Second Roundtable on Reception and Alternatives to Detention held in Toronto in April 2015 and attended by 53 participants from 24 countries, representing government, academia and NGOs.<sup>8</sup>
- Promoting international standards, including the UNHCR Detention Guidelines,<sup>9</sup> and the UNHCR, IDC and Association for the Prevention of Torture (APT)’s Guidelines on Monitoring Immigration Detention.<sup>10</sup>
- At the request of governments, organising country visits for immigration departments; engaging with the judiciary and conducting capacity building for the police; supporting debates in parliament, and supporting pilot projects on ATD.

Mr Katsunori Koike, Ms Dina Hapsari and Mr Brian Gorlick from the UNHCR Thailand, Indonesia and Malaysia Country Offices respectively, provided updates on the national immigration detention contexts and latest developments in ATD initiatives in their countries/jurisdictions. In Thailand, these include the bail of refugees and asylum seekers from detention, and the release of Rohingya women and children from detention centres and into shelters managed by the Ministry of Social Development and Human Security. In Indonesia, ATD initiatives include shelters for UAMs run by Church World Service (CWS), IOM, and the Ministry of Social Welfare. In Malaysia, the authorities continue to work closely with UNHCR to confirm the authenticity of refugee and asylum seeker cards, and to allow UNHCR to register people of concern (POCs) in detention centres. Once the authenticity of a card is verified or people are registered as POCs, individuals are either no longer subject to arrest or, if already in detention, usually released.

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<sup>8</sup> See “Second Global Roundtable on Reception and Alternatives to Detention Toronto, Canada, 20-22 April 2015 Summary of deliberations”, available at <http://www.unhcr.org/55e99ee26.html>

<sup>9</sup> See UN High Commissioner for Refugees (UNHCR), *Guidelines on the Applicable Criteria and Standards relating to the Detention of Asylum-Seekers and Alternatives to Detention*, 2012, available at: <http://www.refworld.org/docid/503489533b8.html>

<sup>10</sup> UN High Commissioner for Refugees (UNHCR), *Association for the Prevention of Torture (APT) and the International Detention Coalition (IDC), Monitoring Immigration Detention: Practical Manual*, 2014, available at: <http://www.refworld.org/docid/53706e354.html>

## Agenda

<b>Day One: Thursday 19th November 2015</b>		
<b>Time</b>	<b>Session</b>	<b>Location</b>
0830 - 0900	Registration	Outside Grand Ballroom (5th Floor)
0900 - 0915	<b>Opening Remarks</b> <b>Speakers:</b> <ul style="list-style-type: none"> <li>- Dr Seree Nonthasoot, Thailand's Representative to the ASEAN Intergovernmental Commission on Human Rights (AICHR)</li> <li>- Ms Vivienne Chew, Asia-Pacific Regional Coordinator, International Detention Coalition (IDC) and Chair of APRRN's Immigration Detention Working Group</li> <li>- Ms Julia Mayerhofer, Interim Executive Director, Asia Pacific Refugee Rights Network (APRRN)</li> </ul>	<u>Plenary Session</u> Grand Ballroom
0915 - 1100	<b>Session 1: Overview of Migration Context in Indonesia, Malaysia &amp; Thailand</b> <b>Speakers:</b> <ul style="list-style-type: none"> <li>- <u>Indonesia</u>: Brig. Pol. Drs. Chairul Anwar, Assistant Deputy, Ministry of Coordination and Management of Transnational and Extraordinary Crime</li> <li>- <u>Malaysia</u>: Mr Ahmad Naser bin Awang, Principal Assistant Director, Immigration Department of Malaysia</li> <li>- <u>Thailand</u>: Pol. Lt. Col. Phakit Jiraprasertsuk, Deputy Superintendent, Immigration Bureau</li> </ul> <p>Q&amp;A</p>	<u>Plenary Session</u> Grand Ballroom
1100 - 1115	<b>Coffee Break</b>	
1115 - 1215	<b>Session 2: Latest Findings on Alternatives to Detention (ATD)</b> <b>Speakers:</b> <ul style="list-style-type: none"> <li>- Ms Vivienne Chew, Asia-Pacific Regional Coordinator, International Detention Coalition</li> <li>- Mr Grant Mitchell, Director, International Detention Coalition</li> </ul> <p>Q&amp;A</p>	<u>Plenary Session</u> Grand Ballroom
1215 - 1315	<b>Lunch</b>	
1315 - 1400	<b>Session 3: Mental Health Impact of Detention on Children</b> <b>Speaker:</b> <ul style="list-style-type: none"> <li>- Ms Roslyn Leary, Direct Service South-East Region &amp; Children, Adolescents and Families</li> </ul>	<u>Plenary Session</u> Grand Ballroom

	<p>Programme Manager, The Victorian Foundation for Survivors of Torture</p> <p>Q&amp;A</p>	
1400 - 1530	<p><b>Session 4: Case Studies</b></p> <p><b>Care of Unaccompanied Minors (UAMs) in the Community</b>  <b>Speakers:</b></p> <ul style="list-style-type: none"> <li>- Ms Thitin Tarigan, Social Worker Coordinator/Shelter Supervisor, Church World Service, Indonesia</li> <li>- Mr Tanawin Kosaidilok, Caseworker, Bangkok Child Protection (BCP), Jesuit Refugee Service (JRS) Thailand</li> </ul> <p><b>Screening and Assessment</b>  <b>Speakers:</b></p> <ul style="list-style-type: none"> <li>- Mr Boris Mulengu, Legal and Prosecutions Officer, Mixed Migration and Trafficking Desk, Immigration Department of Zambia</li> <li>- Ms Annie Lane, International Organization for Migration, Zambia</li> </ul> <p><b>Age Assessment and Guardianship</b>  <b>Speaker:</b></p> <ul style="list-style-type: none"> <li>- Ms Roslyn Leary, Direct Service South-East Region &amp; Children, Adolescents and Families Programme Manager, The Victorian Foundation for Survivors of Torture</li> </ul>	<p><u>Breakout Session</u></p> <p>Malaysia: Room 3 (Care of UAMs in the Community)</p> <p>Indonesia: Room 2 (Screening &amp; Assessment)</p> <p>Thailand: Room 1 (Age Assessment &amp; Guardianship)</p>
1530 -1545	<b>Tea Break</b>	
1545 - 1715	<p><b>Session 5: Case Studies (cont.)</b></p> <p><b>Care of Unaccompanied Minors (UAMs) in the Community</b>  <b>Speakers:</b></p> <ul style="list-style-type: none"> <li>- Ms Thitin Tarigan, Social Worker Coordinator/Shelter Supervisor, Church World Service, Indonesia</li> <li>- Mr Tanawin Kosaidilok, Caseworker, Bangkok Child Protection (BCP), Jesuit Refugee Service (JRS) Thailand</li> </ul> <p><b>Screening and Assessment</b>  <b>Speakers:</b></p> <ul style="list-style-type: none"> <li>- Mr Boris Mulengu, Legal and Prosecutions Officer, Mixed Migration and Trafficking Desk, Immigration Department of Zambia</li> <li>- Ms Annie Lane, International Organization for Migration, Zambia</li> </ul> <p><b>Age Assessment and Guardianship</b>  <b>Speaker:</b></p>	<p><u>Breakout Session</u></p> <p>Indonesia: Room 2 (Care of UAMs in the Community)</p> <p>Thailand: Room 1 (Screening &amp; Assessment)</p> <p>Malaysia:</p>



	- Ms Roslyn Leary, Direct Service South-East Region & Children, Adolescents and Families Programme Manager, The Victorian Foundation for Survivors of Torture	Room 3 (Age Assessment & Guardianship)
1715 - 1730	<b>Summary of Day 1</b>	Plenary Session Grand Ballroom
1900 - 2100	<b>Welcome Dinner</b>	Baan Glom Gig, Soi Ruamrudee

<b>Day Two: Friday 20th November 2015</b>		
0900 - 0945	<b>Session 6: Regional Perspectives on Alternatives to Detention</b> <b>Speaker:</b> United Nations High Commissioner for Refugees (UNHCR)  Q&A	<u>Plenary Session</u> Grand Ballroom
0945 - 1015	<b>Coffee Break</b>	
1015 - 1145	<b>Session 7: Case Studies (cont.)</b> <b>Care of Unaccompanied Minors (UAMs) in the Community</b> <b>Speakers:</b> - Ms Thitin Tarigan, Social Worker Coordinator/Shelter Supervisor, Church World Service, Indonesia - Mr Tanawin Kosaidilok, Caseworker, Bangkok Child Protection (BCP), Jesuit Refugee Service (JRS) Thailand  <b>Screening and Assessment</b> <b>Speakers:</b> - Mr Boris Mulengu, Legal and Prosecutions Officer, Mixed Migration and Trafficking Desk, Immigration Department of Zambia; - Ms Annie Lane, International Organization for Migration, Zambia  <b>Age Assessment and Guardianship</b> <b>Speaker:</b> - Ms Roslyn Leary, Direct Service South-East Region & Children, Adolescents and Families Programme Manager, The Victorian Foundation for Survivors of Torture	<u>Breakout Session</u>  Thailand: Room 1 (Care of UAMs in the Community)  Malaysia: Room 3 (Screening & Assessment)  Indonesia: Room 2 (Age Assessment & Guardianship)
1145 -1300	<b>Lunch</b>	
1300 - 1400	<b>Session 8: National Discussions: Developing ways forward</b>	<u>Breakout Sessions</u> Thailand: Room 1

	- Country groups in 3 break-out rooms	Indonesia: Room 2 Malaysia: Room 3
1400 - 1530	<p><b>Session 9: Reporting back from:</b></p> <ul style="list-style-type: none"> <li>- Indonesia</li> <li>- Malaysia</li> <li>- Thailand</li> </ul> <p><b>Panel discussion:</b></p> <ul style="list-style-type: none"> <li>- Mr Grant Mitchell</li> <li>- Dato' Yasmeeen Shariff</li> <li>- Madam Angkhana Neelapajit</li> </ul>	<u>Plenary Session</u> Grand Ballroom
1530 - 1545	<b>Tea break</b>	
1545 - 1600	<p><b>Concluding remarks</b></p> <ul style="list-style-type: none"> <li>- Dr Seree Nonthasoot, Thailand's Representative to the ASEAN Intergovernmental Commission on Human Rights (AICHR)</li> <li>- Ms Vivienne Chew, Asia-Pacific Regional Coordinator, International Detention Coalition (IDC) and Chair of APRRN's Immigration Detention Working Group</li> <li>- Ms Julia Mayerhofer, Interim Executive Director, Asia Pacific Refugee Rights Network (APRRN)</li> </ul>	<u>Plenary Session</u> Grand Ballroom