

UK Immigration Removal Centres: A Psychological Perspective

United Against Inhumanity

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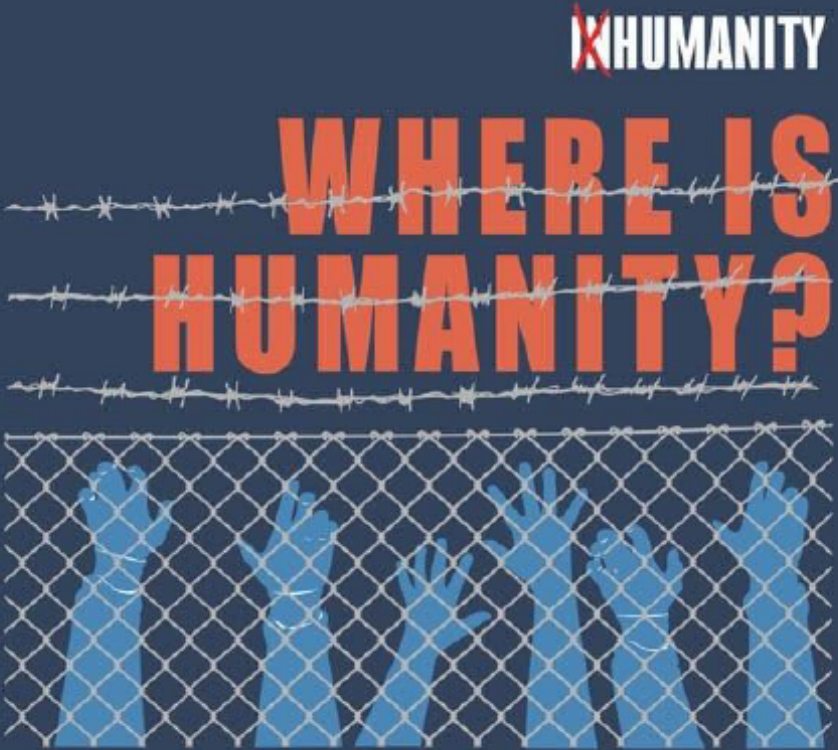
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INHUMANITY

WHERE IS HUMANITY?

THE HUMAN COST OF DETAINING ASYLUM-SEEKERS



Tuesday 25th February 2020
7PM-9PM

SPEAKERS Martin Barber (Chair UAI-UK), Anna Pincus (Director of Gatwick Detainees Welfare Group)
Dr Claire Marshall (Counselling Psychologist)
Dr. Hella López Zarzosa (Independent Researcher)

GUEST SPEAKER Gulwali Passarlay (Director of My Bright Kite)

Initiatives of Change 24 Greencoat Place London SW1P 1RD

Entry via Free Registration www.tiny.cc/detentioncentres

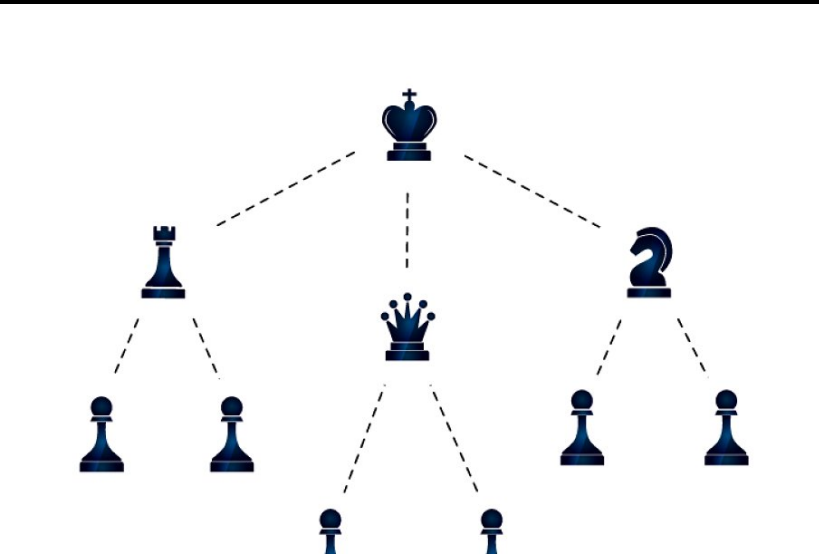
www.against-inhumanity.org  UnitedAgainstInhumanity  UAI_Initiative



Self governing and free roaming

- Historically, communities organised themselves around fertile land (often valleys) and often migrated
- Bordering practices > Process of territorialisation = symbolically perpetuate meaning and physically shape the mobilities of people = ‘creation’ of nations, states and countries* > taken for granted as the status quo.

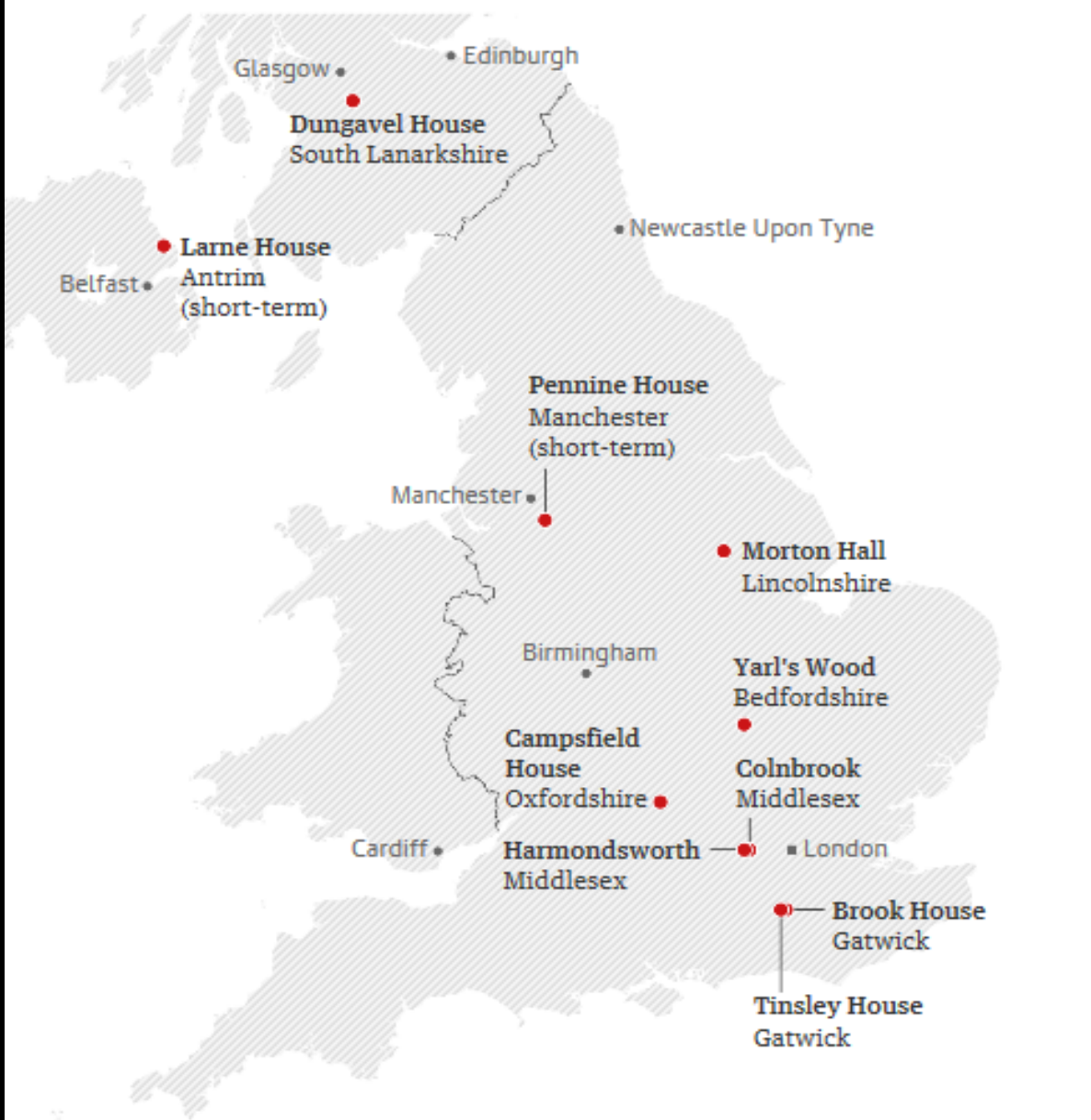
Sovereignty



- The sovereign is **'he who decides the exception'**
- The sovereign decides not only **whether there is an emergency** but also **what to do about it** (Carl Schmitt's Political Theory of 1922)



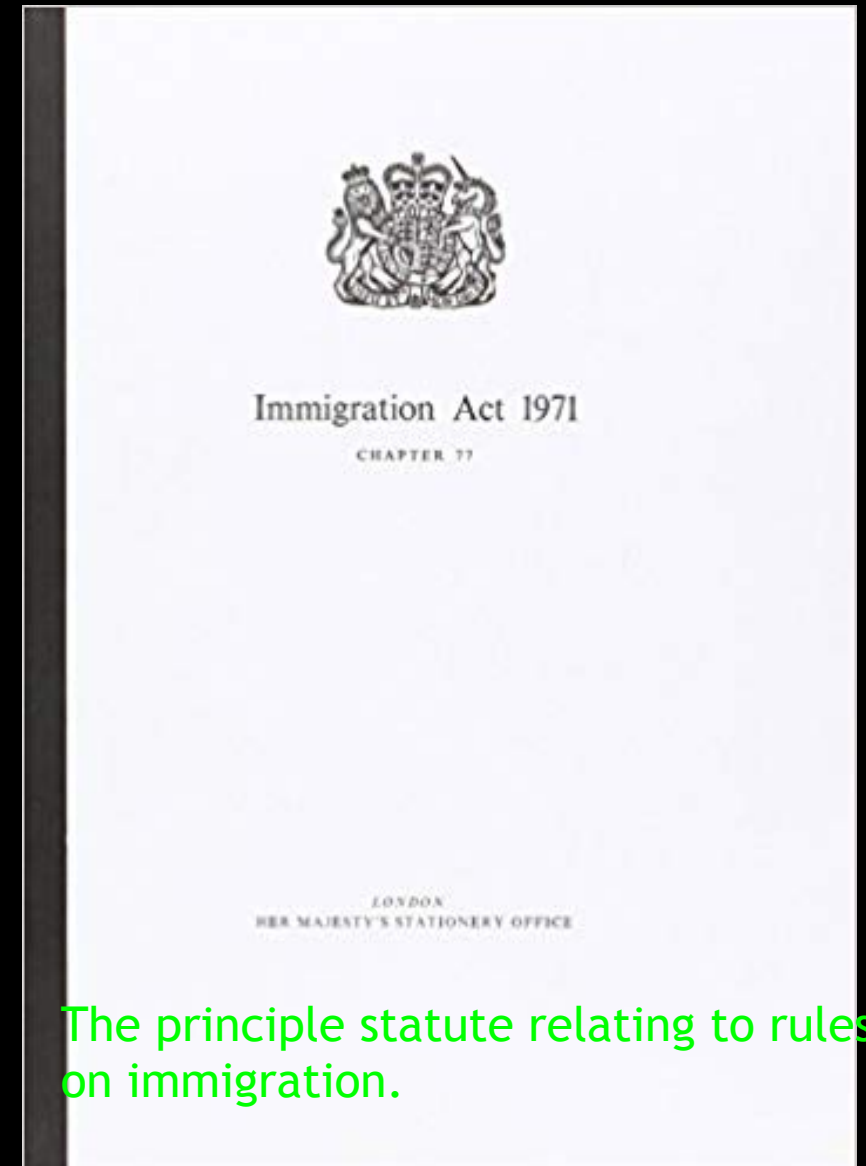
- Detention Centre's exist globally
(Global detention project, 2019)
- The immigration estate in Britain, however, is one of the **largest in Europe**



	Location	Capacity
1	Colnbrook, Middlesex	312 males and 27 females
2	Harmondsworth, Middlesex	726 male
3	Dungavel House, South Lanarkshire	235 male, 14 female
4	Yarl's Wood, Bedfordshire	349, women and adult families and short term holding facility" 38 males
5	Morton Hall, Lincolnshire	392 males
6	Brook House, Gatwick	508 male
7	Tinsley House, Gatwick	178, including the "family unit"
	Pennine House, Manchester - Residential Short Term Holding Facilities	32, male and female
	Larne House, Antrim - Residential Short Term Holding Facilities	19, male and female

Detention

- Government has wide powers to detain people for **reasons of immigration control**. Those who are subject to immigration controls **may be held** whilst they wait for permission to enter the UK or before they are deported or removed from the country.
- **An administrative form of custody** designed to facilitate their departure or while asylum claim is being undertaken/ nationality determined.



The principle statute relating to rules on immigration.

The UK detention estate



Harmondsworth IRC

Detainees are held in

Immigration Removal Centres (IRCs)

- Foreign nationals are detained on arrival, others after having lived here for many years
- Some detainees are deported, others released into the community



Morton Hall IRC, Lincolnshire

Immigration detention is an **administrative process, not a criminal procedure**, this means that migrants and undocumented people are detained at the decision of an immigration official, not a court or a judge' (AVID, 2019)

Home Office policy states detention may be used in the following circumstances:



Home Office

- **Abscond** if given temporary admission or release;
- Insufficient reliable information to decide whether to grant temporary admission or release;
- Removal from the UK is imminent;
- Needed whilst alternative arrangements are made for the person's care; and
- **Release is not considered conducive to the public good.**

Time

- ‘Unlike most other European countries, there is **no time limit on immigration detention in the UK** (the UK opted out of the EU Return Directive, which includes an absolute maximum of 18 months for immigration detention).
- The Home Office would usually only detain someone for **more than 6 months** if they are a **foreign national offender (FNO)**, or if they have **subsequently claimed asylum while in detention**.

<https://www.gov.uk/government/publications/immigration-statistics-year-ending-december-2018/how-many-people-are-detained-or-returned>



Data: Individuals held in immigration detention (solely under Immigration Act powers)

- At the end of December 2018, there were 1,784 people held in the detention (down 30% compared with the same date 12 months earlier) > lowest level since comparable records began in 2009.
- In 2018, 24,748 individuals entered the detention estate (down 10% than the previous year) > lowest level since comparable records began in 2009.
- In 2018, 25,487 left the detention estate (down 10%). Over two-thirds were detained 29 days or less. **4% detained for more than 6 months.** Of those leaving detention, **44% were returned from the UK to another country.**

Table 6: People entering, leaving and in detention, 2014 to 2018^{1,2}

Year	Entering detention	Leaving detention	In detention³	In detention (excl. HM Prisons)
2014	30,364	29,674	z	3,462
2015	32,447	33,226	z	2,607
2016	28,903	28,677	z	2,738
2017	27,348	28,255	2,545	2,138
2018	24,748	25,487	1,784	1,418
Change: latest year	-2,600	-2,768	-761	-720
Percentage change	-10%	-10%	-30%	-34%

Claiming asylum

Many of the people in detention have **had their asylum claim rejected** or **did not know they could claim asylum** (either because of language barriers or lack of knowledge around legal aid or the process of making a claim).



The Detention Centre: A symbolic resource (spectacle) to maintain boarder integrity

- Borders = process of territorialisation (organizing as a territory)
- Borders physically shape the mobilities of people
- Borders work on the principle of inclusion and exclusion = e.g. citizen > non citizen polarity/ continuum.

(Citizens have political rights, whereas non-citizens do not. This includes the right to vote, to have labour representation, and to participate in the public system)



Summary:

- Borders symbolically perpetuate meaning
- This meaning influences the formation of (legal) categories of people
- Those categories of people who do not come under state protection are subject to humanitarian intervention



An administrative practice in theory

- Most are managed by private sector companies; some are operated by the Prison Service (Brook House, Colnbrook, and Harmondsworth are effectively now Category B prisons - the 2nd highest of 4 security categories in the main prison system), (Corporate watch, 2018)





- <https://www.youtube.com/watch?v=EkyvmvIn5HA>

Start - 1.20

Yarl's Wood: Undercover in the secretive immigration detention centre | Channel 4 News

Criticisms

- UK's immigration system is on of the **most heavily scrutinised in Europe** including criticism from UN monitoring bodies (Global detention project, 2016)
- Target to numerous lawsuits, investigations & public demonstrations
- Home Office commissioned an independent review 'Shaw Review' in 2016 'detention has a negative impact upon detainees' mental health; and the **impact on mental health increases the longer detention continues.'**

(Home Office 2016)

Mental health and detention



Medico-Legal Psychological Report (MLRs)

- Purpose of the assesment: ascertain risk and recommend a diagnosis and treatment
- The strength of the report partly rests on impartiality of the clinician
- MLRs are based on 3 phases:
 1. Information gathering (legal documents, information from solicitors, interview with detainee) and knowledge on detention (psychological and legal)
 2. Ascertain whether client presents with symptoms aligned with a diagnosis as outlined in the ICD (WHO classification system of mental disorders) and asses risk according to Home Office criteria
 3. Provide a Medico-Legal Report

Psychological assessment

- I employ the standard approach to psychological assessment techniques employed by British Counselling Psychologists.
- The assessment encompasses the **nature, time, and severity** of the onset of psychological symptoms.
- Complex factors concerning **historical, development and cultural processes and systems** that have influenced the individual were taken into account.
- A knowledge of **evidence-based psychological theory, research and neurobiology** informs the assessment.



UK Visas and Immigration, Detention Rule 35 Process

Rule 35 is a mechanism in the UK Detention Centre Rules that is meant to protect detainees whose health is likely to be “injuriously affected” by detention, survivors of torture, and detainees thought to have suicidal intentions.

Rule 35 requires IRC medical practitioners to inform the Home Office when these detainees are being held. Upon receipt of this information, the Home Office is obliged to review the individual’s detention and determine if release is appropriate

(Global detention project, 2016)



Harmondsworth, Middlesex

Immigration Act
2016

Adult at risk policy

Who is an adult at risk?

- suffering from a condition, or have experienced a **traumatic event** (such as trafficking, torture or sexual violence), that would be likely to render them particularly vulnerable to harm if they are placed in detention or remain in detention



Dungavel House IRC, South Lanarkshire

Adult at risk: Section 59 of the Immigration Act 2016 states as follows

“59 Guidance on detention of vulnerable persons

(1) The Secretary of State must issue guidance specifying matters to be taken into account by a person to whom the guidance is addressed in determining— (a) whether a person (“P”) would be particularly vulnerable to harm if P were to be detained or to remain in detention, and (b) if P is identified as being particularly vulnerable to harm in those circumstances, whether P should be detained or remain in detention.

(2) In subsection (1) “detained” means detained under—

(a) the Immigration Act 1971,

(b) section 62 of the Nationality, Immigration and Asylum Act 2002, or

(c) section 36 of the UK Borders Act 2007,

and “detention” is to be construed accordingly.

(3) A person to whom guidance under this section is addressed must take the guidance into account.

(4) Before issuing guidance under this section the Secretary of State must lay a draft of the guidance before Parliament.

(5) Guidance under this section comes into force in accordance with regulations made by the Secretary of State.

(6) The Secretary of State may from time to time review guidance under this section and may revise and re-issue it.

(7) References in this section to guidance under this section include revised guidance.”

“Who is an adult at risk?”

7. For the purposes of this guidance, an individual will be regarded as being an adult at risk if:

- they declare that they are suffering from a condition, or have experienced a traumatic event (such as trafficking, torture or sexual violence), that would be likely to render them particularly vulnerable to harm if they are placed in detention or remain in detention
- those considering or reviewing detention are aware of medical or other professional evidence, or observational evidence, which indicates that an individual is suffering from a condition, or has experienced a traumatic event (such as trafficking, torture or sexual violence), that would be likely to render them particularly vulnerable to harm if they are placed in detention or remain in detention - whether or not the individual has highlighted this themselves.

8. On the basis of the available evidence, the Home Office will reach a view on whether a particular individual should be regarded as being “at risk” in the terms of this guidance. If, on this basis, the individual is considered to be an adult at risk, the presumption will be that the individual will not be detained.

Indicators of risk

- 11. The following is a list of conditions or experiences which will indicate that a person may be particularly vulnerable to harm in detention.
 - suffering from a mental health condition or impairment (this may include more serious learning difficulties, psychiatric illness or clinical depression, depending on the nature and seriousness of the condition)
 - having been a victim of torture (individuals with a completed Medico Legal Report from reputable providers will be regarded as meeting level 3 evidence, provided the report meets the required standards)
 - having been a victim of sexual or gender based violence, including female genital mutilation
 - having been a victim of human trafficking or modern slavery (see paragraph 20 below)

- suffering from post-traumatic stress disorder (which may or may not be related to one of the above experiences)
- being pregnant (pregnant women will automatically be regarded as meeting level 3 evidence)
- suffering from a serious physical disability
- suffering from other serious physical health conditions or illnesses
- being aged 70 or over
- being a transsexual or intersex person.

Immigration Detention. July 2018. London: Home office

Psychometric Questionnaires



- Generalised Anxiety Disorder Assessment (GAD-7) - anxiety
- Patient Health Questionnaire (PHQ-9) - depression
- INTERNATIONAL TRAUMA QUESTIONNAIRE (ITQ) - PTSD and CPTSD

INTERNATIONAL TRAUMA QUESTIONNAIRE (ITQ)

	Complex PTSD Responses	Not at all 0	A little Bit 1	Moderately 2	Quite a bit 3	Extremely 4
1.	When I am upset, it takes me a long time to calm down					X
2.	I feel numb/emotionally shut down					X
3.	I feel like a failure					X
4.	I feel worthless					X
5.	I feel distant or cut-off from people					X
6.	I find it hard to stay emotionally close to people					X

International Classification of Diseases (ICD) - World Health Organisation defines the universe of diseases

Recommended diagnosis: Complex PTSD

- PTSD and Complex PTSD, not as separate from PTSD but hierarchical - with PTSD as a precursor to complex PTSD. PTSD and Complex PTSD share many of the same symptoms, however Complex PTSD represents a greater functional impairment

‘The World Health Organisation International Classification of Diseases (ICD)’ - CPTSD

Complex PTSD is a disorder that may develop following exposure to an event or series of events of an extremely threatening or horrific nature, most commonly prolonged or repetitive events from which escape is difficult or impossible (e.g., torture, slavery, genocide campaigns, prolonged domestic violence, repeated childhood sexual or physical abuse). All diagnostic requirements for PTSD are met. In addition, Complex PTSD is characterized by severe and persistent

- 1) problems in affect regulation;
- 2) 2) beliefs about oneself as diminished, defeated or worthless, accompanied by feelings of shame, guilt or failure related to the traumatic event; and
- 3) 3) difficulties in sustaining relationships and in feeling close to others. (WHO, 2018).

Common symptoms:

- Low mood
- Numbness
- Flashbacks
- Suicidal thoughts
- Disturbances in sleep
- Overwhelmed by emotions (sadness) / difficulty regulating affect
- Angry outbursts
- Visual/ auditory hallucinations
- Disturbances in memory

Exacerbating factors

- Symptoms can be exacerbated due to prolonged exposure to factors including uncertainty, lack of autonomy, deprivation of liberty, dehumanisation, isolation and lack of social support. (Freedom from torture, 2018)

Access to healthcare

- Often the only health care on offer is painkillers.



MLR

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Final Draft

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REFERRING AGENCY OR THE CLIENT.

Page 1 of 29

Confidential Medical Legal Psychological Report
Prepared by Dr C Marshall BA, Cert, FRCPS, A&P, CMC, MCPC, MR, MRAG

Contents

- A. The Author
- B. Assessment and Report: Overview
- C. Chronology and Summary of Relevant Evidence as Reported by Client
- D. Family / Social History
- E. Reported Psychological Issues
- F. Mental State Examination
- G. Current Medication
- H. Psychometric Tests: Summary
- I. Psychometric Tests: Results
- J. Impression / Opinion
- K. Conclusion and Recommendations
- L. Risk
- M. Statement of truth
- N. References

Mental state examination

Findings

RC	Presentation
Morton Hall	

Is patient an adult at risk in immigration detention?

YES

In my professional opinion, the patient, Mr xx | is an adult at risk as per the Guidance on Adults at Risk in Immigration Detention of Section 59 of the Immigration Act 2016. Continued detention will make the patient's difficulties worse.

“It would be better to leave me by the
roadside to die”
– IRC detainee, 2019



Hierarchy of humanity



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Further reading

- Visitors' networks (<https://www.biduk.org/pages/48-detention-centre-visitors-groups>)
- Legal and medical support groups ([Bail for Immigration Detainees](#) and [Medical Justice](#) solidarity demos)
- Political campaigns
- The Report of the Inquiry into the Use of Immigration Detention in the United Kingdom: A Joint Inquiry by the All Party Parliamentary Group on Refugees & the All Party Parliamentary Group on Migration. (2015)
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