

Medical Justice – Written evidence (FAM0098)

About Medical Justice

Medical Justice is the only charity in the UK to send independent clinicians into all the Immigration Removal Centres (IRCs) across the UK. The medical reports they produce document scars of torture, serious medical conditions, deterioration of health in detention, injuries sustained during violent removal attempts and challenge instances of medical mistreatment. We receive around 600-1,000 referrals for people in detention each year. Our evidence base is sizeable, unique and growing.

We help clients access competent lawyers to harness the strength of the medical evidence we generate. Evidence from our casework is the basis for our research into systemic failures in healthcare provision, the harm caused by these shortcomings, as well as the toxic effect of immigration detention itself on the health of people in detention. Our casework evidence guides our policy, parliamentary and strategic litigation work to secure lasting change.

Evidence

Introduction

1. The Migration and Economic Development Partnership (MEDP) is an agreement which enables the UK to forcibly remove people whose asylum claims are deemed inadmissible¹ and who arrived by “dangerous” routes², to Rwanda to have their asylum claims processed there. Individuals removed under the MEDP will not have the option to return to the UK.
2. The agreement has been widely condemned by the UN High Commissioner for Refugees³ parliamentary committees⁴, campaigners⁵, legal bodies⁶ and medical experts⁷. The Government has been criticised

¹ Asylum claims may be treated as inadmissible where the person has “a specified connection to a third country which is assessed as safe” and means that the “Home Office is not required to consider the asylum claim”. See Home Office (2022) [‘Inadmissibility: safe third country cases’](#) Version 7.0. p.10.

² Home Office (2022) [‘Inadmissibility: safe third country cases’](#) Version 7.0. p.17.

³ United Nations (2022) [‘UNHCR ‘firmly’ opposing UK-Rwanda offshore migration processing deal’](#) and United Nations (2022) [‘UK’s bid to export some refugees to Rwanda, ‘all wrong’, says UN refugee chief’](#).

⁴ Joint Committee on Human Rights (2022) [Letter to Rt Hon Priti Patel MP](#) and Home Affairs Committee (2022) [‘Channel crossing, migration and asylum’](#) First Report Session 2022-23.

⁵ Many campaigners and NGOs have condemned removals to Rwanda and are campaigning against it, including [Amnesty International](#), [Human Rights Watch](#) and [Care4Calais](#).

⁶ The Law Society (June 2022) [‘Rwanda removals raise rule of law questions’](#).

⁷ MSF UK (2022) [Public letter from the UK medical community on the dangerous health consequences of Rwanda expulsions](#) and Sen, P. et al (2022) [‘The UK’s exportation of asylum obligations to Rwanda: A challenge to mental health, ethics and the law’](#), *Medicine, Science and the Law*, 62(3), pp. 165–16.

for undermining the asylum system by shirking its international responsibility, and is being challenged on the legality of the agreement⁸.

3. Since mid-May 2022 Medical Justice has been in contact with 51 people who have received a Notice of Intent (NOI) from the Home Office informing them that they are being considered for removal to Rwanda under the MEDP.
4. In our recent report "*Who's Paying the Price? The Human Cost of the Rwanda Scheme*", Medical Justice collated and analysed anonymous data from 36 of these individuals.⁹
5. The report found that the process to which the individuals have been subjected was accelerated, unclear, and plagued by procedural deficiencies, including a lack of access to legal advice, a lack of translated documents, and inadequate screening. A full discussion of all the data is available in the report itself, along with the research methodology. Further details on specific aspects can be provided to the Committee if useful.
6. For the purposes of the Committee's current inquiry, however, Medical Justice believes it is important to highlight the fact that at least seven of the 36 individuals included in the analysis have family members in the UK.
7. These family members include parents, siblings, children, aunts and uncles.
8. One of the individual's family members in the UK included people with refugee status and a person who had become a British citizen.
9. By way of additional information, the nationalities of the seven individuals in question are Iraqi (1), Iranian (1), Eritrean (2), Sudanese (1), Syrian (2). They are aged between 21 and 46 years old. All require interpreters. They all travelled to the UK to claim asylum.
10. Five of the individuals arrived by small boat across the Channel from France. One arrived undetected, and one person's mode of entry is unknown because he is too mentally unwell to recount his history.
11. All of the seven individuals have been detained under immigration powers and held at various sites, including Short-Term Holding Facilities¹⁰ and Immigration Removal Centres¹¹. They received their Notice of Intent from the Home Office whilst held in detention.

⁸ Leigh Day (June 2022) '[Rwanda Scheme legal challenges to continue despite unsuccessful injunction](#)' and Duncan Lewis (June 2022) '[Rwanda Asylum Seeker Scheme Challenge Continues](#)'.

⁹ Medical Justice (2022) '[Who's Paying the Price? The Human Cost of the Rwanda Scheme](#)'.

¹⁰ Yarl's Wood

12. Two of the individuals received Removal Directions for the planned removal flight on 14 June 2022, including one who was amongst the group taken to the airport and placed into the aircraft, prior to the flight's subsequent cancellation.
13. All seven individuals applied for but were refused bail by the Home Office. They then applied for and were granted bail by a Tribunal judge and have now been released from immigration detention. One of the individuals was electronically tagged upon release from detention.
14. Decisions that people's asylum claims are inadmissible and to remove them to Rwanda have not been withdrawn
15. The seven individuals include people with histories of torture and/or trafficking. Two people have received a positive reasonable grounds decision following their referral to the National Referral Mechanism¹², meaning that the Home Office has recognised them as potential victims of trafficking.
16. Medical Justice doctors conducted clinical assessments for four of the seven individuals. Their assessments found that three individuals had a diagnosis or a preliminary diagnosis of post-traumatic stress disorder (PTSD) and two had a diagnosis or symptoms of depression. One individual had a provisional opinion that he is likely to have a psychotic disorder and lack capacity to make decisions in relation to his immigration case or to instruct his solicitor in this regard.
17. The Royal College of Psychiatrists have stated that "(f)amily integrity is a crucial factor in maintaining mental health and separation should be avoided wherever possible"¹³. Similarly, guidance from the UK's National Institute for Health and Care Excellence (NICE) on the treatment and management of PTSD states that involving family members in treatment can be a way to "inform and improve the care of the person with PTSD", including supporting the person to access treatment¹⁴, while its guidance on depression highlights the involvement of family members at various stages in the care journey, including the recognition and monitoring of symptoms, and discussion of treatment options¹⁵.

¹¹ Brook House and Colnbrook

¹² The [National Referral Mechanism](#) (NRM) is the UK's framework for identifying and referring potential victims of modern slavery and ensuring they receive the appropriate support.

¹³ Royal College of Psychiatrists (2021) [Detention of people with mental disorders in immigration removal centres \(IRCs\): Position statement](#) pp. 8 and 10

¹⁴ NICE (2018) [Post-traumatic stress disorder](#) paras 1.4.5-1.4.6.

¹⁵ NICE (2022) [Depression in adults: treatment and management](#) paras 1.1.4, 1.2.11, 1.3.2 and 1.3.4.

18. In three of the assessments conducted, Medical Justice doctors commented on the impact of individuals having family members in the UK. The comments included family members being a source of hope for the future, providing support whilst in detention and after release, and being a protective factor against suicide. One individual's mental health was reassessed following release and was found to have improved; this is likely to be related to both his release and the support received from his family. His family support in the UK was found to be central to a good prognosis, and he is likely to deteriorate if removed from the UK.
19. Medical Justice doctors also noted that for three of the individuals, having family in the UK was part of their decision to make the journey here.

22 September 2022