

## 1. Written Evidence Submitted By Asylum-Network

1.1 Asylum network is an association of academics that have collectively completed seven research projects with detainees and asylum seekers over the the last decade. This submission draws on the evidence collected via interviews, focus groups, ethnographies and surveys with:

- Former detainees
- Detention centre staff
- Activists

## 2. Executive Summary

2.1 We focus this submission on three issues that are often overlooked:

2.1.1 The frequent transfer of detainees from one centre to another.

2.1.2 The risk of secondary trauma among employees, advocates, and volunteers at IRCs.

2.1.3 The experience of workers at IRCs.

2.2 We endorse a time limit on immigration detention in the UK.

2.3 We call for a more thorough process of judicial oversight of the decision to detain.

2.4 We recommend that limits be placed on the number of times detainees can be transferred between IRCs.

2.5 We recommend that more support is provided to staff and advocates at risk of secondary trauma.

## 3. Introduction

3.1 At the time of writing the United Kingdom utilises 12 detention centres with a capacity for around 4000 detainees at any one time. Individuals are also frequently held at ports, airports and in mainstream prisons. In total, over 30,000 migrants are held in immigration detention annually.

3.2 The size of the immigration detention population in the UK has grown from a capacity of 250 in 1993<sup>1</sup> to 4000 today (Bacon 2005). Removal centres are contracted out to private security companies such as Serco, G4S, Mitie and Geo. While officially run under the *Detention Centre Rules*, successive HM Chief Inspectorate of Prisons inspections of detention centres have revealed that some of the most fundamental principles of these rules are not adhered to in practice. The rules state that:

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<sup>1</sup> Bacon, C. (2005) 'The Evolution of Immigration Detention in the UK: The Involvement of Private Prison Companies', *Refugee Studies Centre Working Paper No. 27*. Oxford: Refugee Studies Centre  
<http://www.rsc.ox.ac.uk/PDFs/RSCworkingpaper27.pdf> (accessed 23rd January 2008).

'The purpose of detention shall be to provide for the secure but humane accommodation of detained persons in a relaxed regime with as much freedom of movement and association as possible, consistent with maintaining a safe and secure environment, and to encourage and assist detained persons to make the most productive use of their time, whilst respecting in particular their dignity and right to individual expression...'

Detention Centre Rules (2001<sup>2</sup>) sections 3(1)-3(2)

3.3 In contrast to these principles, immigration detention in the UK has been alleged to be the site of 'secondary torture' for torture victims (Medical Justice 2012). Migrants are locked away out of sight and out of mind for indefinite periods without trial or a specified release date.

3.4 Asylum-Network is committed to using research skills and findings to bring an end to the use of immigration detention in the UK, and/or to significantly limit its use. Although our research raises many issues, in this submission we will focus on three often overlooked areas: the movement of detainees around the detention estate, secondary trauma among staff and advocates, and the experience of workers in IRCs.

#### 4. Movement Around the Detention Estate

4.1 Detainees are frequently transferred from one IRC to another. This undermines relationships between staff and detainees, restricts access to legal and other support networks and dilutes the depth and quality of relationships detainees form with advocates and each other. The frequency of inter-detention estate transfers is not routinely published, however parliamentary questions in 2005/6 revealed £6.5 million was spent on moving detainees from one secure facility to another within the UK (our calculations from Hansard 5th December 2005<sup>3</sup>, and Hansard 9th January 2006<sup>4</sup>).

4.2 Frequent movements between IRCs appeared to be part of a specific 'initiative' in the mid-2000s. As one activist told us:

'They've initiated a totally different regime which is that they don't want to leave any detainees anywhere for any length of time. There are a few detainees in [IRC] that have been in there for a long time but very few. They will come in and they will stay for 10 days and they will be moved to Harmondsworth or Yarl's Wood or anywhere but it's a moving process'.

4.3 Former detainees' accounts of their detention experiences often include tortuous and protracted routes around the detention estate. 'Before Campsfield House I stay long time [in] four detentions' one former detainee divulged.

'My first detention is Oakington. I stay three days for Oakington. Four months five day in Harmondsworth. After Harmondsworth [*name*] could bring me to Belmarsh prison - I stay maybe one month. After Belmarsh I stay in Dover detention two months four days. After Dover I go again to Harmondsworth one week. After Harmondsworth [*they brought me*] to Campsfield House...the total's fifteen months in detention'

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<sup>2</sup> Immigration and Nationality Directorate (2001) 'Detention Centre Rules', *SI 2001/238*. London: HMSO [http://www.legislation.gov.uk/ukxi/2001/238/pdfs/ukxi\\_20010238\\_en.pdf](http://www.legislation.gov.uk/ukxi/2001/238/pdfs/ukxi_20010238_en.pdf) (accessed 18 March 2014).

<sup>3</sup> Hansard, H. C. (5th December 2005) 'Vol. 440 Col. 972W'.

<sup>4</sup> Hansard, H. C. (9th January 2006) 'Vol. 441 Col. 374W'.

4.4 Although transfers might be prompted for a range of operational reasons, various interviewees indicate that the rationale for the transfers is often related to discipline. ‘Troublesome detainees seemed to be moved more’ a support officer reflected. A healthcare worker wrote that: ‘Staff frequently say things like “I’ll request his removal; he’s a ringleader, inciting others to cause trouble”. These accounts were corroborated by a detainee who had spent four years in detention shuttling between seven detention centres in the UK. He was in no doubt that the transfers were often precipitated on disciplinary grounds. ‘Sometimes they will accuse me of leading other detainees and things like that’ he explained, ‘There was one occasion when I complained and another group who followed me and complained. Next thing I was gone from there’.

4.5 Some IRCs have better facilities including more hours of free association and better gyms, food, health facilities, libraries, internet provision and better relations between officers and detainees. The prospect of being moved to an IRC that is lacking provisions is distressing for many of the detainees. One former detainee explained that he had been concerned about possible transfers whilst in detention. ‘Very worry very’, he replied, ‘maybe a manager of staff of detention call you and give you news. Tomorrow you move you go to another detention [where] treatment is different’.

4.6 Transfers themselves are disruptive, breaking detainees’ ties to outside support. ‘If they get moved to Dungavel (in Scotland) and they have a lawyer in London it’s hard, the lawyer often gives up the case’ one advocate told us. Sometimes detainees are not fore-warned about transfers. This is a strategy used ‘in case they are trouble’ one staff member claimed, which means that they can be ‘informed at 10pm that they will be moved the next day’. On these occasions they do not have time to notify friends, family and/or solicitors. Access to phonecards and phones can be limited. Frequent movement thwarts the possibility of finding people to act as sureties<sup>5</sup> in bail hearings, and it can be difficult to maintain a supply of willing volunteer visitors when the detainees they will be vouching for or visiting are often people that they have met only a few times before, if at all.

4.7. Medical care is also sometimes compromised since many transfers occur overnight. A nurse is supposed to be present at night but we have heard reports that nurses are often not present. One doctor, who had visited many detainees in IRCs as an independent medical advisor, claimed that detainees’ medicines and medical notes would often not be transferred with them from centre to centre either. ‘They arrive without their medication, they arrive without a medical note’ he explained. Subsequently there is a risk that they will not be believed when outlining their need for medication after having been transferred either from another detention centre or a prison. Transfers thus undermine the support available to the detainees and make them more vulnerable.

## 5. Secondary Trauma among Staff and Supporters

5.1 Research has established that detention can exacerbate and cause the recurrence of traumatic experiences that forced migrants have endured<sup>6</sup>. Attendant psychological and physical outcomes include anxiety, depression, sleep disorders, and post-traumatic stress disorder (PTSD).

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<sup>5</sup> Sureties pledge a certain amount of money at the detainee’s bail hearing that they will pay to the authorities if the detainee absconds.

<sup>6</sup> For example: Physicians for Human Rights (2003) *From Persecution to Prison: The Health Consequences of Detention for Asylum Seekers*. ISBN 1-879707-40-3; Center for Victims of Torture (CVT) and Torture Abolition and Survivor Support

5.2 In addition our research shows that detention has detrimental emotional effects—specifically secondary trauma and emotional strain—for advocates, including legal service providers and members of charitable visitation support groups. These effects can limit the effectiveness of legal and other supports.

5.3 In psychological terms, secondary trauma refers to feelings that result from being repeatedly exposed to another person’s mental distress and/or hearing accounts of traumatic experiences. The symptoms of secondary trauma are often rapid, triggered by a specific event or encounter, whilst emotional strain can result from a more gradual build-up of stress. Symptoms may include feeling afraid, depression and anxiety, fatigue and sleeping problems, intrusive and recurrent images of upsetting stories and events which are difficult to control and manage, as well as feelings of isolation or loss of empathy with client groups.

5.4 Respondents noted that committed supporters, and staff, spend protracted periods of time in detention centres. Their inability to assure detainees when they will be released, due to the lack of a maximum length of time in detention in the UK, leads to feelings of helplessness in working with them.

5.5 Prolonged engagement with distressing cases along with the disturbing conditions that detainees endure can lead to what respondents described as burnout and loss of empathy.

5.6 In situations where detainees are suddenly moved or indeed deported, advocates are often not informed about the whereabouts of clients that they are profoundly concerned about and may have formed emotional bonds with.

5.7 Being confronted with the needs of detainees on a daily basis can result in loss of expertise within the migrant support sector. Several of our respondents associated emotional strain with high employee and volunteer turnover. This is especially concerning when the most experienced staff feel unable to continue working in the sector.

5.8 Efforts are made by some advocates to mitigate the effects of emotional strain so that they can continue to work with detainees. Among the strategies identified by our respondents were: education and training to recognize the symptoms of secondary trauma; working closely with other organisations to combat emotional strain; making time to share concerns; and allowing for periods away from ‘the front line’ of support . We recommend that such strategies be adopted more widely, including among IRC staff, and resourced for those working and volunteering with detainee populations.

5.9 It is equally important to recognize that these mitigating strategies are limited and do not address the root causes of primary and secondary trauma associated with detention. On this basis we recommend non-detention of migrants for purposes of immigration control. Failing this, we

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Coalition, International (TASSC) (2013) Tortured and Detained: Survivor Stories of US Immigration Detention. [http://www.cvt.org/sites/cvt.org/files/Report\\_TorturedAndDetained\\_Nov2013.pdf](http://www.cvt.org/sites/cvt.org/files/Report_TorturedAndDetained_Nov2013.pdf) and in the UK see Medical Justice (2012) 'The Second Torture': The Immigration Detention of Torture Survivors. London: Medical Justice <http://www.medicaljustice.org.uk/reports-a-intelligence/mj/reports/2058-the-second-torture-the-immigration-detention-of-torture-survivors-22052012155.html> (accessed 18th March 2014).

recommend implementation of “alternatives to detention programmes” for the most vulnerable individuals, including children.

## 6. The Perspective of Guards and other Workers within IRCs

6. 1. The insecurity experienced by detainees within IRC can often, perhaps counter-intuitively, be shared by staff. It is important to note the low pay and insecure working conditions of detention centre staff.<sup>7</sup> Detention facilities are often experienced as volatile places to work and staff must deal with distressed and desperate detainees. DCOs (Detention Custody Officers) are required ‘to prevent escape, to prevent, detect or report on an unlawful act, to maintain good order and discipline, and to attend to a detainee’s well-being’.<sup>8</sup> This makes security inside the IRC (of staff, detainees and visitors) a central priority. However, research among Prison Officer DCOs revealed that in comparison to convicted or remand prisoners, there is a lack of training and methods to maintain security among IRC populations<sup>9</sup>. One outcome of deficient training amongst IRC staff is that staff inappropriately exert control and power over detainees. To be clear, the conclusion is not that DCOs require more tools of control. On the contrary, the conclusion (notably, frequently drawn by DCOs themselves) is that secure custody for immigration detainees is unnecessary, these are not criminals, and causes undue suffering – as one officer put it, ‘it’s bad for them and it’s bad for us’.

6. 2. There is also little incentive or opportunity for IRC staff to develop positive relationships with detainees (over half of whom are held for less than two months, but 5% of whom are held for more than one year)<sup>10</sup>. In a prison environment, the de-individualising effects of an institutional environment are counterbalanced by the relationships that staff and prisoners are able to form, particularly around the rehabilitative goals of prison life. In an IRC the rehabilitative ideals of prison custody are absent. Staff encounter shifting populations and often insurmountable language barriers. This creates a sharp differentiation between ‘them’ (detainees) and ‘us’, and boredom and apathy among many members of staff. Staff also experience conflict in their roles, as one officer described, ‘they [management] want us to be social workers, but then, suddenly, we’re expected to roll around on the floor with them [control and restraint techniques]. You can’t have it both ways.’

6. 3. It is well documented that the use of secure facilities within an immigration control system stigmatises and criminalises detainees. For IRC staff charged with the ‘secure but humane’ accommodation of detained people staff training<sup>11</sup> does not equip individuals to deal with the specific vulnerabilities and anxieties of detained people, particularly refused asylum-seekers, the most common category of detainee.<sup>12</sup> The DCO certification process involves IRC staff being familiarised with (among other things) human rights legislation, diversity issues and safeguarding

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<sup>7</sup> See for example responses given to the Chair of the Home Affairs committee in 2013 about the pay of G4S staff: <http://www.publications.parliament.uk/pa/cm201314/cmselect/cmhaff/616/616we09.htm>

<sup>8</sup> Detainee Custody Officer Certification, Detention Services, 2011.

<sup>9</sup> For instance, there is no Incentives and Earned Privileges Scheme.

<sup>10</sup> Silverman, S., and R. Hajela (2013) Immigration Detention in the UK, Migration Observatory Briefing, COMPAS, University of Oxford.

<sup>11</sup> Typically an eight week initial training course for Prison Officers (Prison Officer Entry Level Training (POELT)) and a four week course for DCOs employed by private companies. In order to receive Detainee Custody Officer Certification individuals need to have demonstrated they have passed an DCO initial training course (Detainee Custody Officer Certification, Detention Services, 2011).

<sup>12</sup> Silverman, S., and R. Hajela (2013) Immigration Detention in the UK, Migration Observatory Briefing, COMPAS, University of Oxford.

children. However, a meaningful understanding of the experiences of forced migrants is frequently lacking in custody staff. The provision of training around cultural difference and facilities to accommodate diversity within IRCs is not to be criticised. However, the complex welfare needs of vulnerable and traumatised detainees are not adequately addressed by these provisions.

## 7. Conclusion and Recommendations

7.1 The UK is one of only a small number of European countries to practice indefinite detention. Not knowing the term of your confinement is one of the cruellest elements of the British detention system. One advocate told us: 'They start getting frustrated and angry and depressed all at once because they don't know how long they're here for'.

7.2 When detainees complain about conditions (many do not, one staff member told us, because 'they think it will affect their case'), there is concern that these complaints are not taken seriously or that disciplinary consequences will follow. One former staff member alleged that

'If a detainee puts in a complaint about an officer one can be almost sure that the officer's friend will put in a [notification that the detainee poses a high security risk] on the detainee... This usually means the segregation block... Senior management have the attitude that detainees are guilty unless proven innocent. [C]omplaints are seldom completed and many more are just swept under the carpet or the detainee moved... we have seen detainees victimised for making complaints'.

7.3 It is imperative that the inquiry takes account of the structural barriers preventing immigration detainees from raising valid concerns.

7.4 We recommend an end to the routine use of immigration detention in the UK and the following immediate alterations:

**7.4.1 A maximum time limit on immigration detention.**

**7.4.2 When an individual is detained under immigration law, the detained person should be brought within 72 hours before a judicial authority so that the decision can be reviewed, confirmed or overturned.**

**7.4.3 Immediate measures to reduce the movement of detainees from one centre to another for example via a numeric cap on the number of transfers allowable per three months, or judicial review of further transfers after the cap has been reached.**

**7.4.4 More support for advocates and staff that exhibit trauma and stress symptoms, including the opportunity to step back from front line work.**