

NGO Report to the 3rd Cycle of the Universal Periodic Review of Finland

This report was written by the Centre for Torture Survivors in Finland (CTSF) with technical support from the International Rehabilitation Council for Torture Victims (IRCT)



For the attention of the UN Human Rights Council:

I. INTRODUCTION

1. The Centre for Torture Survivors in Finland (CTSF) is a part of the Helsinki Deaconess Institute and is an outpatient ward of specialised healthcare for assessing, treating and rehabilitating victims of torture and other traumatised refugees and asylum seekers and their families in Finland. CTSF provides individual, multidisciplinary and comprehensive therapy to victims of torture on an outpatient basis. Treatment methods include psychiatric assessment, psychological assessment and testing, medical and neurological evaluation, special consultation and referrals to hospitals, psychotherapy, physiotherapy and art therapy. CTSF treats around 175 of asylum seekers and refugees every year.
2. This report will focus on the situation of asylum seekers in Finland and in particular will highlight the deficiencies in the Finnish asylum system with regard to a general lack of specialised support for victims of torture, healthcare, reception conditions and identification of victims of torture. The report is informed by the experience of CTSF in assisting this particular client group.

II. RECOMMENDATIONS FROM THE 2ND CYCLE OF THE UPR

3. The Finnish State accepted the following recommendations relevant to victims of torture during the 2nd cycle of the UPR in September 2012. The Optional Protocol of the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment was duly ratified in 2014, and the Finnish Parliamentary Ombudsman was designated the National Preventative Mechanism.
 - Promptly create a national mechanism for the prevention of torture with access to all places of deprivation of liberty.
 - Take concrete measures to reduce the resort to detention of migrants solely for immigration purposes.
 - Apply alternative measures to the detention of asylum-seekers and irregular immigrants, including children and other vulnerable people, and establish a mechanism to examine this practice.

III. KEY ISSUES OF CONCERN AND RECOMMENDATIONS

4. Finland experienced a near tenfold increase in asylum applications from 2014 to 2015, placing a considerable strain on an asylum system accustomed to handling far fewer applications. Trends for 2016 suggest that these figures are unlikely to decrease substantially. This increase in applications has led to coordination challenges across services providers and relevant authorities, sometimes at the peril of the victims of torture. Authorities responded to the

influx by establishing over 100 reception centres, but have not always been able to find sufficient staff or to provide them with appropriate training to work with traumatised refugees.

5. The major challenge in Finland is that there is almost no awareness or specialised support on victims of torture and torture trauma throughout the entirety of the asylum procedure. This means that victims of torture, sometimes suffering from severe trauma, are not provided with special procedural guarantees, reception facilities or even basic needs.
6. Most of the people treated at CTSF, suffer from mental health problems such as posttraumatic stress disorder (PTSD), anxiety and depression and different musculoskeletal disorders.

Lack of healthcare for asylum seekers

7. Asylum seekers do not have legal right to access the national healthcare system. Asylum seekers are only entitled to acute or emergency care and as such cannot access doctors or psychologists for torture trauma or other injuries. Some asylum seekers carry injuries, such as serious toothaches, for months and years before they are able to receive any help. To request a doctor, an asylum seeker must leave a note with the nurse or social worker at their reception centre. The nurse will then determine whether the person is in acute need of a doctor, or whether the nurse can treat them at the reception centre.
8. The Finnish public health system also remains unprepared and untrained in treating the particular problems that asylum seekers and refugees face. In particular, there are issues with a lack of knowledge in treating tropical diseases and a lack of awareness in how to deal with traumatised refugees and their particular problems.

Recommendations:

- The Finnish government should not restrict healthcare to asylum-seekers. Victims of torture should have access to medical and psychological support.
- The Finnish State should ensure that victims of torture who seek asylum have practical access to NGOs offering rehabilitation services. This means that torture victims should not be relocated to remote areas of Finland, where these services do not exist.
- The Finnish State should ensure adequate funding of NGOs providing holistic rehabilitation
- The Finnish State should ensure that doctors, nurses and psychologists in the public health system are adequately trained in treating traumatised refugees.

Inadequate reception facilities for asylum seekers

9. Reception conditions are inadequate for the needs of victims of torture and other traumatised refugees. Due to the increase in asylum applications, the asylum centres are often overcrowded with several people sharing very small spaces or they are transferred from one reception centre to another, which lead to information gaps. This lack of privacy and security and adequate standards can have a severely negative impact on the mental health of traumatised asylum seekers.
10. One of the problems CTSF have noted is that there is no consideration of the national or religious background of asylum seekers when they are placed in reception facilities, potentially leading to further isolation and anxiety. Furthermore, adolescents who have only just reached adulthood are housed with other adults, which may not be appropriate if the person is heavily traumatised. The Finnish Immigration Service has also acknowledged that there are vast discrepancies in the quality of the education provided across reception facilities in Finland. In general, asylum seekers housed near the capital area have access to higher standards of education than those in more remote areas of Finland.

Recommendations:

- The Finnish State should work to ensure that reception facilities adequately address the needs of torture victims. This includes working to find adequate housing for all asylum seekers and reducing the current levels of overcrowding.
- All staff in reception facilities should be trained in identifying symptoms and signs of trauma and in how to deal with such symptoms, including through prompt referrals to appropriate services.

No specialised support for victims of torture

11. At present, there are no mechanisms or procedures to systematically identify victims of torture. All asylum seekers arriving in Finland are provided with a medical screening at the beginning of the process but this is largely meant to detect communicable diseases and not to serve as a mechanism for the identification of vulnerable applicants. Identification must take place in order for subsequent specialised support to occur.
12. The authorities do on occasion refer individual asylum seekers to CTSF for medico-legal reports (MLR) services based on these screenings but this is not done in any systematic manner. Legal representatives are able to request MLRs on behalf of their clients but not all lawyers are aware of the MLR services provided by CTSF. Furthermore, since the numbers of asylum seekers have increased so dramatically in recent years, not all providers of MLRs are following the standards of the Istanbul Protocol.
13. Furthermore, CTSF is seriously concerned by the increased use of accelerated procedures for asylum seekers from "safe" countries of origin. Individual asylum seekers may be subjected to accelerated procedures if their application is considered manifestly unfounded or if the asylum seeker has arrived from a safe third country or country of origin. Worryingly, Afghanistan, Iraq and Somalia have recently been added to a list of countries considered "safe" by the Finnish Immigration Service.

Recommendations:

- Ensure the systematic identification of victims of torture and traumatised persons who seek asylum in Finland. This can be done by implementing the PROTECT TOOL and Questionnaire¹. This includes training all staff who work with asylum seekers, including in reception facilities, detention centres and throughout the asylum procedure.
- The Finnish State should launch a programme of action to effectively implement the Istanbul Protocol. This must include training on the Istanbul Protocol of all staff involved in the asylum procedure, including medical doctors, lawyers, judges, social workers and immigration officials.
- The Finnish State should ensure that immigration officials do not take a negative decision on a case where there are indications that the person may be a victim of torture, – based on the PROTECT questionnaire, for instance – where torture may be relevant to that person's asylum claim.
- Torture victims should systematically be excluded from the accelerated procedures.

¹ The PROTECT project is an identification tool initiated by experts providing rehabilitation services to torture victims. The tool consists of a questionnaire, designed to check for the signs and symptoms of the most common health problems encountered by asylum seekers who may have suffered traumatic experiences, mainly PTSD and depression. This screening checklist has been devised so that nonmedical personnel, such as immigration authorities, civil servants, border guards or other stakeholders accessing asylum-seekers can use in the early stages of the procedure. The checklist assists the identification of vulnerable persons who have suffered severe traumatic experiences or who are suffering from other severe psychological distress in order to provide them with: (i) adapted material reception conditions, (ii) appropriate physical and mental health care, and (iii) adequate support through their asylum application. As a second step, the asylum seeker should have access to a full psychiatric or psychological diagnosis, if necessary according to the Istanbul Protocol standards.