Situation of asylum seekers and beneficiaries of protection with mental health problems in Croatia

Summary of the Report published in December 2021

With the increased use of the so-called Balkan route, Dublin procedures with Croatia have become more relevant for other European countries, Switzerland included. The Swiss Federal Administrative Court (FAC), the highest instance in asylum cases, considers removals to Croatia to be generally admissible and reasonable, regardless the vulnerability of the concerned individuals. The Court as well as the national asylum authority – the State Secretariat for Migration (SEM) – are of the opinion that Croatia generally complies with its obligations under international law. However, very recent developments such as the ECtHR judgement *M.H and others v. Croatia* of November this year and the CPT report published on 3 December 2021 strongly suggest otherwise. The former confirmed the State’s responsibility over the deadly pushback and detention of an Afghan family, the latter showed a blatant lack of compliance with international law by the Croatian authorities. Together, they clearly point to the fact that the general assumption of Croatia acting according to international law has to be doubted.

Due to the mentioned indications of human rights violations, a closer examination is needed on a case-by-case basis as to whether refugee protection and human rights obligations are being complied with. This is especially important in cases of vulnerable persons. As a significant part of asylum seekers struggle with mental health issues, psychological treatment is essential. Therefore, the Swiss Refugee Council had a closer look on the situation for asylum seekers and beneficiaries of international protection regarding psychological treatment in Croatia.

Findings

This report found that access to psychological treatment in Croatia is difficult in practice, even for Croatian nationals. For persons not speaking the language, the chances of stable long term treatment are minimal. The gaps in health insurance and the lack of translation and treatment of mentally ill persons leave the mental health difficulties of many persons unaddressed and untreated. Translators are missing in all sectors connected with asylum and immigration in Croatia, in health care, but also in education and social care. There is a general lack of specific languages but also of female translators. This general shortage of translators leads as a consequence to an overburdening of those existing, as well as to the risk that the individual interpreter may have to play several different roles, thus undermining his or her impartiality as well as the trust of the asylum seeker in the system. The lack of meaningful and thorough treatment could interfere with the integration process. The effects of trauma and chronic stress on the mental health of refugees is underestimated and unacknowledged. Further, all support and treatment for persons with psychological problems are conducted by NGOs. The state funds some of their activities, but does not provide any support itself. This is cause for instability, as these NGOs and the continuity of their work depends on the funds provided.
Recommendations

Based on these finding, the Swiss Refugee Council advises against the transfer of persons in need of long term psychological or psychiatric treatment to Croatia. If it is likely that the state of health of the asylum seeker concerned is not expected to improve in the short term, or that the suspension of the procedure for a long period would risk worsening the condition of the person concerned, the requesting Member State should choose to conduct its own examination of that person's application by making use of the 'discretionary clause' in Article 17(1) of Regulation No 604/2013, or refrain from transferring a person with protection status under a bilateral readmission agreement. If a transfer is to be conducted nevertheless, the Swiss Refugee Council advises the state authorities to make sure with individual confirmations and guarantees that the Croatian authorities are aware of the specific need of the person and take the necessary precautions. This is particularly crucial to avoid that the person concerned may depend on a flawed system to be identified in the first place, risking not getting access to the necessary treatment.