

## EXECUTIVE SUMMARY

This report examines the treatment of foreign nationals before and during a national return flight from Munich to Kabul (Afghanistan) on 14 August 2018, coordinated by Frontex. This was the fifth removal operation by air monitored by the Committee. The CPT received excellent cooperation during the visit from the German authorities and its delegation was able to observe all stages of the operation, including the preparation at Eichstätt Prison (Centre for detention pending deportation) and at the airport, the in-flight phase, and the physical handover of the 46 returnees to the Afghan authorities.

During the removal operation, the CPT received no allegations of deliberate ill-treatment of returnees by escorting police officers; on the contrary, the operation was well prepared and carried out professionally. However, the CPT is critical about the apparent ill-treatment of one returnee that occurred on board the aircraft. It recommends that techniques which impede a person's capacity to breathe and/or inflict severe pain to gain compliance (i.e. squeezing a person's genitals) must not be applied by Federal Police escorts. Further, all police escorts should wear a visible identification tag during such operations and, in principle, undergo a debriefing session following the operation. The overall number of specifically trained escorts should also be increased.

The CPT emphasises that, in order to reduce the risk of a violation of the principle of non-*refoulement*, no person should be removed from Germany while legal proceedings that have suspensive effect are still pending before a court. To this end, it recommends that a "last call procedure" before handover of returnees to the authorities of the destination country be effectively implemented in practice. Relevant safeguards, including returnees' access to a lawyer from the outset of deprivation of liberty must be applied in practice. In this regard, the CPT has certain misgivings about the policy of the German authorities late or even last-minute notification of an imminent removal. The CPT also recommends that persons at risk of self-harm and/or suicide or with mental health problems undergo a comprehensive medical assessment before a conclusion is drawn on whether or not they are "fit to travel". Further, interpretation services should be made available throughout the removal operation, if required.

The existing complaints mechanism should be made accessible and effective in practice, including by providing adequate information to returnees on how to make a complaint, both orally and in writing, in a language they understand.

The report also looks into several issues related to the situation of returnees held in immigration detention in Eichstätt Prison (Centre for detention pending deportation). In particular, the Bavarian authorities should adapt (former) prison establishments to the specific needs of immigration detainees, both in terms of the material conditions and the regime, including an open-door regime and access to activities throughout the day. The CPT also reiterates that detention pending deportation should be governed by specific rules reflecting the particular status of immigration detainees.

As regards immigration detainees placed in a security cell, the CPT once again calls on the competent authorities to abolish the prohibition of outdoor exercise as a special security measure and recommends that these detainees be offered at least one hour of outdoor exercise per day. They should also be allowed to make phone calls and receive visits. Further, the privacy of detainees under video surveillance in these security cells should be guaranteed, e.g. by pixelating the image of the toilet area on the CCTV monitoring screens. In addition, more effective self-harm and suicide prevention measures for vulnerable detainees should be put in place, by increasing the availability of psycho-social support and enhancing contact with the outside world. Recommendations are also made *inter alia* on medical confidentiality and the independence of health-care staff, as well as on medical screening on admission.