

informed opinion on his diagnosis. In my opinion, if Dr Obuaya had access to his full records, as I have done, then he would have seen that he was reported to have attempted to hang himself at HMP Fetham in 2001, had panic attacks in 2010, reported attempting to jump off a bridge in July 2013 and had thoughts to hang himself on 1 April 2014 whilst at HMP Wormwood Scrubs. In my opinion, his past history of low mood, depressive symptoms and suicide attempts are not in keeping with an adjustment disorder and Dr Obuaya is more likely to have diagnosed recurrent depression rather than an adjustment disorder if he had access to the information that I have been able to review.

197. I completed the PHQ-9 Depression rating scale with him, on which he scored 21 out of a possible 27. This is a rating scale to help augment diagnosis. His score suggests that his depression is severe.

198. ICD-10 F43.1 Post Traumatic Stress Disorder

199. This is defined within ICD-10 as follows:

200. *“Post-traumatic stress disorder. This arises as a delayed and/ or protracted response to a stressful event or situation (either short – or long-lasting) of an exceptionally threatening or catastrophic nature, which is likely to cause pervasive distress in almost anyone (e.g natural or man-made disaster, combat, serious accident, witnessing the violent death of others, or being the victim of torture, terrorism, rape, or other crime)…”*

201. In my opinion, **D687** also suffers from Post-Traumatic Stress Disorder. This would be indicated by his past history of experiencing a number of highly traumatic events that would be likely to cause pervasive distress in almost anyone that has experienced them, in particular, his previous reports of experiencing trauma during his childhood whereby he was subjected to physical abuse by his family members who he now suspects were not his biological family and that he was taken from his real parents as a young child. He has reported being taken into foster care and that his foster mother was an alcoholic and also

abused him. He also alleges being verbally, racially and physically abused during his detention at Brook House IRC. Clinically, he presented as an individual suffering from severe symptoms of PTSD that have worsened since his recent imprisonment. He has memories of the trauma that he reports that keep entering his mind which he finds distressing. He has also experienced images popping into his mind of the trauma that he reports, consistent with flashbacks which are distressing and intrusive. He has also experienced bad dreams and nightmares which prevent him from sleeping and occur on a daily basis. [D687] has become jumpy and is easily startled by loud sounds or noises. He remains very tense. He has also become avoidant and does not like talking about the events that he reports and dislikes being reminded about his past traumatic experiences. He continues to have strong and distressing emotions related to the trauma that he reports, which he has not been able to resolve. He said that he fears being grabbed and kidnapped and that he often saw people shooting each other in Somalia. Although [D687] was experiencing symptoms of PTSD during his detention at Brook House, I would need to further examine his records before I could provide my opinion on whether he likely satisfied the diagnostic criteria for PTSD at that time. Given it is outside the scope of this report focusing on current capacity, I will not deal with it further here but am willing to do so in a further report, if required.

202. [D687] has also suffered from a range of anxiety-related symptoms including feeling anxious and worried all the time. He described feeling his heart racing at times and said that he feels anxious when speaking to other people. He has also suffered from shaking and sweating and shouts when distressed. He told me that he also experiences shortness of breath at times when feeling anxious and has had panic attacks.

203. **Please indicate the treatment he is currently receiving and any treatment or investigations which you would recommend. Please give your prognosis.**

204. In my opinion, [D687] requires ongoing treatment of his mental health problems in the UK. In my opinion, his depression needs to be treated in