**Upper Tribunal**
**(Immigration and Asylum Chamber)** **Appeal Number: PA/05672/2017**

**THE IMMIGRATION ACTS**

**Heard at Field House, London** **Decision & Reasons Promulgated**
**On 20 August 2019** **On 09 September 2019**

**Before**

**UPPER TRIBUNAL JUDGE PLIMMER**

**Between**

**LK**
(ANONYMITY DIRECTION MADE)

Appellant

**and**

**SECRETARY OF STATE FOR THE HOME DEPARTMENT**

Respondent

**Representation:**

For the appellant: Mr I Fraczyk, Counsel
For the respondent: Mr S Kotas, Senior Home Office Presenting Officer

**DECISION AND REASONS**

*Unless and until a Tribunal or court directs otherwise, the appellant is granted anonymity. No report of these proceedings shall directly or indirectly identify her or any member of her family. This direction applies both to the appellant and to the respondent. Failure to comply with this direction could lead to contempt of court proceedings.*

## Introduction

1. In a decision sent on 10 July 2019, I found that the decision of the First-tier Tribunal ('FTT') dismissing the appellant's appeal against a decision dated 23 May 2017 in which the Secretary of State for the Home Department ('SSHD') refused her claim for asylum and humanitarian protection, contains errors of

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law and should be remade in the Upper Tribunal ('UT'). I now re-make the decision.

2. The appellant is a citizen of Albania. She was the victim of sustained and serious domestic violence at the hands of her husband in northern Albania. The appellant claims she and her two children are at risk from her husband in her home area in the north of Albania, and cannot internally relocate to Tirana. For this reason, she left Albania with the assistance of a cousin and claimed asylum in the UK.

3. The appellant has been treated as a vulnerable witness throughout the UT proceedings. The FTT accepted that the appellant provided credible evidence, even though she did not give oral evidence. This must be considered in the context of the report before the FTT, prepared by a psychiatrist, Professor Katona dated 16 October 2017, which concluded that the appellant was likely to become significantly distressed in the adversarial setting of the Tribunal, without measures being implemented to address her vulnerability.

**Procedural history**

4. In my 'error of law' decision and the directions that followed this, I found that the FTT's positive credibility findings are preserved but the decision should be re-made regarding risk in home area, sufficiency of protection, internal relocation and the availability of a Convention Reason.

5. The re-making hearing before me has been regrettably delayed. The hearing listed for February 2019 was adjourned with the agreement of both parties, to enable the appellant to provide updated medical evidence.

6. Since that time the appellant's solicitors have filed updated medical evidence including GP records and a further psychiatric report from Professor Katona dated 23 May 2019 ('the 2019 Katona report'). This repeats his earlier opinion (see above) that the appellant should be treated as a vulnerable witness.

**Hearing**

7. At the beginning of the hearing before me Mr Kotas apologised for not providing a position statement in advance of the hearing, in breach of directions. However, Mr Kotas helpfully confirmed the SSHD's position as follows:

    (i) The observations and prognosis set out in the 2019 Katona report are accepted. Although the SSHD had subjected Dr Katona's 2017 report to sustained criticism before the FTT, there had since been an extensive analysis of the appellant's GP records, and in the circumstances the joint diagnosis of PTSD and major depression in the appellant is now accepted.

(ii) The SSHD accepts that the appellant is reasonably likely to be at risk from her husband in her home area. Mr Kotas therefore clarified that it follows that the only issue in dispute relates to the viability of internal relocation in terms of safety and reasonableness.

8. I asked Mr Kotas to clarify whether there was any dispute that the appellant is a member of a particular social group ('PSG'). He confirmed that although DM (Sufficiency of Protection-PSG-Domestic Violence) Albania CG [2004] UKIAT 59 is authority for the proposition that victims of domestic violence do not belong to a PSG in Albania, this decision is very dated. Mr Kotas accepted that this appellant is a member of a PSG, i.e. she is a woman who the SSHD accepts will not be protected by the state in her home area. I therefore need say no more about the Convention Reason in this case.

9. Both parties also agreed that there was no need to hear evidence from the appellant as her claim that she cannot safely or reasonably relocate to Tirana could be fairly determined on the documentary evidence available and by way of oral submissions.

10. Mr Kotas relied upon a helpful skeleton argument to support his submission that the appellant could relocate to Tirana where she and her children would be safely and adequately looked after in a shelter with government and NGO assistance. In support of this submission, Mr Kotas made extensive reference to the SSHD's Country Policy and Information Note on '*Albania: Domestic abuse and violence against women*' ('the 2018 CPIN') and BR (Tirana – gay men) Albania CG [2019] UKUT 93 (IAC). The latter does not address in any meaningful detail the likely circumstances for a woman in a shelter in Tirana but describes the general improvements in societal and state attitudes, that have resulted in tangible changes in Tirana. When I pointed out that the 2018 CPIN appears to conflict with the general guidance on the reasonableness of shelters for women with mental health concerns, as contained in the Country Policy and Information Note on '*Albania: people trafficking*' dated March 2019 ('the 2019 CPIN') and TD and AD (Trafficked women) CG [2016] UKUT 00092 (IAC), Mr Kotas invited me to find that the evidence before TD, vis a vis victims of domestic violence ('VDV'), as opposed to victims of trafficking ('VOT') had been updated and I should prefer the evidence and guidance to be found in the 2018 CPIN.

11. Mr Fraczyk relied upon his comprehensive skeleton argument to support the submission that the appellant's circumstances, in particular the serious mental health concerns as outlined by Dr Katona, are such that she could not safely or reasonably internally relocate.

12. At the end of the submissions, I reserved my decision, which I now provide with reasons.

**Legal framework**

13. There is no need to set out in detail the legal test to be applied when determining whether an asylum seeker should be expected to internally relocate. This has recently been summarised in the Court of Appeal in AS (Afghanistan) v SSHD [2019] EWCA Civ 873. The parties agreed that the accepted test is now straightforward and comprises two limbs, in the context of this case. Firstly, can the appellant safely relocate to Tirana, notwithstanding the SSHD's acceptance that she remains at risk of violence from her husband in her home area in northern Albania? In other words, is it reasonably likely that the appellant will suffer serious harm from her husband in Tirana, against which the state will be unable to provide sufficient protection? Second, would the appellant's living conditions in Tirana be unduly harsh? That is an assessment to be made taking account of all relevant circumstances pertaining to the appellant in the context of her likely living arrangements / circumstances and the support available to her in Tirana.

**Country background evidence and country guidance**

14. As noted above, and as accepted by the parties, the country guidance in DM, in relation to VDV in Albania, is very dated. It provides a background framework but the updated evidence is now summarised in the 2018 CPIN. TG provides country guidance for VOT from Albania. However, at [77] the Tribunal accepted that there may be many parallels between VOT and VDV, including the perception by many in Albanian society that there is prejudice and hostility to VDV and VOT on the basis that they are 'kurva' for having perceived to breach a code of 'honour'. Nonetheless, the guidance contained in the headnote of TG clearly applies only to VOT. For convenience I set out the relevant extracts from the headnote below (my emphasis underlined):

> *"d) In the past few years the Albanian government has made significant efforts to improve its response to trafficking. This includes widening the scope of legislation, publishing the Standard Operating Procedures, implementing an effective National Referral Mechanism, appointing a new Anti-trafficking Co-ordinator, and providing training to law enforcement officials. There is in general a Horvath-standard sufficiency of protection, but it will not be effective in every case. When considering whether or not there is a sufficiency of protection for a victim of trafficking her particular circumstances must be considered.*
>
> *e) There is now in place a reception and reintegration programme for victims of trafficking. Returning victims of trafficking are able to stay in a shelter on arrival, and in 'heavy cases' may be able to stay there for up to 2 years. During this initial period after return victims of trafficking are supported and protected. Unless the individual has particular vulnerabilities such as physical or mental health issues, this option cannot generally be said to be unreasonable; whether it is must be determined on a case by case basis.*
>
> *f) Once asked to leave the shelter a victim of trafficking can live on her own. In doing so she will face significant challenges including, but not limited to, stigma, isolation, financial hardship and uncertainty, a sense of physical insecurity and the*

> *subjective fear of being found either by their families or former traffickers. Some women will have the capacity to negotiate these challenges without undue hardship. There will however be victims of trafficking with characteristics, such as mental illness or psychological scarring, for whom living alone in these circumstances would not be reasonable. Whether a particular appellant falls into that category will call for a careful assessment of all the circumstances.*
>
> …
>
> *h) Trafficked women from Albania may well be members of a particular social group on that account alone. Whether they are at risk of persecution on account of such membership and whether they will be able to access sufficiency of protection from the authorities will depend upon their individual circumstances including but not limited to the following:*
>
> *1) The social status and economic standing of her family*
> *2) The level of education of the victim of trafficking or her family*
> *3) The victim of trafficking's state of health, particularly her mental health*
> *4) The presence of an illegitimate child*
> *5) The area of origin*
> *6) Age*
> *7) What support network will be available."*

15. BF provides country guidance on the position of gay men in Tirana but it is relevant to the instant case because it provides a summary of improvements made by the state to address negative attitudes toward vulnerable people. The Tribunal also found Antonia Young's evidence, in her capacity as a country expert, to be unreliable. The report dated 9 June 2015 that Ms Young has prepared in this case must be considered in this light, albeit in any event little reliance was placed upon it. Apart from the 2018 CPIN, the country background evidence relevant to VDV available to me is sparse and of considerable vintage. This is limited to a 2013 UNDP report and a special report dating back to 2012. Neither party took me to these reports.

**Re-making the decision**

16. In re-making the decision I have considered all the evidence available to me, including the appellant's witness statements (the most up to date one is dated 31 May 2019, the medical evidence, the country background evidence including that contained in the CG cases and the CPINs.

17. The appellant's account has been accepted as well as the risk of persecution she faces in her home area for reasons related to being a woman. In accordance with the agreement of the parties I have therefore focussed upon internal relocation to Tirana. I now address the evidence available regarding the two limbs of safety and reasonableness.

*Safety in Tirana*

18. Mr Frazyk submitted that a combination of factors render it reasonably likely that the appellant's husband will be willing and able to pursue the appellant and seriously harm her in Tirana: her husband was severely violent toward the appellant for a prolonged period of time from 2007 to 2013, when the appellant fled Albania for this reason; domestic violence and adverse attitudes to women who flee from their husbands, particularly in rural northern Albania support the claim that the husband is reasonably likely to harbour resentment toward the appellant and would wish to track her down; the husband's contacts within the police force mean that he is reasonably likely to be able to do so.

19. The appellant fled from her husband some six years ago and there has been no contact between them since. The appellant has now been separated from her husband for a longer period than they were married. There is no cogent evidence that the husband has tried to or currently wishes to track down the appellant for retribution or any other reason. I appreciate that it would be practically difficult for the appellant to demonstrate evidence of such attempts. Nonetheless, given the passage of time and the complete lack of contact, I do not accept that the appellant's fears that her husband will have the will or motivation to seek her out to be reasonably likely. In so finding I note that the appellant comes from a farming community, where there was little education. Although the husband clearly has an entrenched repugnant attitude toward his wife, in the particular circumstances of this case, it is not reasonably likely that he will pro-actively seek her out or find her, outside of their home area.

20. The appellant's evidence has been accepted. I therefore accept her evidence that she believes that her husband has contacts in the police. However, this evidence is vague. The contacts are not close family members. The appellant did not even know if the contacts were in fact policemen (see Q 224 of the asylum interview). There will be little incentive for non-family contacts seeking to corruptly use the registration system to locate the appellant. Given the husband's background, he is unlikely to have the financial resources to support any substantial bribery. I note from the 2018 CPIN at [8.73-4] that not all officers have access to the civil registration system and those that do would leave an electronic trace, and this may result in substantial punishment. I also note the evidence, as accepted in BF that the evidence of an individual being 'traced' in this manner is "*very limited*".

21. Having applied the lower standard of proof, and having cumulative regard to all the factors relied upon by Mr Fraczyk in the context of the country background evidence, I do not consider it reasonably likely that the husband will be willing or able to track the appellant down in Tirana.

22. In any event, the protection available to the appellant in Tirana will be very different to that available to her in her rural home area. In all the circumstances of her case, the protection available in Tirana is reasonably likely to be sufficient. The appellant will be accommodated in a shelter with her two children. They are

currently aged 16 and 7. The elder child will turn 18 in December 2020, and according to the fact finding report in the 2018 CPIN can remain at the shelter with his mother until then – see 6.2.4. The 2018 CPIN also goes into detail about the availability of security provided by the two VDV shelters in Tirana, as well as the state's willingness and ability to provide protection in Tirana. The appellant can also obtain a Protection Order from her husband.

23. Having considered and evaluated the documentary evidence relied on by both parties and applying the test in Horvath v SSHD [2001] 1 AC 489, in respect of the availability of a sufficiency of protection, and in the context of the country guidance, I find that, although a sufficiency of protection is not available for this particular appellant in her home area, she will be able to access sufficient protection in Tirana.

24. I now draw together the findings set out above. The appellant has no family members in Tirana and they have no firm contacts or links to Tirana. It is not reasonably likely that her own family members or husband will be intent on tracking her down in Tirana. The situation is quite different from the appellant returning to her home area wherein the husband's perceived shame in having the appellant in the area, may lead to 'honour' based violence. I do not accept that the appellant is reasonably likely to be at risk in Tirana. In any event, the appellant will be able to access the protection of a shelter and the authorities there for the reasons I have set out above. Although the appellant has been subjected to past persecution, there are good reasons to consider that such persecution will not be repeated.

*Reasonableness of internal relocation to Tirana*

25. I must now consider whether it would be unreasonable or unduly harsh to expect this appellant to avail herself of the internal relocation alternative in Tirana. Such an assessment must be holistic and take into account the appellant's particular characteristics. The appellant will be returning to Tirana as a single mother with two dependent children and no resources of her own. Her limited education and mental health concerns make it most unlikely that she will be able to obtain employment.

26. Notwithstanding the appellant's personal circumstances, Mr Fraczyk did not dispute that she would be able to access adequate accommodation, general support and education in a shelter in Tirana. Mr Fraczyk focussed his submission that the appellant's circumstances would be unduly harsh, on her mental health presentation. I now turn to this.

27. Professor Katona, who is extremely experienced, being a Fellow of the Royal College of Psychiatrists, Professor of Psychiatry at the University of Kent and part-time Medical Director of the Helen Bamber Foundation, met with the appellant on two occasions in 2017 and 2019. His most recent detailed assessment of her psychological and psychiatric state (after seeing her on 22 May 2019) has been

accepted by the SSHD. The 2019 Katona report must also be seen in the context of this being an appellant who has been accepted to be entirely credible, which of course is supported by [7.2] wherein Professor Katona repeated his opinion that the appellant was not feigning any of her symptoms.

28. When the GP records are read together with Professor Katona's reports the following emerges: the appellant has credibly attributed the stress, worry, discomfort, insomnia, stress headaches, anxiety, low and negative mood, intrusion phenomena (intrusive thoughts, nightmares and flashbacks) and avoidance-related behaviour she has experienced for many years, to her husband's violence toward her in Albania. It is important to recall that the violence was intense and prolonged over a number of years. It resulted in miscarriages, as well as physical and emotional scarring. The GP records from Feb 2014 to date are consistent with this summary. Professor Katona has explained in some detail why the appellant's clinical features support both the diagnosis of PTSD and Major Depressive Disorder, before concluding at [6.5] that these have resulted from the domestic abuse she suffered at the hands of her husband. In so finding, Professor Katona expressly took into account the possibility that other factors (such as separation from her parents and country, lack of support as a single parent and ongoing / prolonged immigration uncertainty) may have caused the mental health problems. He however concluded that these do not provide a clinically adequate explanation for her core PTSD symptoms such as intrusive thoughts and nightmares, albeit he acknowledged at [9.5] that they probably aggravated her overall distress and contributed to her major depression.

29. Professor Katona went on to address the possible effect on the appellant's mental health if returned to Tirana. He highlighted the nature and extent of the appellant's fear that her husband would find her in Tirana. I have already found that this fear is not well-founded. Professor Katona has also noted that the appellant would not be able to support herself given her mental state and might in turn lead to her and the children being without basic accommodation and support. Professor Katona did not have the benefit of the evidence, accepted by Mr Fraczyk, that the appellant and her children would be provided with basic support needs in a shelter in Tirana. Nonetheless, I entirely accept Professor Katona's opinion at [9.6] that if the appellant "*perceives herself to be in a situation of threat or danger then her PTSD and associated depressive symptoms are likely to worsen*" and [10.3] that:

> "Ms [K]'s fear of the consequences of return to Albania is genuine, whether or not it is objectively well-founded. Any threat of forced return to Albania (and consequent constant sense of threat and danger) would be likely to result in significant deterioration in her already severe PTSD symptoms and her now full-blown major depression. This would in turn cause her very considerable mental suffering."

30. I also accept Professor Katona's opinion at [10.5] that given the co-existence of PTSD and major depression, and notwithstanding that suicide risk remains currently low and her children represent a powerful protective factor, there is a

"*very significant risk*" that in response to a forced return to Albania and once back in Albania she would become "*actively suicidal*".

31. Mr Kotas submitted that the appellant would be able to obtain appropriate mental health treatment in a shelter. This is because the 2018 CPIN, quoting from a Home Office Fact Finding Mission dated February 2018, states that when placed in a shelter for VDV, the appellant will be subject to a mental health assessment and provided with the appropriate treatment in response to this.

32. Having considered all the country background evidence available, in particular the 2018 CPIN and the clear and cogent medical evidence from Professor Katona, I am satisfied that the appellant's mental health is likely to significantly deteriorate during the removal process and / or when placed at a shelter in Tirana. This is likely notwithstanding the protective factor provided by her children and any additional measures to support her during the removal process and on arrival in Tirana at the shelter. This is because she has a genuinely (but not well-founded) entrenched and enduring fear for her safety in Albania, which will exacerbate her already serious mental health problems, which are of an 'inter-personal' nature, have existed for a prolonged period of time and have not responded to anti-depressant medication in the UK.

33. In reaching this finding I have carefully considered the likely availability of support and mental health treatment at the shelter in Tirana and note the following:

    (i) There are two shelters specifically for VDV in Tirana: the national reception centre for VDV and an NGO shelter – 6.1.2 of the 2018 CPIN;
    (ii) According to a 2017 Ombudsman report, the national reception centre for VDV does not have a psychologist and this is provided by the other centre for VOT – see 6.2.1 of the 2018 CPIN;
    (iii) The 'D and E' NGO shelter is open to all women including VDV and VOT. This contains a psychologist and typically the first 3-6 months involves crisis intervention – see 6.3.1 and 7.1.1 of the 2018 CPIN;
    (iv) On arrival at a shelter every person is subject to a mental health assessment and a report is produced. Depending on the level of treatment required and severity, it can be dealt with in the shelter or the person can be sent to a specific centre – see 7.3.2 of the 2018 CPIN;
    (v) The 'specific centre' referred to above is not explained but appears to refer to either a psychiatric hospital or a community based clinic as set out in the preceding 7.3.1. This describes a ratio of 1.5 psychiatrists per 100,000. With a population of approximately three million, this amounts to approximately 45 psychiatrists. In addition, the D and E commented that the community centres and religious organisations that deal with mental health "*are always full*" and "*there are few chances for long term support for really serious cases*". Reference is also made to nine mental health community day centres around the country but no

details are provided as to the extent they would be able to support a person resident in a shelter.

(vi) Reference is made at 7.3.2 to "*normally, the shelters are equipped with a psychiatrist*". No source is provided for this statement. It was made at a meeting with NRCVHT, NRCVDV and the Albanian social services.

34. Having considered all the evidence available holistically, I am not satisfied that the shelters are "equipped" with a psychiatrist. That statement is unsourced and unparticularised. It is inconsistent with the evidence emanating from the NRCVDV that the range of support extends to a psychologist and not a psychiatrist – see 6.3.1 and 7.3.3 of the 2018 CPIN. Indeed, the evidence relevant to mental health provision at the two centres for VDV in Tirana, as summarised in the 2018 CPIN is open to question. The 2017 Ombudsman report is quoted as stating that one of the two VDV centres, the NRCVDV, did not have a psychologist at the time and they had to depend on a psychologist being provided by the centre for the VOT. The evidence relevant to mental health provision in the shelters for VOT was considered in some detail in TD as follows:

> "100. As to healthcare the UNP report states that women receive "medical examinations and treatment" and that the costs of hospital visits are covered. Women are also provided with "psycho-social counselling". In contrast the TIP report - covering the same period - records that the mental health services in the Linza shelter are "inadequate", that medical staff need training and that the funds allocated to pay for VOTs medical expenses were never in fact released, resulting in VOTs having to pay their own bills. It is not explained in what way the provision that does exist is "inadequate". When we asked Professor Haxhiymeri about this she drew a distinction between "psycho-social counselling" and actual mental health therapy. She explained that the workers in the shelters are not medically qualified and are only trained to deliver basic counselling. The treatment referred to in, for instance the UNP report, is confined to the dispensing of medication. Her conclusion is that whilst free mental health care is available in the shelters, the quality is very low. In giving this evidence Professor Haxhiymeri again drew on her own experience but we note that she has actually visited at least two of these shelters herself and that her evidence accords with the information provided in the TIP report.
>
> 101. Taking all of the evidence in the round we are satisfied that there is a basic level of healthcare provided in the shelters, but that there must remain concerns about the quality and extent of it, particularly in relation to mental health treatment. On the evidence before us, such care is limited to the prescription of anti-depressants and where available, counselling by shelter staff who have no formal training in psychiatry or psychology."

35. I note that this assessment, and the guidance based upon it I have summarised in TD's headnote above, was based upon evidence available to the Tribunal as at a hearing date in June 2015. However, the SSHD has very recently endorsed the headnote relevant to mental health provision in VOT shelters within the 2019 CPIN – see 2.4.3 to 4. It is with this guidance in mind, that I invited Mr Kotas to take me to evidence that those VDV with serious mental health concerns, such as the

appellant, would be able to cope with life in a shelter and would be able to obtain the required treatment to be able to live a relatively normal life with her children. Mr Kotas submitted that the facilities and support, including psychiatric support, available in shelters had clearly improved since the date of the hearing in TD in 2015, some four years ago. Apart from the references in the 2018 CPIN, he was unable to take me to any other evidence to support that proposition. Whilst I accept that the trend has been toward more funding and greater facilities in shelters, the specific evidence regarding the psychological and psychiatric support available in shelters for both VOT and VDV is unclear. I was not taken to or provided with a copy of the fact finding mission referred to in the 2018 CPIN. There was no up to date country expert report or human rights report provided to me. Both representatives made it clear that given the delays involved in this case and the likelihood that another adjournment would not lead to any clear evidence on the point, that they did not wish for the case to be adjourned again. Notwithstanding the limited nature of the evidence available and the inconsistencies within it, I decided at the hearing that I could fairly determine the matter without an adjournment.

36. The medical evidence in support of the appellant's current mental health and likely deterioration upon removal to Tirana is clear and cogent. The appellant has had six years in the UK to build her resilience in the aftermath of a very distressing, traumatic and prolonged period of domestic violence when in Albania. The evidence available demonstrates that even with support, she has found it very difficult to cope with even day to day activities. That is the position notwithstanding the relative stability (save for her immigration status) and security life in the UK presents for her. The appellant has an enduring and entrenched fear that she will be harmed in Albania. She will also have to cope with the inevitable stigma of being a single mother in Albania. Her mental health will deteriorate and cause her, according to Professor Katona: "*very considerable mental suffering*" with a "*significant risk*" of becoming "*actively suicidal*". I note that the appellant has not put her case on the basis of Article 3 of the ECHR. I rather assess her likely mental health as part of a holistic analysis of her circumstances in Tirana for the purposes of the reasonableness of internal relocation. For these reasons it is unnecessary to explore in any detail the principles established in J v SSHD [2005] EWCA 629, although I bear those principles in mind, particularly in the light of my finding that the appellant's fears that she will be at risk from her husband in Tirana are not well-founded.

37. It is reasonably likely that shortly after her arrival at a shelter in Tirana, the appellant will be subject to a mental health assessment and her needs will be identified as being serious and significant. Professor Katona has already highlighted at [9.2-9.3] that anti-depressants have been unsuccessful and she is unlikely to respond to the standard trauma course but will "*require more individually tailored therapy which requires the slow building up of trust and needs to continue for considerably longer*". Professor Katona has also emphasised at [9.6] that any such treatment must be in a setting the appellant perceives to be safe.

38. In my judgment, there is cogent evidence to support the conclusion that the appellant's already serious PTSD and associated depressive symptoms are likely to worsen upon removal to Tirana. This will have a detrimental effect on her ability to parent her children and respond to any treatment that may be available in the short to medium term. Given the severity of the appellant's likely mental health concerns, such treatment is unlikely to be available in the shelter and there is the additional risk that she may be separated from her family to receive treatment elsewhere.

39. I am satisfied that notwithstanding all the evidence contained in the SSHD's 2018 CPIN, this particular appellant's mental health concerns are such that, when viewed as part of her overall circumstances, internal relocation to a shelter in Tirana will be unreasonable or unduly harsh.

**Decision**

40. I remake the decision by allowing the appellant's appeal on asylum and humanitarian protection grounds.

Signed: *UTJ Plimmer*
Ms Melanie Plimmer Dated: 22 August 2019
Judge of the Upper Tribunal