



**Upper Tribunal  
(Immigration and Asylum Chamber)      Appeal Number: PA/06344/2018**

**THE IMMIGRATION ACTS**

**Heard at Field House  
On Monday 20<sup>th</sup> September 2021**

**Decision & Reasons Promulgated  
On Tuesday 09<sup>th</sup> November 2021**

**Before**

**UPPER TRIBUNAL JUDGE FRANCES**

**Between**

**G R C  
(ANONYMITY DIRECTION MADE)**

Appellant

**and**

**THE SECRETARY OF STATE FOR THE HOME DEPARTMENT**

Respondent

**Representation:**

For the Appellant: Ms E Umoh, Duncan Lewis & Co Solicitors

For the Respondent: Mr S Whitwell, Home Office Presenting Officer

**DECISION AND REASONS**

1. The Appellant is a citizen of Bangladesh born in 1984. His appeal against deportation was allowed by First-tier Tribunal Judge Iqbal on 13 March 2018 on Article 8 grounds. This decision was set aside by Upper Tribunal Judge O'Connor on 10 July 2019 and the appeal came before me for re-hearing on the issue of whether the effect of the Appellant's deportation on his wife and/or children would be unduly harsh: Section 117C(5) Nationality, Immigration and Asylum Act 2002.
2. The Appellant came to the UK in 2003 as a student. He married a British citizen, F, in November 2008 and was granted leave to remain as a

spouse. On 19 August 2011, he applied for indefinite leave to remain. On 13 January 2012, he was convicted of nine offences of fraud by abuse of position. He was sentenced to three years and six months imprisonment. A deportation order was signed in May 2013 and his application for indefinite leave to remain was refused. His appeal against these decisions was dismissed in September 2013 and he became appeal rights exhausted in November 2013.

3. The Appellant's son, Z, was born in May 2015. On 4 December 2015, the Appellant was sentenced to 640 days imprisonment for default payment on a confiscation order made on 19 February 2015. The Appellant claimed asylum in May 2016. His daughter, M, was born in May 2017. His asylum and human rights claims were refused in May 2018 and the decision to deport him was maintained.
4. The Appellant's protection claim was dismissed by the First-tier Tribunal. The judge did not accept the Appellant would be at risk in Bangladesh because of his criminal activity in the UK. The following findings of the First-tier Tribunal were preserved:
  - (i) The Appellant would not be at risk of persecution, serious harm or treatment in breach of Articles 2 or 3 on return to Bangladesh;
  - (ii) The Appellant's claim that his family had disowned him was not credible.
5. The decision allowing the appeal on Article 8 grounds was set aside by the Upper Tribunal because the judge erred in law in taking the children's circumstances cumulatively. There has been a delay in re-hearing this appeal because of the difficulties caused by the global pandemic.
6. At the start of the hearing, I confirmed the documentary evidence relied on in the Appellant's bundle and supplementary bundle, in particular the expert evidence of Dr Halari, Dr Hoque and Dr Tizzard. There was significant evidence from West Sussex County Council and Z's school concerning Z's special educational needs associated with autistic spectrum condition [ASC] and speech and language delay [SLD]. Ms Umoh submitted an amendment notice, dated 11 June 2020, to Z's Education, Health and Care Plan [EHCP] and his school reports dated July 2021 and July 2020. I am grateful to Ms Umoh and Mr Whitwell for their skeleton arguments in which they highlight the relevant evidence to support their submissions.

### **Oral evidence**

7. The Appellant gave evidence relying on his statements dated 24 October 2018, 22 January 2020 and 16 July 2020 as evidence-in-chief. In response to questions from Ms Umoh, the Appellant stated he had a brother who had lived in the UK since 2009 in the Manchester/Oldham area. His sister was married and lived in Sylhet, Bangladesh. His father lived in the family

home in Bangladesh. The Appellant's last contact with him was in 2015 before the confiscation hearing. His father was upset because his wife's uncle had lodged a case against his father. The Appellant's mother died while he was in prison. His mother and father had relatives in Bangladesh, but he could not seek support from them because of his criminality. There was one family friend, H, who had supported him in the past, but H had his own family to support.

8. The Appellant's greatest fear was not being able to see his kids. He could not take them back to Bangladesh due to the situation. His family was broken. It was his punishment for what he had done. He did not want his wife to be without a husband or his children to be without a father. If he returned to Bangladesh he would land in Dhaka, but he did not know where to go from there.
9. The Appellant stated he still suffered from depression and anxiety but he was no longer taking medication. He was receiving counselling. He described a typical day for him and his family explaining the difficulties in getting Z ready for school. Z refuses to go to school with his sister M so the Appellant takes Z and his wife takes M separately. The evening can also be fractious and the Appellant would often have to sleep with Z until he settled. The Appellant described the strong emotional bond between him and Z and the difficulty managing Z's anger and frustration. The Appellant stated that Z cannot cope with change and a move to Bangladesh would have a huge impact on him. The Appellant left Bangladesh when he was 19 years old. His wife had never been there. The heat, noise and weather would destroy Z and he would not be able to cope.
10. Z was in a special needs class at school and had one-to-one support. He was doing very well with all the support he received and had continued going to school during the pandemic. It was very hard for Z to return after school holidays. The Appellant did not have specialist training but his wife had done a course and his course was delayed because of the pandemic. The Appellant was there for his son '24 hours a day'. They were unable to plan anything as a family because Z was stressed every day by his condition. If the Appellant returned to Bangladesh without Z it would have a huge impact on Z's mental health. The Appellant stated he was young when he did the wrong thing and his wife and children had not done anything wrong. He is rehabilitated. He had not made a single mistake since 2010 and had been signing on with Immigration Services. He had not done anything wrong because of his son.
11. The Appellant stated his wife could not cope with the children without him. F gets tired because of low blood sugar and she suffers from depression. On some days she cannot get out of bed and it is very hard for her. The Appellant could look after both children and he was there for her. There would be no one to support his wife if he left because her family had disowned her.

12. Mr Whitwell accepted the Appellant was the primary carer of his children. In cross-examination the Appellant stated there was no way his wife and children would go to Bangladesh. He did not think the support from his wife's family in the UK would return if he left. The Appellant and his family had relocated to a different area since his offences. They now lived in an area with a small Bangladeshi community. He did not know when his wife last spoke to her brother. He did not think they had spoken since her brother said he was unable to come to court to give evidence in February 2020. Z received disability allowance, but there was no support with parenting. He would not ask family members for support because of the stigma attached to his criminality. His sister in Bangladesh would not want him in her house and he was ashamed of what he had done and would not turn up on her doorstep.
13. The Appellant's wife, F, gave evidence relying on her statements dated 24 October 2018, 22 January 2020 and 15 July 2020 as evidence-in-chief. She confirmed she had medication for diabetes, thyroid and cholesterol. She suffered from anxiety and extreme fatigue. F stated she was receiving telephone counselling. She could not do face-to-face because of the pandemic.
14. F stated that Z is autistic and really struggles with change. The course of the day depended on Z and Z would ask for his dad if he refused to go to school or put on his uniform. His sister M was at the same school, but Z refused to walk to school with her. He wanted his dad to take him to school and therefore they had to go separately. Z was better at school when he saw his teacher. Z wanted his dad to pick him up and he would tantrum at the gate if his dad was unable to do so.
15. F stated she worked part-time to help with picking up from school. She stated that, at home, Z was very particular with food and having a routine. Home life was very heavily orientated around Z because of his condition. When she is really poorly, the Appellant has to take care of the kids. Z wants daddy and F has to step back. If Z wants something a certain way, he has to have it that way.
16. F was not aware of any family in Bangladesh and she had not met her husband's family. She could not go to Bangladesh because she was too poorly and because of the effect on Z. The Appellant was a strong part of Z's life and the only person who could calm him down. She could not cope without the Appellant and relied on him heavily. She stated, "Covid made me realise how much." There were incidents when they ran out of milk and F had to calm Z down while the Appellant went out. It was a two person job in most cases with Z.
17. F was not reconciled with her family and it was very difficult. Her brother would help through conversations on the telephone but he was busy with his kids. She stated it was good to have someone to talk to on the telephone. The situation with her family would not improve if the Appellant

left because they would never forgive her for staying with her husband. She would be completely on her own.

18. In cross-examination, F stated she spoke to her brother a couple of weeks ago. He called her mobile. When asked about the relationship with her brother and husband, she stated the Appellant was worried for his safety and did not want to create problems for her brother so they kept separate. The Appellant did not speak to her brother, but he knew her brother was not in touch as much as he used to be. The Appellant knew her brother called her sometimes, but he did not ask if she had spoken to him. When asked how frequently her brother called, she replied, "Not as frequent since last statement. It was difficult to put a time on it. I do not know how many times." F stated that if the Appellant was given leave to remain he would have to work. He could not be a stay at home dad. She did not know when her husband last spoke to his father or sister and she did not think he was in contact with them.

### **Respondent's submissions**

19. Mr Whitwell relied on the refusal letter and his skeleton argument dated 24 September 2020. He referred to [44] of the First-tier Tribunal decision in which the judge found that the Appellant had embellished his claim and submitted the evidence from the Appellant and his wife that they had no contact with family members was not credible. The evidence about contact with F's brother was, at its best, vague and, at its worst, inconsistent. F's brother had more frequent contact than the case put forward by the Appellant. The same could be said for contact with family in Bangladesh. The Appellant stated he had not asked for support because he was not in contact. He was not saying there was no support. The Appellant would not ask his sister for help. The Appellant had failed to show he had no support in Bangladesh.
20. Mr Whitwell submitted that following HA (Iraq) v SSHD [2020] EWCA Civ 1176, there had to be an individualised assessment of whether it would be unduly harsh and there was strong emphasis that it had to be more than undesirability. Z's diagnosis of ASC, in itself, was not enough. Mr Whitwell accepted that life was hard raising an autistic child and that it was desirable to have two parents rather than one. However, in this case, it would not be unduly harsh to separate the family and there was nothing preventing return to Bangladesh as a family unit. Z's best interests and the support he receives in the UK did not mean it would be unduly harsh for him to go to Bangladesh with his family. Mr Whitwell submitted that, on the oral evidence, separating the family unit was considered to be the lesser of two evils. F could obtain help from social services and her relationship with her family may improve without the Appellant. He relied on his skeleton argument in relation to the weight to be attached to the expert evidence.

## **Appellant's submissions**

21. Ms Umoh relied on HA (Iraq) at [34, 35, 42, **44**, 51-56, 82-84 and 151-162] and submitted the unduly harsh threshold had been redefined. The focus was on the children not the parent and emotional factors were also relevant.
22. Ms Umoh submitted that credibility was not an issue in this case. The expert evidence demonstrated that, in Bangladesh, research into autism was still at the development stage. It was not in Z's best interests to leave the UK and it would be unduly harsh for him to live in Bangladesh where he could not access support for his condition. Even if family support was available to the Appellant, the family members had their own responsibilities and it was unfair to place the burden on extended family members with whom there had been limited contact. Bangladesh was one of the poorest countries in the world. The Appellant did not know if he had accommodation or if he would be taken in. He could not approach his family for assistance and would not have the required support.
23. The family unit was such that both parents would not be able to work full time and therefore they would not be able to cope financially. British citizen children should not be expected to live in Bangladesh. Even given time to settle, they had never been to Bangladesh and the changes would trigger Z. The effect to relocation to Bangladesh would be unduly harsh. F's medical condition and lack of financial resources would mean the transition would be unduly harsh for the Appellant's wife and children. There was ample evidence of Z's needs, his routine and support from different specialists. There was nothing remotely close to this in Bangladesh and, even with family support, treatment was not available for Z.
24. Ms Umoh submitted that the Appellant was the primary carer and if removed his wife simply could not cope. They were a close knit family and Z was emotionally dependant on his father. To separate Z from his father could have devastating effects. This position was supported by Dr Halari. Z was used to the support he is getting and his father being there. It would be unduly harsh to take his father away. F could not look after the two children without the Appellant and the medical evidence supported this submission. The Appellant knew Z's routine and how to calm him down. The expert evidence demonstrated that social services could not substitute the Appellant's role.
25. The Appellant was a medium offender and had committed his first and only offence. There were no further offences and the Appellant had fully complied with reporting conditions. The Appellant accepted he had done wrong. The best interests of the Appellant's children outweighed the public interest in this case. In Bangladesh, Z could not get support remotely close to that in the UK and such a devastating situation would be unduly harsh.

## **Expert evidence**

26. In his report dated 21 September 2020, Dr Hoque is of the opinion that medical treatment is restricted to those in a financial position to afford it and those who live within close proximity to relevant health centres and health professionals, overwhelmingly placed in Dhaka [24]. British citizens residing in Bangladesh are only eligible for emergency healthcare and can only access private treatment.
27. Medical treatment for children with autism in Bangladesh is well below the provisions available in the UK, both in terms of access and quality of care. Available treatment is not tailored to the specific needs of children, but included within a general catchment of autism sufferers. There is 'hardly any' quality institute developed exclusively for autistic children and the situation is aggravated by the lack of any proper training centre to train those working with children. [29 and 30]
28. Since 2008, the current government has engaged in a concerted and very public effort to promote awareness of ASC and SLD, particularly in rural areas. In 2010, the Centre for Neurodevelopment and Autism in Children was inaugurated and ten child development centres (SBK) were developed in medical colleges and centres in various parts of the country. There are 73 disability service centres with a special 'autism corner'. The government has also been quite active in reducing social stigma related to autism and disabilities including awareness at primary and secondary school level. Children with autism get 20 minutes extra time in public examinations and there are 2% of reserved seats for admissions to private schools. There is one SBK facility in Sylhet served by some leading experts on autism and all services are free of charge. The country's leading centre for the study of autism is in Dhaka. Members of the faculty are the most pre-eminent experts on neurodevelopment disorders and treatment is free of charge [31 to 33].
29. After considering Dr Halari's report, Dr Hoque concluded, "To my knowledge, this level of support/treatment is not available in Bangladesh since autism treatment is still in its developmental stage" [35]. The objective medical evidence provided in the report supports Dr Halari's opinion that the level of care required by Z is not available in Bangladesh [38].
30. Diabetes and hyperthyroidism are common in Bangladesh and there is widespread treatment for it, although it could be quite expensive [43 to 45]. The family may suffer harassment and ostracism as suffers of autism and depression [51].
31. In the clinical psychology report dated 9 December 2019, Dr Halari states that Z struggles with transition, change in routine, moving away from his own agenda, and he exhibits repetitive patterns of play, echolalia with speech and language delay. He also has unusual mannerisms and sensory interests. He has difficulty with social interaction, social communication

and repetitive and rigid behaviours. He will need support to build relationships with others to interact and use language socially. Z requires highly specialised speech and language support from a specialist nursing team for social communication. He likes routine and finds it difficult to change tasks. He can become overwhelmed in busy situations and can often experience melt downs caused by change and transitions. He does not like loud noises.

32. F told Dr Halari that Z does not like M to touch his things and he hit M with the remote control. Often both parents have to separate the two children and take them to separate rooms. Z will not sleep without his father and has major tantrums when the Appellant reports at the police station for immigration purposes. Z's behaviour is highly unpredictable.
33. At [7.4.7], Dr Halari states Z will not be able to cope with a busy environment, lots of noise, change and unpredictability. He will not be able to articulate his distress and instead it will present challenging behaviours which will be difficult to manage. His parents rely on each other and work together.
34. Dr Halari states at [7.4.9] that Bangladesh is working towards the care given to children with autism and is still in the early stages. Bangladesh does not factor in provision of care for children with significant disability associated with ASC and SLD. She states Z would require intensive support from an occupational therapist, educational psychologist, paediatrician and in the future he may require the support of a child and adolescent psychiatrist. In addition, he would require the support of specialist teachers with extensive knowledge of working with children and adolescents with ASC [7.2.2].
35. Dr Halari is of the opinion that Z cannot cope without his father which would disrupting the secure bond and positive progress Z has made. It would be detrimental to his social, emotional, educational and behavioural progress and development in the short, medium and long term future. F cannot cope on her own.
36. In the clinical addendum report, dated 13 January 2020, Dr Halari states that Z presented as very attached to his father and wanting his father's attention. It was evident that Z and the Appellant had a strong bond and attachment to each other. The nature and quality of their relationship has been influenced by the Appellant playing an instrumental role in Z's life. The Appellant provides Z with emotional and practical consistency, positive parenting and structure. He has a good understating of Z's ASC and social, education and development needs.
37. Dr Halari was not aware of the kind of support available for children with ASC and deferred to a country expert. She stated Z's inability to speak Bengali would be a significant obstacle for him in accessing any kind of support in Bangladesh. In her clinical and professional opinion, it would not be in Z's best interests to live in Bangladesh with his family.



38. Dr Christine Tizzard undertook a psychological assessment of the family and in her report dated 30 December 2018 she came to the following conclusions:
- a) The Appellant is suffering from depression,
  - b) F will require ongoing medical treatment to manage her diabetes and hyperthyroidism and a lasting side effect is a very high fatigue level that detrimentally impacts on her ability to carry out activities of daily living. F's anxiety has the added impact of worsening her physical conditions.
  - c) Both children present with a high level of physical and emotional need. They will require intervention and support from professional services throughout their minority.
  - d) The family require a high level of ongoing support and the Appellant plays a significant part in family function.
  - e) There are genuine concerns in respect of F's physical and emotional well-being if the Appellant was not able to take an active part in the family dynamic. This factor has a risk of severe repercussions for the children.
  - f) A breakup of the family unit should be avoided at all costs. If separated from their father, both children will experience severe psychological loss. Without his support it is unlikely the family could continue to function.

### **Findings of Fact**

39. In coming to the following findings of fact I have taken into account all the evidence before me and considered it in the round. I note that since Dr Tizzard's report, M's heart condition has been treated and she no longer requires medical intervention. I attach little weight to Dr Halari's evidence of treatment for autism in Bangladesh. She accepts that a country expert is better placed to give evidence on this matter. I attach little weight to Dr Hoque's opinion of how Z would cope in Bangladesh given that he is not a medical expert. I attach little weight to the opinion on risk on return at [62] onwards of Dr Hoque's report and 7.8, 7.9 and 7.12 of Dr Halari's report given the preserved findings of the First-tier Tribunal.
40. There was little dispute on the facts save in relation to family support. There may well have been an attempt by the Appellant and his wife to overstate the lack of support but that does not undermine the remainder of their evidence. I find on the totality of the evidence that the Appellant would not seek assistance from his family in Bangladesh because he is ashamed of his criminal convictions. For cultural reasons, he would not 'turn up on his sister's doorstep' or embarrass his father. The Appellant

and his family would not receive practical or effective support in Bangladesh from the Appellant's family.

41. F gave consistent and credible evidence of the lack of support in the UK from her family members. I do not find it unusual that her family, except her brother, have disowned her because of the Appellant's criminal activity. The support F receives from her brother is limited to conversations on the telephone. There is no practical or effective support for F and her children from F's family in the UK.
42. Even if there was, I find that the Appellant plays a pivotal role in the family which cannot be substituted. It is apparent from Dr Tizzard's report in 2018 that the Appellant plays a significant part in the family's ability to function and, if separated from their father, both children will experience severe psychological loss. That situation has not changed with the passage of time. Both parents are required to take the children to school and to manage them at home.
43. It is accepted the Appellant is Z's primary carer. The Appellant takes Z to school and looks after him at home, putting Z to bed and staying with him until he is asleep. The Appellant is best placed to calm Z down when he is frustrated and experiences a 'meltdown'. I find there is such a strong bond between the Appellant and Z that the Appellant's role cannot be replaced by other family members or social services.
44. It is not in dispute that Z had been diagnosed with ASC and SLD. Z receives 22.5 hours support across the school week. Z's school report for July 2020 states that Z has benefitted from the speech and language programme with one-to-one adult support and is beginning to answer simple questions and tell an adult what he needs. He continues to need support and prompting from an adult to join in with conversations. He can struggle to listen and understand without one to one adult support.
45. Z's school report for July 2021 states that Z has benefitted from being in a small, more focussed learning environment. He struggles with concentration and attention span. The additional adult support and visual aids assist him to access the taught timetable and follow an adult agenda. He is reluctant to come to school some mornings, but it doesn't take long to settle him. He enjoys areas like the sensory tent. He is reluctant to try new things and requires one-to-one adult support before he feels comfortable and confident. One-to-one support is needed to be able to record Z's writing work. Z has benefitted from the use of simplified language, visual prompts and adequate processing time in his new specialised class. He can recognise his basic needs and communicate this to adults. He finds noise challenging. He often seeks the company of adults rather than his peers and often chooses to play on his own. He finds it a challenge to move around different groups.
46. In the ECHP, dated 30 May 2020, it states, "There can be 3 to 5 days a week when Z is unsettled and it is difficult to get him out of the house as

he will easily get upset and distressed. There can be multiple triggers to this - usually a result of frustration about not being able to express himself or not being able to do what he wants to do”.

47. Z is in a special needs class at school and is progressing well. He requires a high level of specialist support at school. Z refuses to go to school with M. The Appellant takes Z to school and F takes M to school. Home life is entirely orientated around Z’s condition. F cannot cope with the children without the Appellant because she suffers from severe fatigue caused by diabetes and hypothyroidism.
48. On the totality of the evidence, it is in Z’s best interests to remain in the UK and for the family unit to remain together. It is also in M’s best interests for the family unit to remain together. Removal of the Appellant would place her at risk of harm from Z because two parents are required to separate the children when Z’s behaviour deteriorates, as it does from time to time. His condition dictates the activities of the family and the routine at home.

### **Conclusions on unduly harsh**

49. I am not persuaded that HA (Iraq) has redefined the threshold of unduly harsh as submitted by Ms Umoh. I apply the test defined in KO (Nigeria) [2018] UKSC 53 and HA (Iraq). I have had regard to relevant caselaw on the unduly harsh test set out in the skeleton arguments of both the Appellant and the Respondent.
50. I find that if the Appellant is deported it would be unduly harsh on his wife and children to remain in the UK without him. My reasons are as follows: In summary, the family cannot function without the Appellant. I agree with the opinion of Dr Tizzard that separating the family unit should be avoided at all costs. The family bonds have grown stronger since her report in 2018. Both children require both parents to get to and from school and function within the home.
51. F cannot cope with both children without the Appellant because she suffers from severe fatigue caused by diabetes and hypothyroidism. The Appellant’s role cannot be replaced by other members of the family or social services. The high level of care provided by the Appellant could not be carried out by anyone else. F works part-time to support her family and depends on the Appellant to look after the children. Z’s behaviour is unpredictable and the Appellant is available to manage Z’s behaviour. F is not always physically capable of doing so. F’s physical and emotional well-being is highly likely to deteriorate if the Appellant is removed to Bangladesh.
52. Z has a very strong bond with the Appellant who meets all of Z’s daily needs. Z depends on his father to get to and from school and to go to sleep. If separated from the Appellant Z will experience severe

psychological loss. This will be detrimental to his future development and progress in school.

53. M is at risk of harm from Z if the Appellant is removed to Bangladesh. Z hit M with a remote control when she touched his things. It is apparent from all the evidence that both parents are required to separate the children from time to time, given Z's unpredictable behaviour.
54. I find that if the family unit relocated to Bangladesh it would have an unduly harsh effect on Z for the following reasons. Z cannot tolerate change. He finds it difficult to return to school after the holidays and takes time to readjust to an environment with which he is familiar and in which he receives a high level of support. He struggles to communicate and requires specialist support for his SLD. I find that the disruption and anxiety adjusting to a new cultural environment, including learning Bengali, would have severe consequences for his future development and mental well-being. It is apparent from his school reports and his ECHP, and acknowledged by his parents, that he will not cope with a move to Bangladesh. In my view, relocation to Bangladesh would cause significant harm to Z's ongoing development and emotional well-being.
55. Z's ASC is such that he requires a high level of support from his parents, teachers and other professionals. Although there is some support and treatment in Bangladesh, it is still in the early stages of development and is insufficient to meet Z's needs. An autism corner or 20 minutes extra in exams is not going address Z's complex needs. Even if adequate support and treatment is available in Bangladesh, it is unlikely to repair the devastating impact on Z resulting from such a dramatic change in circumstances.
56. This factor is determinative of this appeal. For the sake of completeness, I find that treatment is available in Bangladesh for the Appellant's depression and F's diabetes and hypothyroidism. There was insufficient evidence to show that M would not be able to adjust to life in Bangladesh. The effect on F and/or M of relocation to Bangladesh would not be unduly harsh.
57. The weight to be attached to the public interest is significant in this case. The Appellant was sentenced to three years six months' imprisonment in 2012 and a further 640 days imprisonment in 2015 for non-compliance with a confiscation order. He has remained in the UK without leave to remain and has started a family.
58. However, having considered all the evidence in the round, I conclude the best interests of Z outweigh the public interest. The Appellant's deportation would be disproportionate on the particular facts of this case. I allow the Appellant's appeal.

## **Notice of Decision**

## Appeal allowed on Article 8 grounds

**J Frances**

Signed  
Upper Tribunal Judge Frances

Date: 7 October 2021

---

### NOTIFICATION OF APPEAL RIGHTS

1. A person seeking permission to appeal against this decision must make a written application to the Upper Tribunal. Any such application must be **received** by the Upper Tribunal within the **appropriate period** after this decision was **sent** to the person making the application. The appropriate period varies, as follows, according to the location of the individual and the way in which the Upper Tribunal's decision was sent:
2. Where the person who appealed to the First-tier Tribunal is **in the United Kingdom** at the time that the application for permission to appeal is made, and is not in detention under the Immigration Acts, the appropriate period is **12 working days (10 working days, if the notice of decision is sent electronically)**.
3. Where the person making the application is in detention under the Immigration Acts, **the appropriate period is 7 working days (5 working days, if the notice of decision is sent electronically)**.
4. Where the person who appealed to the First-tier Tribunal is **outside the United Kingdom** at the time that the application for permission to appeal is made, the appropriate period is **38 days (10 working days, if the notice of decision is sent electronically)**.
5. A **"working day"** means any day except a Saturday or a Sunday, Christmas Day, Good Friday or a bank holiday.
6. The date when the decision is "sent" is that appearing on the covering letter or covering email