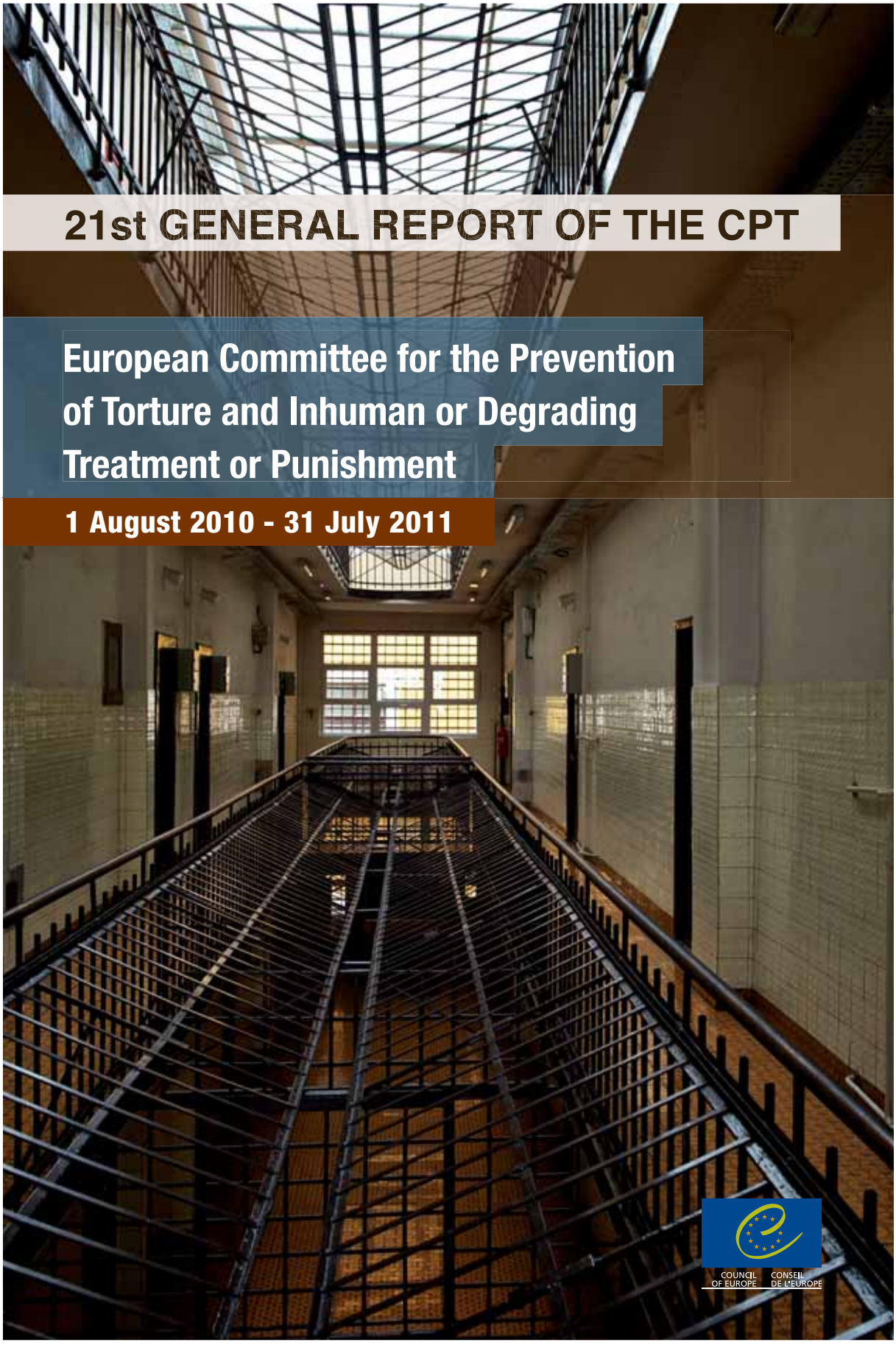

21st GENERAL REPORT OF THE CPT

European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment

1 August 2010 - 31 July 2011

COUNCIL OF EUROPE CONSEIL DE L'EUROPE

21st General Report

of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT)

(1 August 2010-31 July 2011)

Edition française : *21e rapport général du Comité européen pour la prévention de la torture et des peines ou traitements inhumains ou dégradants (CPT)*

The CPT is required to draw up every year a general report on its activities, which is published. This 21st General Report, as well as previous general reports and other information about the work of the CPT, may be obtained from the Committee's Secretariat or from its website: http://www.cpt.coe.int/.

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Visits

1. The CPT organised 14 visits totalling 147 visit days during the twelve-month period covered by this General Report. Eleven of the visits (totalling 126 visit days) formed part of the CPT's annual programme of periodic visits and the remaining three (21 days) were ad hoc visits which the Committee considered were required by the circumstances. In the course of one of the periodic visits, namely to Germany, the CPT's delegation examined the treatment and conditions of detention of a prisoner convicted by the International Criminal Tribunal for the former Yugoslavia (see also paragraphs 8 and 9).

Details of all these visits (dates and places of deprivation of liberty visited) are provided in Appendix 7.

2. Once again, staff-related difficulties have hampered the CPT's activities. In particular, several experienced administrators have left the Committee's secretariat over the last year and it has been necessary to limit the number of ad hoc visits while new staff members are recruited and trained. However, the Committee is now engaged on a marked increase in its activities, with a total of nine visits, including four ad hoc, planned during the last four months of 2011.

Periodic visits

3. The eleven periodic visits were carried out to Bosnia and Herzegovina, Bulgaria, the Czech Republic, France, Germany, Moldova, Norway, Romania, Serbia, Spain and "the former Yugoslav Republic of Macedonia".

During each visit, the CPT's delegation examined the situation in a wide range of places of deprivation of liberty, and reviewed action taken to implement the recommendations made by the Committee after previous visits. Particular attention was given in the course of certain visits to the treatment of juveniles deprived of their liberty (for example, in the Czech Republic, Norway, Romania and Serbia) and of involuntary psychiatric patients (in France, Moldova and "the former Yugoslav Republic of Macedonia"). The situation of persons held "incommunicado" was a prominent feature of the visit programme in Spain, as was the case of persons subject to preventive detention (*Sicherungsverwahrung*) during the visit to Germany. The treatment of persons with mental and/or physical disabilities was examined in several countries; facilities for such persons were visited in Bosnia and Herzegovina, Bulgaria, Moldova and "the former Yugoslav Republic of Macedonia".

The use of surgical castration in the context of the treatment of sex offenders was explored in the course of the visits to the Czech Republic and Germany. As the CPT has already made clear[1], it is firmly opposed to the application of this intervention in that context.

Ad hoc visits

4. The three ad hoc visits carried out by the CPT during the period covered by this General Report were to Albania, Greece and the North Caucasian region of the Russian Federation.

5. The main objective of the ad hoc visit to **Albania** at the end of January 2011 was to examine the treatment of persons who had been taken into custody following violent disturbances that had occurred in Tirana earlier that month. The CPT's delegation interviewed in private all the persons still in detention (some 35 in total) and examined relevant records at Prisons Nos. 303 and 313 and at several police establishments in the capital. The delegation also held consultations with the Minister of the Interior, the Director General of the State Police and the Prosecutor General.

6. During the ad hoc visit to **Greece** in January 2011, the CPT's delegation examined the treatment of migrants held in aliens detention centres, particularly in the Attica and Evros regions, as well as the situation in several prisons. The visit had been preceded, some 12 months earlier, by high-level talks with the Greek authorities, which were focused on the need to improve the conditions of detention of irregular migrants and address long-standing problems in the prison system[2].

From the findings made in the course of the visit, the CPT could only conclude that effective action had not been taken to improve the situation notwithstanding the recommendations it had made after several visits organised during the previous six years. As a result, the Committee made a public statement on 15 March 2011, the text of which is reproduced in Appendix 8. As is made clear in the public statement, the CPT remains committed to continuing its dialogue with the Greek authorities, and that dialogue is being pursued on the basis of the Committee's report on its visit in January 2011.

1. See the report on the CPT's visit to the Czech Republic in October 2009; CPT/Inf (2010) 22, paragraph 10.
2. See the CPT's 20th General Report; CPT/Inf (2010) 28, paragraph 19.

7. In April/May 2011, the CPT organised its twelfth visit to the North Caucasian region of the **Russian Federation,** focusing on the Republic of Dagestan and the Chechen Republic.

In the months preceding the visit, the CPT had received a considerable amount of information pointing to a general deterioration of the security environment in Dagestan. In parallel, numerous reports were received about the allegedly widespread resort to ill-treatment of persons detained by law enforcement agencies in that Republic. Several reports referred to practices of unlawful detention, detention in unofficial places and abductions, allegedly carried out by law enforcement officials. And the Committee had also continued to receive similar reports as regards the Chechen Republic. The decision was therefore taken to return to these two Republics, in order to verify the situation on the spot and examine the steps taken to implement recommendations made after previous visits. The CPT also considered that the time had come to examine the situation in North Ossetia-Alania, a Republic which had previously received relatively little attention from the Committee.

In the three Republics, the delegation focused its attention on the treatment of persons deprived of their liberty by law enforcement agencies and discussed with the relevant authorities in the region the carrying out of investigations vis-à-vis allegations or information indicative of ill-treatment of detained persons by law enforcement officials. The opportunity was also taken to review conditions of detention in the main pre-trial establishments (SIZOs) in each of the Republics.

Monitoring on behalf of the International Criminal Tribunal for the former Yugoslavia (ICTY)

8. This specific monitoring activity is regulated by an exchange of letters between the ICTY and the Council of Europe dated 7 and 24 November 2000[3]. At present, the CPT has agreed to monitor the treatment and conditions of detention of persons convicted by the ICTY and serving their sentences in Albania, Germany, Portugal, Ukraine and the United Kingdom.

9. During the periodic visit to Germany in December 2010, the CPT's delegation monitored the situation of a person sentenced to life imprisonment by the ICTY who is serving his sentence at Freiburg Prison.

3. The exchange of letters is reproduced in the CPT's 11th General Report; CPT/Inf (2001) 16, Appendix 5.

Plenary meetings and activities of subgroups

10. The CPT held three one-week *plenary meetings* during the twelve months covered by this General Report, in November 2010 and in March and July 2011. The Committee was pleased to be able to have a wide-ranging exchange of views with the Secretary General of the Council of Europe, Thorbjørn Jagland, at its July meeting. A total of 18 visit reports were adopted by the Committee at these meetings, seven of them drawn up under the expedited drafting procedure (according to which draft visit reports prepared by visiting delegations that are circulated at least two weeks before a plenary meeting are taken as approved without debate, save for paragraphs in respect of which a discussion has been specifically requested in advance).

11. The two standing *subgroups of the CPT*, the Jurisprudence Group and the Medical Group, have continued to meet on the eve of each plenary meeting. The Jurisprudence Group advises the CPT on innovations and possible inconsistencies in the Committee's standards as reflected in visit reports, and identifies areas where there is room for development of the standards. The Medical Group examines substantive issues of a medical nature related to the CPT's mandate and organises training sessions on the specific tasks that medical members of visiting delegations are required to perform.

Ad hoc working groups have also been set up to examine specific topics. For example, one such group was responsible for preparing the substantive section on solitary confinement of prisoners contained in this General Report. Another ad hoc working group is currently undertaking a review of the Committee's standards in the field of psychiatry, in the light inter alia of the UN Convention on the Rights of Persons with Disabilities. A third ad hoc working group is examining the possible involvement of the CPT in the monitoring of the deportation of foreign nationals by air ("return flights").

Contacts with other bodies

12. The CPT's President had the opportunity to address the 30th Council of Europe Conference of Ministers of Justice held in Istanbul from 24-26 November 2010. Responding to an invitation from the Justice Ministers, the *Committee of Ministers* subsequently entrusted the European Committee on Crime Problems, in cooperation with the Steering Committee for Human Rights and the CPT, to take stock of the problems faced by prison administrations in Europe and consider whether there is a need to reinforce the existing legal framework. Those problems include overcrowding and the interrelated issue of the excessive recourse to – and excessive length of – pre-trial detention. The CPT is fully prepared to play its part in joint endeavours within the framework of the Council of Europe to meet these challenges.

Many of the issues concerned were subsequently explored in depth at the seminar on "Improving Detention Conditions through Effective Monitoring and Standard Setting", organised in Antalya from 17-18 March 2011 within the framework of the Turkish Chairmanship of the Committee of Ministers. The CPT was closely involved in the organisation of that seminar, the proceedings of which are available at http://www.coe.int/t/dghl/standardsetting/prisons/Antalya_seminar_en.asp.

13. On 9 March 2011, the CPT held an exchange of views with the *Parliamentary Assembly* member Jean-Charles Gardetto, concerning his report on "Strengthening torture prevention mechanisms in Europe". The CPT is grateful to Mr Gardetto, and to the Parliamentary Assembly as a whole, for the support for the Committee's activities manifested in that report and in the Resolution and Recommendation on the same subject subsequently adopted by the Assembly.

14. Regular contacts have been maintained with the Commissioner for Human Rights, Thomas Hammarberg, and members of his Office on matters of common interest, and the CPT continues to seek synergy with *other parts of the Council of Europe.* Specific reference should be made to the increased participation of CPT members in activities of the Pompidou Group as well as those of the European NPM Project, which is promoting cooperation between the national preventive mechanisms (NPMs) progressively being set up in Europe under the Optional Protocol to the United Nations Convention against Torture.

15. Deepening cooperation with the *United Nations* Subcommittee on Prevention of Torture (SPT) remains a top priority, and for this purpose the CPT had a lengthy exchange of views on 6 July 2011 with representatives of the SPT, including its Chairperson, Malcolm Evans, and Vice-Chairperson, Zdenek Hájek. The CPT is also engaging with the NPMs that have already been set up; the Committee's delegations had close contacts with the mechanisms concerned during the periodic visits to France, Germany, Moldova and Spain as well as during the ad hoc visit to Albania. And the setting up of NPMs was discussed with the national authorities during the periodic visits to Romania and Serbia.

Reference should also be made to the CPT's exchange of views on 11 November 2010 with the outgoing UN Special Rapporteur on Torture, Manfred Nowak.

16. As regards the CPT's contacts with institutions of the *European Union*, representatives of the Committee held detailed discussions with FRONTEX officials in Warsaw on 24 and 25 February 2011. Areas in which the CPT and FRONTEX might cooperate in the future were explored, including as regards the monitoring of joint return operations coordinated by FRONTEX. As already indicated (see paragraph 11), the CPT has recently set up an ad hoc working group on this subject.

Further, following a request from the European External Action Service, a member of the CPT took part in an exploratory mission to Uzbekistan in June 2011, in order to examine the best way of responding to a request for assistance in the area of torture prevention that the EU had received from that country.

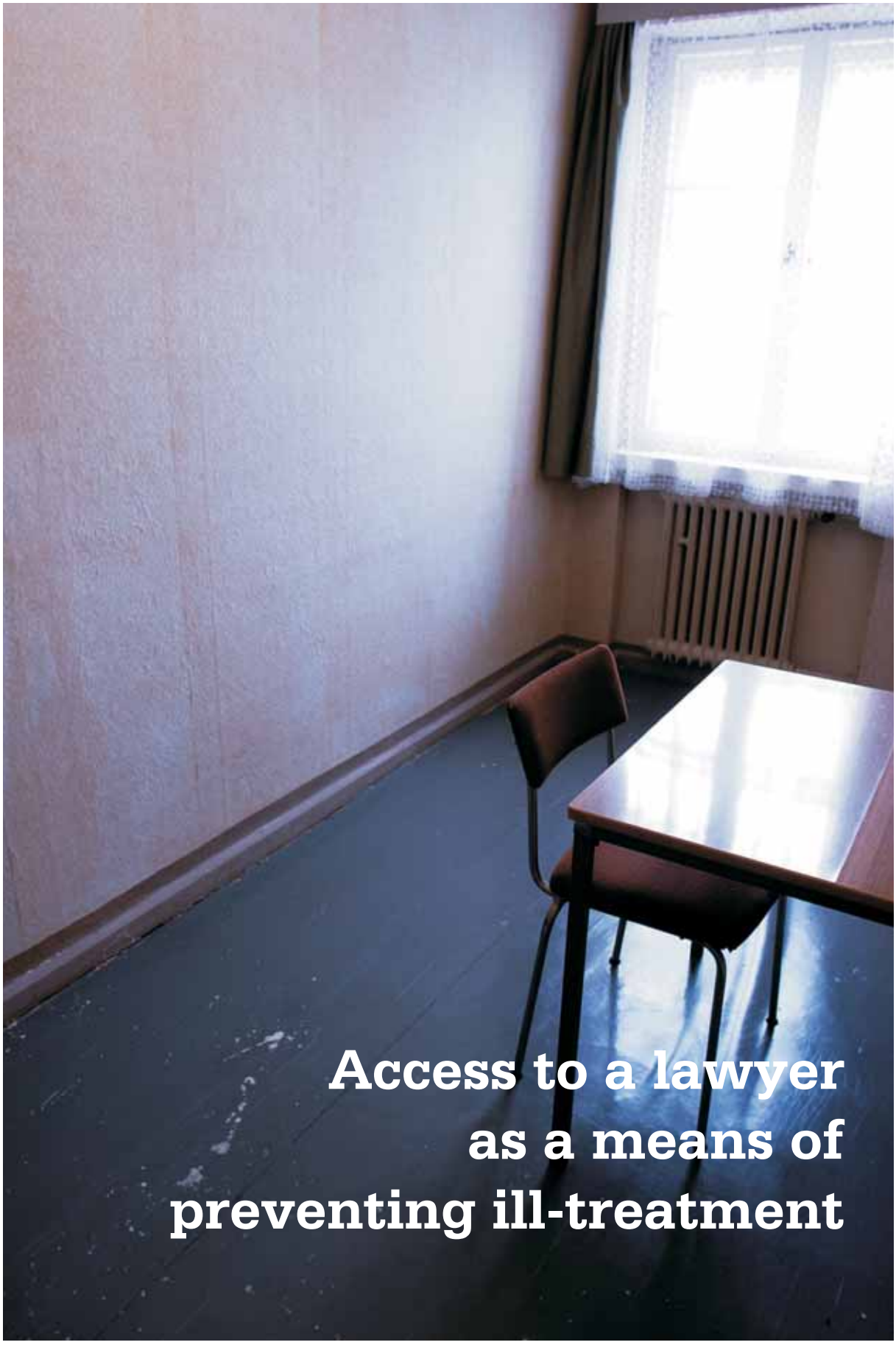
17. CPT representatives have also continued to take part in experts' meetings organised by the EU Commission for the implementation of the "roadmap" on procedural rights and detention-related matters adopted by the EU Council in November 2009. The meetings concerned in particular the envisaged "Green Paper" (i.e. consultative document) on detention issues in the EU and draft legislation on the right of access to a lawyer in criminal proceedings.

The Green Paper was published on 14 June 2011 and the CPT welcomes the fact that in relation to the monitoring of detention conditions in the EU, the accent is placed on promoting synergy between the bodies that exist already at national and international level rather than on creating new mechanisms. Reference should be made here to the invitation addressed by the Justice Ministers at their November 2010 Conference in Istanbul to the competent bodies of the EU, that they "take due account of the Council of Europe's experience in the area of setting standards in the prison field and with mechanisms for monitoring their implementation, in order to ensure coherence and avoid duplication". The CPT believes that provided that the Council of Europe and the EU work in harmony, the two organisations are together capable of having a major impact on the treatment of prisoners throughout Europe.

On 8 June 2011 the EU Commission adopted a proposal for a Directive of the European Parliament and of the Council on the right of access to a lawyer in criminal proceedings and on the right to communicate upon arrest. The CPT welcomes this proposal which, if enacted in the form put forward by the Commission, would consolidate these two fundamental safeguards long advocated by the Committee[4].

4. On the assumption that the issue of legal aid will in due course be dealt with through a separate proposal.

The underlying goal of the proposed Directive is to boost mutual trust between the judicial authorities of the different EU member States, and securing that trust implies the existence of procedures that both ensure a fair trial and are capable of countering ill-treatment of persons deprived of their liberty. In the context of the discussions that are currently taking place on the Commission's proposal, the CPT felt that it might be helpful to briefly recall in the following section what it considers to be the key elements of the right of access to a lawyer as an effective means of preventing ill-treatment at the stage of police custody.



Access to a lawyer as a means of preventing ill-treatment

Access to a lawyer as a means of preventing ill-treatment

18. The possibility for persons taken into police custody to have access to a lawyer is a fundamental safeguard against ill-treatment. The existence of that possibility will have a dissuasive effect upon those minded to ill-treat detained persons. Further, a lawyer is well placed to take appropriate action if ill-treatment actually occurs.

19. To be fully effective, the right of access to a lawyer should be guaranteed as from the very outset of a person's deprivation of liberty[5]. Indeed, the CPT has repeatedly found that the period immediately following deprivation of liberty is when the risk of intimidation and physical ill-treatment is greatest. Further, the right of access to a lawyer should apply as of the moment of deprivation of liberty, irrespective of the precise legal status of the person concerned; more specifically, enjoyment of the right should not be made dependent on the person having been formally declared to be a "suspect". For example, under many legal systems in Europe, persons can be obliged to attend – and stay at – a law enforcement establishment for a certain period of time in the capacity of a "witness" or for "informative talks"; the CPT knows from experience that the persons concerned can be at serious risk of ill-treatment.

20. The right of access to a lawyer should be enjoyed by everyone who is deprived of their liberty, no matter how "minor" the offence of which they are suspected. In numerous countries visited by the CPT, persons can be deprived of their liberty for several weeks for so-called "administrative" offences. The Committee can see no justification for depriving such persons of the right of access to a lawyer. Further, the Committee has frequently encountered the practice of persons who are in reality suspected of a criminal offence being formally detained in relation to an administrative offence, so as to avoid the application of the safeguards that apply to criminal suspects; to exclude certain offences from the scope of the right of access to a lawyer inevitably brings with it the risk of loopholes of this kind developing.

5. Of course, depending on the circumstances of the case concerned, the right of access to a lawyer may become operative at an even earlier stage.

21. Similarly, the right of access to a lawyer should apply, no matter how "serious" the offence of which the person detained is suspected. Indeed, persons suspected of particularly serious offences can be among those most at risk of ill-treatment, and therefore most in need of access to a lawyer. Consequently, the CPT opposes measures which provide for the systematic denial for a given period of access to a lawyer for detained persons who are suspected of certain categories of offences (e.g. offences under anti-terrorism legislation). The question whether restrictions on the right of access to a lawyer are justified should be assessed on a case-by-case basis, not determined by the category of offence involved.[6]

22. The CPT fully recognises that it may exceptionally be necessary to delay for a certain period a detained person's access to a lawyer of his choice. However, this should not result in the right of access to a lawyer being totally denied during the period in question. In such cases, access to another independent lawyer who can be trusted not to jeopardise the legitimate interests of the investigation should be organised. It is perfectly feasible to make satisfactory arrangements in advance for this type of situation, in consultation with the local Bar Association or Law Society.

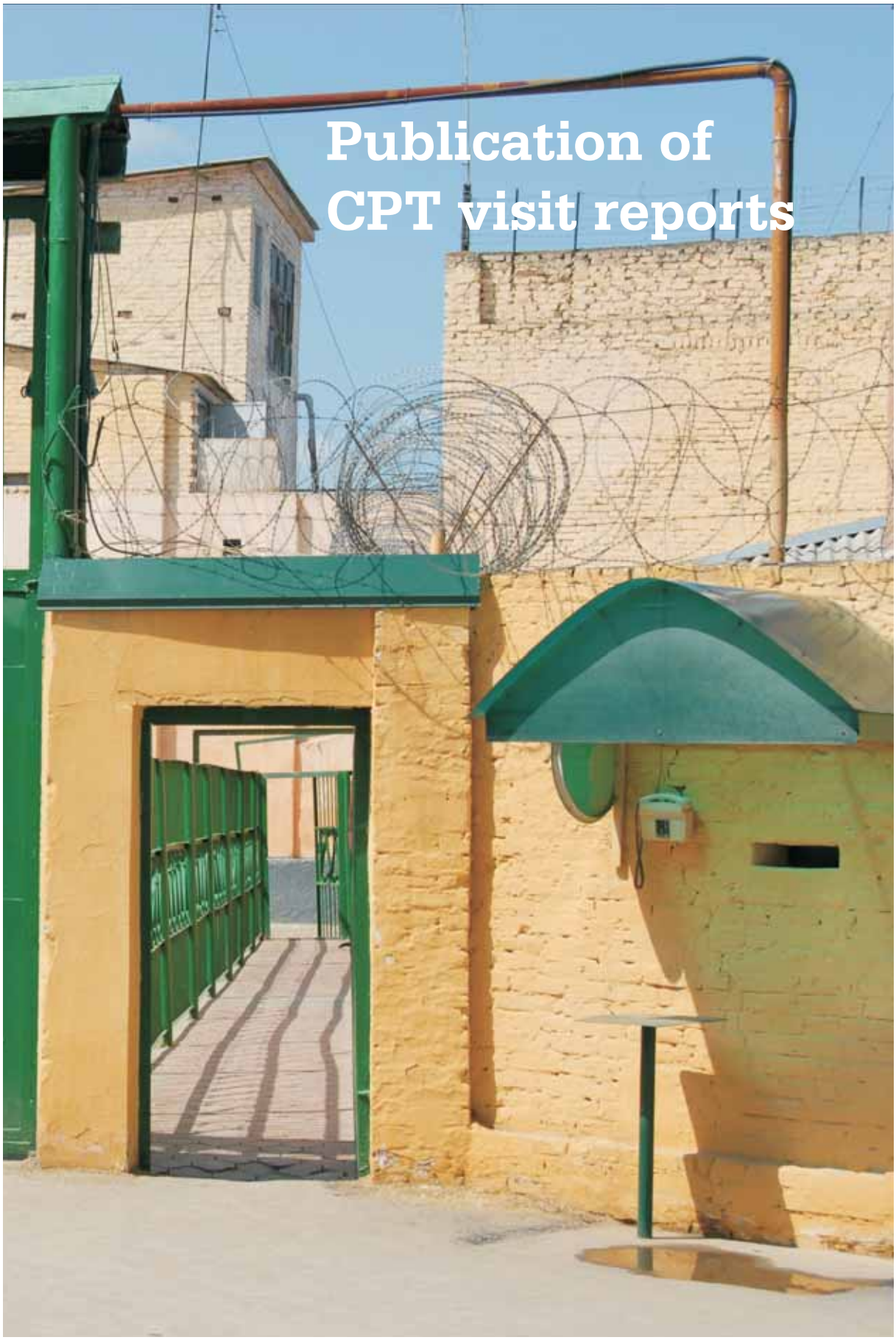
23. The right of access to a lawyer during police custody must include the right to meet him, and in private. Seen as a safeguard against ill-treatment (as distinct from a means of ensuring a fair trial), it is clearly essential for the lawyer to be in the direct physical presence of the detained person. This is the only way of being able to make an accurate assessment of the physical and psychological state of the person concerned. Likewise, if the meeting with the lawyer is not in private, the detained person may well not feel free to disclose the manner in which he is being treated. Once it has been accepted that exceptionally the lawyer in question may not be a lawyer chosen by the detained person but instead a replacement lawyer chosen following a procedure agreed upon in advance, the CPT fails to see any need for derogations to the confidentiality of meetings between the lawyer and the person concerned.

6. Reference might be made here to the judgment of the European Court of Human Rights in the case of *Salduz v. Turkey* (27 November 2008), in which the Court found that "… Article 6§1 [of the European Convention on Human Rights] requires that, as a rule, access to a lawyer should be provided…, unless it is demonstrated in the light of the particular circumstances of each case that there are compelling reasons to restrict this right." (paragraph 55).

24. The right of access to a lawyer should also include the right to have the lawyer present during any questioning conducted by the police and the lawyer should be able to intervene in the course of the questioning. Naturally, this should not prevent the police from immediately starting to question a detained person who has exercised his right of access to a lawyer, even before the lawyer arrives, if this is warranted by the extreme urgency of the matter in hand; nor should it rule out the replacement of a lawyer who impedes the proper conduct of an interrogation. That said, if such situations arise, the police should subsequently be accountable for their action.

25. Finally, in order for the right of access to a lawyer during police custody to be fully effective in practice, appropriate provision should be made already at this early stage of the criminal procedure for persons who are not in a position to pay for a lawyer.

Publication of CPT visit reports



Publication of CPT visit reports

Introduction

26. Fifteen CPT visit reports were published during the period covered by this General Report, confirming once again the well-established trend of States deciding to lift the veil of confidentiality and place the Committee's findings in the public domain. At the time of writing, 258 of the 301 reports so far drawn up have been published.

A State-by-State table showing the current situation as regards publication of CPT visit reports is set out in Appendix 6. The Russian Federation continues to constitute a notable exception to the above-mentioned trend; however, there have recently been indications that the Russian authorities are rethinking their position on this matter.

The CPT regrets that authorisation has still not been given for publication of the report transmitted to NATO more than four years ago on the Committee's visit in 2007 to places of deprivation of liberty in Kosovo[7] under the authority of KFOR.

27. In its Recommendation 1968 (2011) on "Strengthening torture prevention mechanisms in Europe", the Parliamentary Assembly invites the Committee of Ministers to set in motion the procedure of amending the Convention establishing the CPT in order to permit the automatic publication of the Committee's visit reports and of the responses of the States concerned, subject to the possibility for a State to request postponement of publication for up to six months after transmission of the visit report.

It is self-evident that the timely publication of the CPT's visit reports can only increase the impact of its work. As has been repeatedly emphasised, authorising publication of visit reports can therefore be seen as one of the most important means of cooperating with the Committee. Nevertheless, the CPT has some misgivings as regards the proposal to provide for the automatic publication of the Committee's visit reports no later than six months after their transmission. There may be exceptional situations when the rapid publication of a visit report would do more harm than good. More generally, the CPT is concerned that undermining the principle of confidentiality by providing for the automatic publication of its visit reports could upset the balance in the Convention's provisions, to the detriment of the Committee's future cooperation with States.

7. All references to Kosovo, whether to the territory, institutions or population, in this general report shall be understood in full compliance with United Nations Security Council Resolution 1244 and without prejudice to the status of Kosovo.

Rather than automatic publication being imposed, the CPT would prefer that it be a policy that States voluntarily choose to adopt. In this connection, the Committee welcomes the request recently made by the Moldovan Government that all future CPT reports on visits to its country be published as soon as possible after transmission to the authorities, without prior authorisation[8].

Selected publications

28. In this section, a closer look is taken at some of the visits reports and government responses published during the last twelve months.

Report on the periodic visit to Georgia in February 2010 and response of the Georgian authorities

(treatment of persons detained by the police and investigations into complaints, prison overcrowding, living conditions in psychiatric/ social care establishments)

29. This fourth periodic visit by the CPT to Georgia confirmed that the situation as regards the treatment of persons detained by the police has considerably improved. Nevertheless, the persistence of some allegations of ill-treatment clearly indicates that the authorities must remain vigilant. In its report, the CPT recommends that a firm message of "zero tolerance" of ill-treatment, including through training activities, be delivered to all police staff.

30. Particular attention was paid during the visit to the manner in which investigations were carried out into cases involving allegations of ill-treatment, and the report concludes that the effectiveness of such investigations needs to be improved. By way of example, the delegation found that in the case of a prisoner who died shortly after his admission to Prison No. 7 in Tbilisi in September 2009, the police officers who had arrested the person concerned had still not been questioned (i.e. five months after the initiation of the preliminary investigation). Recommendations are also made to strengthen legal safeguards against ill-treatment and, in particular, to ensure that the right of access to a lawyer is fully effective as from the outset of deprivation of liberty.

8. The Moldovan Government reserved the right, in certain cases, to refuse or delay a publication.

31. Overcrowding remained a problem in the prisons visited, notwithstanding a major prison-building programme. The CPT's delegation found that the continuing increase in the prisoner population (which stood at 21,532 in February 2010, as compared to some 7,000 at the time of the CPT's periodic visit in 2004) was undermining the efforts made to create a humane penitentiary system. The Committee considers that certain features of the Georgian legislation – such as applying sentences on a consecutive rather than a concurrent basis to separate elements of what is often a single criminal episode – merit re-examination as they appear to be significant contributors to the overcrowding problem. In the visit report, the CPT calls upon the Georgian authorities to redouble their efforts to combat prison overcrowding by adopting policies designed to limit or modulate the number of persons sent to prison. Further, the CPT has recommended that the norms fixed by legislation for living space per prisoner be reviewed, so as to ensure that each inmate has at least 4 m^2 of living space in multi-occupancy cells in all prison establishments.

The situation as regards the programmes of activities offered in prisons remained highly unsatisfactory, with the vast majority of sentenced inmates and all remand prisoners having no opportunities for work, and educational and vocational training being extremely limited. Further, the number of prison officers working within the establishments visited was generally low. The CPT has recommended that steps be taken to increase staffing levels and that the current system of 24-hour shifts for prison officers be changed.

In their response, the Georgian authorities refer to the Penitentiary Reform Action Plan aimed at promoting the use of alternatives to imprisonment and the development of an improved conditional release system. Further, the Action Plan addresses the issue of increasing staffing levels. Information is also provided about the creation of work opportunities and other activities in prisons. However, the authorities state that limited financial resources make it impossible to immediately increase living space per prisoner. In respect of health care in prisons, reference is made to the preparations for the transfer of responsibility for prison health care to the Ministry of Labour, Health and Social Affairs by 2013, a measure which has long been advocated by the CPT.

32. The CPT's delegation received no allegations of ill-treatment of patients by staff of the Asatiani Psychiatric Institute in Tbilisi during its follow-up visit to the establishment. However, the report highlights the ever-deteriorating state of the hospital (crumbling walls, electrical wiring hanging from the ceilings, damaged floors, etc.). Further, the continued absence of central heating meant that temperatures in the wards were very low (11°C in patients' rooms). Such conditions made the hospital unfit for accommodating patients.

The Georgian authorities indicate in their response that the Asatiani Psychiatric Institute would be closed down by 1 July 2011, and patients transferred to various other psychiatric institutions offering satisfactory living conditions.

Report published September 2010, CPT/Inf (2010) 27; response published June 2011, CPT/Inf (2011)19

Report on the periodic visit to Ireland in January/February 2010 and response of the Irish authorities

(treatment of prisoners and psychiatric patients)

33. The majority of the prisoners interviewed by the CPT's delegation said that they were being treated correctly by prison officers, and relations between staff and inmates seemed, on the whole, to be relaxed and quite positive. However, a number of allegations of verbal abuse and physical ill-treatment of inmates by certain members of the prison staff were received. The visit report refers to several specific cases of alleged ill-treatment of inmates by prison officers, and concerns are expressed about the effectiveness of the investigations carried out into allegations of ill-treatment.

The CPT notes the reduced level of inter-prisoner violence at St. Patrick's Institution, as compared to the situation observed by the Committee in 2006. However, the situation in this regard at Mountjoy Prison was still worrying; in the view of the CPT's delegation, the establishment remained unsafe for prisoners and prison staff alike. The report identifies the availability of drugs, lack of purposeful activities, existence of feuding gangs, continued lack of an individualised risk and needs assessment for all prisoners, and poor material conditions as contributors to this state of affairs.

In their response, the Irish authorities provide details of investigations into the specific cases raised by the delegation and into all allegations of ill-treatment of prisoners at Mountjoy Prison during the period from 1 January 2008 to 25 February 2009. The authorities do not accept that Mountjoy can be described as "unsafe"; however they do accept that continuous efforts are required to address the issue of inter-prisoner violence and state that the Irish Prison Service will continue to invest in more stringent security measures to thwart incidents of violence in prison.

34. The report refers to a number of cases where prisoners did not receive proper health care, mainly due to the insufficient attendance time of doctors, inadequate admission interviews and an absence of rigour in examining prisoners after their discharge from hospital back to prison. The CPT makes a series of recommendations aimed at improving the provision of health care in Irish prisons.

In their response, the Irish authorities refer to ongoing independent reviews of primary health care in Cork, Midlands and Mountjoy Prisons and aspects of drug treatment in Irish prisons, and to disciplinary procedures on non-compliance with hours of attendance by prison doctors.

35. The report highlights that overcrowding remains a major problem in Irish prisons, aggravated by the considerable increase in the prison population and the conditions in certain of the old prisons. In Cork and Mountjoy Prisons, cells measuring 7.5 to 9 m² were used to accommodate two, sometimes three inmates, with the third person usually having to sleep on a mattress on the floor. In addition, none of these cells possessed in-cell sanitation; prisoners continued to discharge human waste into chamber pots in the presence of one or more other persons, and the pots remained in the cell until slopped out in the morning. The CPT calls upon the Irish authorities to eradicate slopping out from the prison system, and in the meantime to take action to minimise its degrading effects. The report also makes recommendations to improve the regime, especially for those prisoners placed on 23-hour lock-up for protection purposes.

In their response, the Irish authorities emphasise current efforts to expand the overall prison capacity by modernising the existing estate and building additional prisons, notably the Thornton Hall complex. They also refer to major progress in installing in-cell sanitation and to a new camping-style toilet being tested. Information is provided on measures to improve the regime and on the policy towards prisoners on protection, which is directly linked to efforts to tackle the phenomenon of inter-prisoner violence.

36. At the psychiatric hospitals of St Brenda's (Dublin) and St Ita's (Portraine), the CPT's delegation did not receive any allegations of ill-treatment of patients by staff. However, it found a significant level of violence, both between patients and directed towards staff. The poor material conditions in many of the units, the large dormitories and the inadequate number of experienced staff were important contributors to this state of affairs. The CPT also expresses concern as regards the delay in adopting new mental capacity legislation, to replace the outdated 1871 Lunacy Regulation (Ireland) Act.

In their response, the Irish authorities refer to the recruitment of additional staff and investments in both new and existing facilities, in order to reduce levels of violence and improve living conditions. They also comment that the drafting of the Mental Capacity Bill is nearing finalisation, and that account was being taken of Recommendation R (99) 4 of the Committee of Ministers of the Council of Europe on "Principles concerning the Legal Protection of Incapable Adults".

Report and response published February 2011, CPT/Inf (2011) 3 and CPT/Inf (2011) 4

Report on the ad hoc visit to Lithuania in June 2010 and response of the Lithuanian authorities

(treatment of persons in police custody, situation of juvenile remand prisoners, alleged existence of secret detention facilities)

37. The majority of the persons with recent experience of police custody interviewed by the CPT's delegation said that they had been treated in a correct manner; this confirmed the positive trend already noted during the 2008 periodic visit. However, some allegations of physical ill-treatment by police officers were received, including from juveniles. Most of these allegations concerned excessive use of force at the time of apprehension or slaps, kicks, punches or truncheon blows during questioning.

The report highlights that little progress has been made in implementing long-standing CPT recommendations concerning fundamental safeguards against ill-treatment of persons detained by the police and the holding of remand prisoners in police establishments, and that material conditions remain poor in certain police detention facilities, in particular Vilnius City Police Detention Centre.

In their response, the Lithuanian authorities indicate that they are considering putting a definitive end to the practice of returning remand prisoners to police establishments, and refer to plans to construct a new police detention facility in Vilnius.

38. The report notes that major improvements have been made to the material conditions of detention of remand prisoners at Kaunas Juvenile Remand Prison and Correction Home, as compared to the situation observed during the 2008 periodic visit. However, much remained to be done as regards activities; there was limited access to education, sports and other out-of-cell activities for juveniles on remand, most of whom spent 21 hours per day confined to their cells.

In their response, the Lithuanian authorities refer in particular to legal obstacles to increasing the duration of out-of-cell education for juvenile remand prisoners. In order to improve the situation, a working group had been set up at local level with the task of preparing an education plan for approval by the Minister of Education and Science.

39. As regards the alleged existence some years ago on Lithuanian territory of secret detention facilities operated by the Central Intelligence Agency (CIA) of the United States of America, the CPT's delegation visited the two facilities (Projects Nos. 1 and 2) that had been identified in the report on this matter drawn up by the National Security and Defence Committee of the Lithuanian Parliament. When seen by the delegation, the premises concerned did not contain anything that was highly suggestive of a context of detention; at the same time, both of the facilities could be adapted for detention purposes with relatively little effort.

The central issue for the CPT's delegation was the effectiveness of the pre-trial investigation into this matter that had been launched on 22 January 2010. During discussions with members of the Prosecutor General's Office, the delegation questioned the limited scope of the investigation, which related to a possible abuse of official position and did not expressly cover the possible unlawful detention of persons (and their possible ill-treatment) on Lithuanian territory. The delegation also sought to ascertain the precise steps that had been taken as from the opening of the investigation. However, the delegation was not provided with the specific information it requested, on the grounds that the major part of the data gathered during the investigation constituted a State or service secret. The CPT concluded in its report that given the paucity of the information available, it remained an open question whether the pre-trial investigation met the criterion of thoroughness.

In their response, the Lithuanian authorities reiterate that most data received during the pre-trial investigation are classified as a State or official secret and can therefore not be rendered public. They indicate that "the arrival and departure of U.S. CIA-related aircraft to/from Lithuania was established", but that there was no evidence of illegal transportation of any persons by those aircraft. Further, while stating that the real purpose of the premises of Projects Nos. 1 and 2, which were jointly set up by the State Security Department of Lithuania and the CIA, cannot be disclosed as it constitutes a State secret, the Lithuanian authorities affirm that no evidence has been found of any detention or abuse of a person on the premises concerned. For that reason, all related pre-trial investigations had been discontinued.

Report and response published in May 2011, CPT/Inf (2011) 17 and CPT/Inf (2011) 18

Report on the periodic visit to Malta in May 2008 and response of the Maltese authorities

(treatment of prisoners, detention centres for irregular migrants, and access to a lawyer during police custody)

40. The findings made by the CPT's delegation at the Corradino Correctional Facility, Malta's only prison, were of such scope and seriousness that the Committee recommended the carrying out of an independent and comprehensive audit of the establishment. The most important concerns included the absence of a qualified Prison Director, an inadequate number of trained staff, and the existence of informal power structures within the prison, thereby placing numerous inmates in a submissive position vis-à-vis gang-type practices and allowing a considerable amount of drug trafficking.

Arrangements for the provision of health care to prisoners also left a great deal to be desired; the report contains a series of recommendations on this subject. And serious concern is expressed about the practice of occasionally detaining children under the age of 16 at the establishment. As regards the conditions of detention, the CPT's delegation found that significant efforts continued to be made to improve the quality of prisoner accommodation; nevertheless, much remained to be done in several parts of the prison. Similarly, the situation as regards activities for prisoners, including those serving long sentences, was not satisfactory.

In their response, the Maltese authorities place particular emphasis on an audit carried out by a newly created Board of Inquiry, whose recommendations reiterate many of the issues raised in the CPT's report. The authorities commit themselves to implementing the recommendations and also make reference to ongoing refurbishment projects in the prison as well as to initial steps towards the replacement of police officers by prison officers in the establishment.

41. The situation found in the three centres visited for persons detained under the Immigration Act had not substantially improved since the CPT's previous visit in 2005. Detainees continued to be held for prolonged periods in poor, if not very poor, material conditions and with a total absence of purposeful activities.

In addition to recommendations aimed at improving the conditions of detention, the CPT requests the Maltese authorities to refrain from accommodating detainees at the Hermes Block at Lyster Barrack's Detention Centre pending its refurbishment, and to replace the tent compound at the same centre by a permanent structure. More generally, the CPT calls upon the Maltese authorities to move away from a crisis management approach based upon temporary solutions and, instead, to focus on durable, long-term solutions to the problems identified by the Committee.

In their response, the Maltese authorities emphasise the heavy burden which the constant influx of irregular migrants represents for the country. They state that it is impossible to take any of the existing detention centres out of use. However, reference is made to refurbishment projects underway, partly financed by EU funds, and to a new accommodation centre at Ta' Kandja for 137 persons.

42. Although provided for in an amendment to the Criminal Code adopted in April 2002, the right of persons detained by the police to consult in private with a lawyer was still not in force at the time of the 2008 visit. In fact, no form of access to a lawyer was being offered during the first 48 hours following arrest by the police. In the report, the CPT calls for Article 355AT of the Criminal Code to be brought into force without any further delay. The Committee also stresses that the right of access to a lawyer during police custody should include the right to have a lawyer present during any questioning by the police.

In their response, the Maltese authorities state that the necessary action is being taken for the entry into force of Article 355AT of the Criminal Code (which indeed entered into force on 10 February 2010) and that they would consider extending this right in the manner recommended by the CPT when evaluating the impact of the new provision.

Report and response published February 2011, CPT/Inf (2011) 5 and CPT/Inf (2011) 6

Report on the periodic visit to Poland in November/December 2009 and response of the Polish authorities

(treatment of persons in police custody, prison conditions, compulsory pharmacological treatment of sex offenders)

43. The majority of the persons met by the CPT's delegation who were, or had recently been, detained by the police indicated that they had been correctly treated, both at the time of their apprehension and during questioning. However, the delegation did receive a number of allegations of excessive use of force by the police at the time of apprehension, and of physical ill-treatment and verbal abuse, including of juveniles, during questioning. In two cases, the ill-treatment alleged was of such severity that it could well be considered as amounting to torture (e.g. blows on the soles of the feet, the infliction of electric shocks); the CPT requested information on the outcome of the proceedings initiated into those cases. The CPT has recommended that police officers be reminded that all forms of ill-treatment are unacceptable and will be the subject of severe sanctions. Particular attention was also paid to the manner in which investigations are carried out into cases involving allegations of ill-treatment, and the visit report contains recommendations aimed at improving the effectiveness of such investigations.

In their response, the Polish authorities refer to instructions given to senior police officers in the regional command offices. They also mention training on practical aspects of the protection of human rights. As for the two specific cases referred to in the CPT's report, the investigations opened by the competent Prosecutors' Offices had subsequently been discontinued.

44. Prison overcrowding remained a problem. The CPT notes in its report the refurbishment and expansion projects concerning various prisons and the increased resort to alternatives to imprisonment, including the entry into force of legislation introducing a system of electronic surveillance; the Committee encourages the Polish authorities to pursue their efforts in this direction. Further, the Committee recommends once again that the authorities review the norms fixed by legislation to ensure that all prisoners are provided with at least 4 m^2 of living space in multi-occupancy cells.

Hardly any allegations of ill-treatment of prisoners by staff were received in the prisons visited and at Rawicz Prison in particular, the delegation observed that relations between staff and inmates were positive. It is also noteworthy that at Rawicz Prison, the balance of work, education and therapeutic activities offered an excellent menu to address the needs of almost all categories of prisoners. However, in the other establishments visited, the regime provided to inmates was unsatisfactory. As regards in particular remand prisoners, they were locked in their cells 23 hours a day and the almost total lack of activities combined with limited living space, poor material conditions and restrictions on contact with the outside world and association produced a regime which was oppressive and stultifying.

In their response, the Polish authorities undertake to involve more inmates in organised activities.

45. Several concerns are raised in the report about recent legislation making provision for the compulsory pharmacological treatment of sex offenders. The CPT notes that the legislation – which entered into force in June 2010 – contains a number of shortcomings, such as the lack of a possibility for the persons concerned to request an independent expert opinion and the absence of periodic reviews of the measure. Further, it became apparent during the visit that that there was a lack of clarity concerning the implementation of the new legislation. The CPT makes detailed recommendations spelling out safeguards that should be introduced through a revision of the legislation. Above all, as should be the case before starting any medical treatment, the free and informed consent of the person concerned should be obtained prior to the commencement of anti-androgen treatment.

In their response, the Polish authorities refer only to the adoption of regulations listing the establishments which will accommodate persons undergoing such treatment.

Report and response published July 2011, CPT/Inf (2011) 20 and CPT/Inf (2011) 21

Report on the ad hoc visit to Romania in September/October 2009 and response of the Romanian authorities

(conditions in social welfare and psychiatric establishments)

46. The main objective of this ad hoc visit was to review the situation of residents and patients at Nucet Medico-Social Centre and Oradea Hospital for Neurology and Psychiatry, in the light of the recommendations made by the CPT after a visit in 2006.

No allegations of deliberate ill-treatment of residents/patients were received by its delegation at either establishment. Moreover, the CPT was pleased to note that since 2006, the annual mortality rate among young residents (i.e. those under 40) had significantly decreased at Nucet Medico-Social Centre.

47. A number of significant improvements, including major renovation work, were observed in both establishments. However, sanitary facilities were still dilapidated and insalubrious, in particular at Nucet, and, at Oradea, two unrenovated pavilions were in a very poor state of repair and damaged by water penetration. In addition, many residents at Nucet had not been able to go out into the establishment's grounds for several years (due to the breakdown of the elevator and the lack of staff to assist them). In both establishments, numerous residents/patients were still required to wear uniform collective clothes (tracksuits at Nucet and pyjamas at Oradea).

In their response, the Romanian authorities state that the sanitary facilities at Nucet Medico-Social Centre will be renovated as a matter of priority, and that the terrace of the unit for male residents has been adapted so as to enable residents to spend time in the open air every day. The authorities also indicate that the majority of residents at Nucet benefit from a personalised environment, but that it is not always possible to provide residents suffering from chronic mental disorders with their own clothes.

48. The CPT has welcomed the steps taken in both establishments to provide residents and patients with individualised treatment programmes, including occupational therapy and psychotherapy, and has encouraged the Romanian authorities to pursue their efforts to increase the number of residents/patients who benefit from such programmes. Further, in both establishments, additional staff had been recruited, in particular "educators" at Nucet and psychologists and nurses at Oradea. However, due to recent budget cuts, numerous posts of health-care staff, including psychiatrists' posts at Oradea, had remained vacant. The Committee also expresses concern that at Oradea Psychiatric Hospital, electroconvulsive therapy (ECT) was still occasionally administered in its unmodified form (i.e. without anaesthetic and muscle relaxants).

In their response, the Romanian authorities acknowledge that staffing levels are not adequate, but comment that the limited budgetary resources do not allow the recruitment of more staff. They also state that ECT is no longer applied at all at Oradea Psychiatric Hospital and only rarely in other psychiatric establishments in Romania, and then always in its modified form.

49. The CPT's delegation found that the frequency of resort to means of mechanical restraint of violent and/or agitated residents at Nucet Medico-Social Centre had significantly decreased since 2006, and that decisions on the use of such restraints were now always taken by a doctor. Nevertheless, the CPT has reiterated that a written policy on this subject should be drawn up in all psychiatric and social welfare establishments in Romania, taking into account the criteria set out by the Committee.

In their response, the Romanian authorities state that a protocol on the use of means of restraint exists at Oradea as well as in other psychiatric hospitals. It stipulates, inter alia, that patients under restraint must be directly and permanently monitored by a member of staff and that every instance of restraint should be recorded in a special register. Further, special training for staff is organised on a regular basis. A protocol on the use of restraints will also be elaborated for Nucet Medico-Social Centre.

Report and response published in August 2010, CPT/Inf (2010) 25 and CPT/Inf (2010) 26

Report on the periodic visit to Turkey in June 2009 and response of the Turkish authorities

(treatment of persons detained by law enforcement agencies, the situation of immigration detainees and prison conditions)

50. The CPT's delegation interviewed, in various parts of the country, a large number of persons who were or had recently been detained by law enforcement agencies. The great majority of them indicated that they had been treated correctly whilst in custody, confirming the positive trend observed by the Committee in recent years. Nevertheless, a number of persons did make allegations of recent ill-treatment, mainly of excessive use of force at the time of apprehension but also in some cases of physical ill-treatment, threats or verbal abuse during police questioning. Most of these allegations were received in the Diyarbakir area.

In response to specific recommendations made by the CPT, the Turkish authorities indicate that they have issued a detailed circular to all central and provincial police units, emphasising the need to avoid ill-treatment and excessive use of force. They also refer to steps taken to strengthen fundamental safeguards against ill-treatment of persons detained by law enforcement officials.

51. Particular attention was paid during the 2009 visit to the situation of immigration detainees. The delegation found major shortcomings in several of the detention centres visited, in particular at Ağrı and Edirne (severe overcrowding, dilapidated conditions, limited access to natural light, poor hygiene, lack of access to outdoor exercise). The visit report also highlights that the detainees were being deprived of their liberty without benefiting from basic legal safeguards.

Shortly after the visit, the Turkish authorities informed the CPT that the unit for male adult detainees at Edirne – which was heavily criticised by the delegation in its end-of-visit preliminary observations – had been withdrawn from service. In their response to the report, the authorities provide additional information concerning measures being taken to improve the situation of immigration detainees; in particular, they refer to plans to construct several regional detention centres for foreigners, to replace many of the establishments currently in use.

52. The vast majority of prisoners interviewed by the delegation in the prisons visited indicated that prison officers behaved correctly towards them. That said, several allegations were received in Konya E-type Prison of physical ill-treatment and verbal abuse, in particular from persons detained under anti-terrorism legislation and juveniles. The information gathered by the delegation also indicated that inter-prisoner violence occurred rather frequently in that establishment.

Many of the prisons visited were overcrowded, and the possibilities for organised activities (such as work, education, vocational training or sports) were limited for almost all prisoners, including juveniles. In its report, the CPT also expresses concern about the inadequate provision of health care to prisoners and the serious shortage of doctors.

Following the visit, action was taken to remind staff at Konya E-type Prison that all forms of ill-treatment of inmates is unacceptable and will be subject to severe sanctions. In their response, the Turkish authorities also describe measures taken to address other issues raised in the visit report; in particular, information is provided on a series of measures to combat prison overcrowding, develop purposeful activities for prisoners and improve health-care provision.

Report and response published March 2011, CPT/Inf (2011) 13 and CPT/Inf (2011) 14

Solitary confinement of prisoners

Solitary confinement of prisoners

Introduction

53. Solitary confinement of prisoners is found, in some shape or form, in every prison system. The CPT has always paid particular attention to prisoners undergoing solitary confinement, because it can have an extremely damaging effect on the mental, somatic and social health of those concerned.[9]

This damaging effect can be immediate and increases the longer the measure lasts and the more indeterminate it is. The most significant indicator of the damage which solitary confinement can inflict is the considerably higher rate of suicide among prisoners subjected to it than that among the general prison population. Clearly, therefore, solitary confinement on its own potentially raises issues in relation to the prohibition of torture and inhuman or degrading treatment or punishment. In addition, it can create an opportunity for deliberate ill-treatment of prisoners, away from the attention of other prisoners and staff. Accordingly, it is central to the concerns of the CPT and, on each visit, delegations make a point of interviewing prisoners in solitary confinement in order to examine their conditions of detention and treatment and to check the procedures for deciding on such placements and reviewing them. In this section of its General Report, the CPT sets out the criteria it uses when assessing solitary confinement. The Committee believes that if these criteria are followed, it should be possible to reduce resort to solitary confinement to an absolute minimum, to ensure that when it is used it is for the shortest necessary period of time, to make each of the solitary confinement regimes as positive as possible, and to guarantee that procedures are in place to render the use of this measure fully accountable.

9. The research evidence for this is well summarised in Sharon Shalev's "A Sourcebook on Solitary Confinement" (Mannheim Centre for Criminology, London, 2008), available electronically at www.solitaryconfinement.org

54. The CPT understands the term "solitary confinement" as meaning whenever a prisoner is ordered to be held separately from other prisoners, for example, as a result of a court decision, as a disciplinary sanction imposed within the prison system, as a preventative administrative measure or for the protection of the prisoner concerned. A prisoner subject to such a measure will usually be held on his/her own; however, in some States he/she may be accommodated together with one or two other prisoners, and this section applies equally to such situations.

As regards more specifically the solitary confinement of juveniles, a practice concerning which the CPT has particularly strong reservations, reference should also be made to the comments made by the Committee in its 18th General Report.[10]

This section does not apply to the isolation of prisoners for medical reasons, as the grounds for such a measure are of a fundamentally different nature.

The principles involved

55. Solitary confinement further restricts the already highly limited rights of people deprived of their liberty. The extra restrictions involved are not inherent in the fact of imprisonment and thus have to be separately justified. In order to test whether any particular imposition of the measure is justified, it is appropriate to apply the traditional tests enshrined in the provisions of the European Convention on Human Rights and developed by the case-law of the European Court of Human Rights. The simple mnemonic **PLANN** summarises these tests.

(a) Proportionate: any further restriction of a prisoner's rights must be linked to the actual or potential harm the prisoner has caused or will cause by his or her actions (or the potential harm to which he/she is exposed) in the prison setting. Given that solitary confinement is a serious restriction of a prisoner's rights which involves inherent risks to the prisoner, the level of actual or potential harm must be at least equally serious and uniquely capable of being addressed by this means. This is reflected, for example, in most countries having solitary confinement as a sanction only for the most serious disciplinary offences, but the principle must be respected in all uses of the measure. The longer the measure is continued, the stronger must be the reason for it and the more must be done to ensure that it achieves its purpose.

10. See CPT/Inf (2008) 25, paragraph 26.

(b) Lawful: provision must be made in domestic law for each kind of solitary confinement which is permitted in a country, and this provision must be reasonable. It must be communicated in a comprehensible form to everyone who may be subject to it. The law should specify the precise circumstances in which each form of solitary confinement can be imposed, the persons who may impose it, the procedures to be followed by those persons, the right of the prisoner affected to make representations as part of the procedure, the requirement to give the prisoner the fullest possible reasons for the decision (it being understood that there might in certain cases be reasonable justification for withholding specific details on security-related grounds or in order to protect the interests of third parties), the frequency and procedure of reviews of the decision and the procedures for appealing against the decision. The regime for each type of solitary confinement should be established by law, with each of the regimes clearly differentiated from each other.

(c) Accountable: full records should be maintained of all decisions to impose solitary confinement and of all reviews of the decisions. These records should evidence all the factors which have been taken into account and the information on which they were based. There should also be a record of the prisoner's input or refusal to contribute to the decision-making process. Further, full records should be kept of all interactions with staff while the prisoner is in solitary confinement, including attempts by staff to engage with the prisoner and the prisoner's response.

(d) Necessary: the rule that only restrictions necessary for the safe and orderly confinement of the prisoner and the requirements of justice are permitted applies equally to prisoners undergoing solitary confinement. Accordingly, during solitary confinement there should, for example, be no automatic withdrawal of rights to visits, telephone calls and correspondence or of access to resources normally available to prisoners (such as reading materials). Equally, the regime should be flexible enough to permit relaxation of any restriction which is not necessary in individual cases.

(e) Non-discriminatory: not only must all relevant matters be taken into account in deciding to impose solitary confinement, but care must also be taken to ensure that irrelevant matters are not taken into account. Authorities should monitor the use of all forms of solitary confinement to ensure that they are not used disproportionately, without an objective and reasonable justification, against a particular prisoner or particular groups of prisoners.

Types of solitary confinement and their legitimacy

56. There are four main situations in which solitary confinement is used. Each has its own rationale and each should be viewed differently:

(a) Solitary confinement as the result of a court decision

In most countries, courts have the power to order that a person remanded in custody (i.e. placed in pre-trial detention) be held for a certain period in solitary confinement, in the interests of the criminal investigation. Further, in a few countries, a period of solitary confinement is an automatic part of some sentences established by legislation or can be ordered by a court as part of a sentence.

In relation to solitary confinement ordered by a court as part of remand conditions, it is axiomatic that there may be justification, in an individual case and based on sufficient evidence, for keeping a given remand prisoner apart from other particular prisoners or, in even more exceptional circumstances, prisoners in general, and in restricting his/her contact with the outside world. This should only be done to guard against a real risk to the administration of justice and must be subject to the safeguards outlined in paragraph 57 below.

The CPT considers that solitary confinement should never be imposed – or be imposable at the discretion of the court concerned – as part of a sentence. The generally accepted principle that offenders are sent to prison as a punishment, not to receive punishment, should be recalled in this context. Imprisonment is a punishment in its own right and potentially dangerous aggravations of a prison sentence as part of the punishment are not acceptable. It may be necessary for a sentenced prisoner to be subject, for a certain period of time, to a solitary confinement regime; however, the imposition of such a regime should lie with the prison authorities and not be made part of the catalogue of criminal sanctions.

(b) Solitary confinement as a disciplinary sanction

Withdrawal of a prisoner from contact with other prisoners may be imposed under the normal disciplinary procedures specified by the law, as the most severe disciplinary punishment. Recognising the inherent dangers of this sanction, countries specify a maximum period for which it may be imposed. This can vary from as little as a few days to as much as a month or more. Some countries allow prison directors to impose a given maximum period, with the possibility for a judicial body to impose a longer period. Most countries – but not all – prohibit sequential sentences of solitary confinement.

Given the potentially very damaging effects of solitary confinement, the CPT considers that the principle of proportionality requires that it be used as a disciplinary punishment only in exceptional cases and as a last resort, and for the shortest possible period of time. The trend in many member States of the Council of Europe is towards lowering the maximum possible period of solitary confinement as a punishment. The CPT considers that the maximum period should be no higher than 14 days for a given offence, and preferably lower.[11] Further, there should be a prohibition of sequential disciplinary sentences resulting in an uninterrupted period of solitary confinement in excess of the maximum period. Any offences committed by a prisoner which it is felt call for more severe sanctions should be dealt with through the criminal justice system.

(c) Administrative solitary confinement for preventative purposes

The law in most European countries allows for an administrative decision to place into solitary confinement prisoners who have caused, or are judged likely to cause, serious harm to others or who present a very serious risk to the safety or security of the prison. This may be for as short as a few hours, in the case of an isolated incident, or for as long as a period of years in cases involving prisoners who are considered as particularly dangerous and to continue to pose an imminent threat.

This is potentially the longest lasting type of solitary confinement and often the one with the fewest procedural safeguards. It is therefore crucial that there be rules to ensure that it is not used too readily (e.g. as an immediate response to every disciplinary infraction pending adjudication), too extensively or for too lengthy periods. Accordingly, the safeguards described in paragraph 57 below must be rigorously followed.

11. The maximum period should certainly be lower in respect of juveniles.

(d) Solitary confinement for protection purposes

Every prison system has prisoners who may require protection from other prisoners. This may be because of the nature of their offence, their co-operation with the criminal justice authorities, inter-gang rivalry, debts outside or inside the prison or the general vulnerability of the person. While many prisoners can be managed in the general prison population in these circumstances, the risk to some is such that the prison can only discharge its duty of care to the individuals by keeping them apart from all other prisoners. This may be done at the prisoner's own request or at the instigation of management when it is deemed necessary. Whatever the process, the fact is that it can be very difficult for a prisoner to come off protection for the rest of the sentence – and maybe even for subsequent sentences.

States have an obligation to provide a safe environment for those confined to prison and should attempt to fulfil this obligation by allowing as much social interaction as possible among prisoners, consistent with the maintenance of good order. Resort should be had to solitary confinement for protection purposes only when there is absolutely no other way of ensuring the safety of the prisoner concerned.

The decision of placement in solitary confinement: procedures and safeguards

57. In order to ensure that solitary confinement is only imposed in exceptional circumstances and for the shortest time necessary, each type of solitary confinement should have its own distinct process for applying and reviewing it. The CPT outlines here what it considers to be the appropriate processes:

(a) Solitary confinement as part of remand conditions

As already indicated, solitary confinement of persons remanded in custody should only be used sparingly and where there is direct evidence in an individual case that there is a serious risk to the administration of justice if the prisoner concerned associates with particular inmates or others in general. Such decisions should be made in open court, with as fully reasoned a judgment as possible, and be separately appealable. They should also be reviewed by the competent court on a frequent basis to ensure that there is a continuing need for solitary confinement.

(b) Solitary confinement as a disciplinary sanction

The reason for the imposition of solitary confinement as a punishment, and the length of time for which it is imposed, should be fully documented in the record of the disciplinary hearing. Such records should be available to senior managers and oversight bodies. There should also be an effective appeal process which can re-examine the finding of guilt and/or the sentence in time to make a difference to them in practice. A necessary concomitant of this is the ready availability of legal advice for prisoners in this situation.

Prisoners undergoing this punishment should be visited on a daily basis by the prison director or another member of senior management, and the order given to terminate solitary confinement when this step is called for on account of the prisoner's condition or behaviour. Records should be kept of such visits and of related decisions.

(c) Administrative solitary confinement for preventative purposes

This can result in very long-term placements under solitary confinement and the administrative decisions involved are often indeterminate; both these elements aggravate the negative effects of the measure. Consequently, there is a need for stringent controls. The CPT considers that placement in administrative solitary confinement should only be authorised by the most senior member of staff in the prison; any imposition of this measure as an emergency should be reported to the most senior member of staff on duty immediately and brought to the attention of the prison director as soon as possible. A full written report should be drawn up before the member of staff who makes the decision goes off-duty. This should record the reasons for the decision and the precise time the measure was adopted as well as the views of the prisoner as far as these can be ascertained. There should be constant, logged, monitoring of all cases for the first few hours and the person should be released from solitary confinement as soon as the reason for the imposition of the measure has been resolved. In all cases where the measure continues for longer than 24 hours, there should be a full review of all aspects of the case with a view to withdrawing the measure at the earliest possible time.

If it becomes clear that solitary confinement is likely to be required for a longer period of time, a body external to the prison holding the prisoner, for example, a senior member of headquarters staff, should become involved. A right of appeal to an independent authority should also be in place. When an order is confirmed, a full interdisciplinary case conference should be convened and the prisoner invited to make representations to this body. A major task for the review team is to establish a plan for the prisoner with a view to addressing the issues which require the prisoner to be kept in solitary confinement. Among other things, the review should also look at whether some of the restrictions imposed on the prisoner are strictly necessary – thus it may be possible to allow some limited association with selected other prisoners. The prisoner should receive a written, reasoned decision from the review body and an indication of how the decision may be appealed. After an initial decision, there should be a further review at least after the first month and thereafter at least every three months, at which progress against the agreed plan can be assessed and if appropriate a new plan developed. The longer a person remains in this situation, the more thorough the review should be and the more resources, including resources external to the prison, made available to attempt to (re)integrate the prisoner into the main prison community. The prisoner should be entitled to require a review at any time and to obtain independent reports for such a review. The prison director or senior members of staff should make a point of visiting such prisoners daily and familiarise themselves with the individual plans. Medical staff should also pay particular attention to prisoners held under these conditions.

(d) Solitary confinement for protection purposes

"Own request" protection cases raise fewer questions than those ordered to go on protection by staff, but they still need some consideration. The CPT considers that all the alternatives, including transferring to another prison either the individual prisoner in need of protection or the prisoners causing the problem, mediation and assertiveness training, should be tried first and the full consequences of a decision to go on protection explained to the prisoner. Of course, a request from any prisoner on voluntary protection to return to the mainstream should be considered and granted if this can be safely done.

Those who are placed on protection against their will should have the right to play a full part in the discussion of the decision and to proffer alternative solutions. They should be given a full explanation of the decision and the opportunity to challenge it at a higher level. The decision should be reviewed on a regular basis so that solitary confinement can be ended as soon as it is no longer necessary.

Material conditions in solitary confinement

58. The cells used for solitary confinement should meet the same minimum standards as those applicable to other prisoner accommodation. Thus, they should be of an adequate size, enjoy access to natural light and be equipped with artificial lighting (in both cases sufficient to read by), and have adequate heating and ventilation. They should also be equipped with a means of communication with prison staff. Proper arrangements should be made for the prisoners to meet the needs of nature in a decent fashion at all times and to shower at least as often as prisoners in normal regime. Prisoners held in solitary confinement should be allowed to wear normal prison clothing and the food provided to them should be the normal prison diet, including special diets when required. As for the exercise area used by such prisoners, it should be sufficiently large to enable them genuinely to exert themselves and should have some means of protection from the elements.

59. All too often, CPT delegations find that one or more of these basic requirements are not met, in particular in respect of prisoners undergoing solitary confinement as a disciplinary sanction. For example, the cells designed for this type of solitary confinement are sometimes located in basement areas, with inadequate access to natural light and ventilation and prone to dampness. And it is not unusual for the cells to be too small, sometimes measuring as little as 3 to 4m^2; in this connection, the CPT wishes to stress that any cell measuring less than 6m^2 should be withdrawn from service as prisoner accommodation. The exercise areas used by the prisoners concerned are also frequently inadequate.

60. It is common practice for cells accommodating prisoners undergoing solitary confinement as a punishment to have a limited amount of furniture, which is often secured to the floor. Nevertheless, such cells should be equipped, as a minimum, with a table, adequate seating for the daytime (i.e. a chair or bench), and a proper bed and bedding at night.

As regards the cells used to accommodate prisoners undergoing other types of solitary confinement, the CPT considers that they should be furnished in the same manner as cells used by prisoners on normal location.

Regimes in solitary confinement

61. As with all other regimes applied to prisoners, the principle that prisoners placed in solitary confinement should be subject to no more restrictions than are necessary for their safe and orderly confinement must be followed. Further, special efforts should be made to enhance the regime of those kept in long-term solitary confinement, who need particular attention to minimise the damage that this measure can do to them. It is not necessary to have an "all or nothing" approach to the question. Each particular restriction should only be applied as appropriate to the assessed risk of the individual prisoner. Equally, as already indicated, there should be a clear differentiation between the regimes applied to persons subject to solitary confinement, having regard to the type of solitary confinement involved.

(a) Prisoners placed in solitary confinement as part of remand conditions ordered by a court should be treated as far as possible like other remand prisoners, with extra restrictions applied only as strictly required for the administration of justice.

(b) Prisoners undergoing solitary confinement as a disciplinary sanction should never be totally deprived of contacts with their families and any restrictions on such contacts should be imposed only where the offence relates to such contacts. And there should be no restriction on their right of access to a lawyer. They should be entitled to at least one hour's outdoor exercise per day, from the very first day of placement in solitary confinement, and be encouraged to take outdoor exercise. They should also be permitted access to a reasonable range of reading material (which, for example, should not be restricted to religious texts). It is crucially important that they have some stimulation to assist in maintaining their mental well-being.

(c) Prisoners placed in administrative solitary confinement for preventative purposes should have an individual regime plan, geared to addressing the reasons for the measure. This plan should attempt to maximise contact with others – staff initially, but as soon as practicable with appropriate other prisoners – and provide as full a range of activities as is possible to fill the days. There should be strong encouragement from staff to partake in activities and contact with the outside world should be facilitated. Throughout the period of administrative solitary confinement, the overall objective should be to persuade the prisoner to re-engage with the normal regime.

(d) As regards prisoners placed in solitary confinement for protection purposes, there is a balance to be struck between on the one hand the need to avoid making this kind of solitary confinement too attractive to prisoners and on the other hand minimising the restrictions put on persons to whom the measure is applied. Certainly, at the outset of such a period of solitary confinement, steps should be taken to reintegrate the person as soon as possible; if it becomes clear that there is a need for long-term protection, and no other response is possible, regime enhancement should be pursued. Special efforts should be made to identify other prisoners with whom the prisoner concerned could safely associate and situations where it would be possible to bring the person out of cell.

The role of health-care staff in solitary confinement

62. Medical practitioners in prisons act as the personal doctors of prisoners and ensuring that there is a positive doctor-patient relationship between them is a major factor in safeguarding the health and well-being of prisoners. The practice of prison doctors certifying whether a prisoner is fit to undergo solitary confinement as a punishment (or any other type of solitary confinement imposed against the prisoner's wishes) is scarcely likely to promote that relationship. This point was recognised in the Committee of Ministers' Recommendation Rec (2006) 2 on the Revised Prison Rules; indeed, the rule in the previous version of the Rules obliging prison doctors to certify that prisoners are fit to undergo punishment has now been removed. The CPT considers that medical personnel should never participate in any part of the decision-making process resulting in any type of solitary confinement, except where the measure is applied for medical reasons.

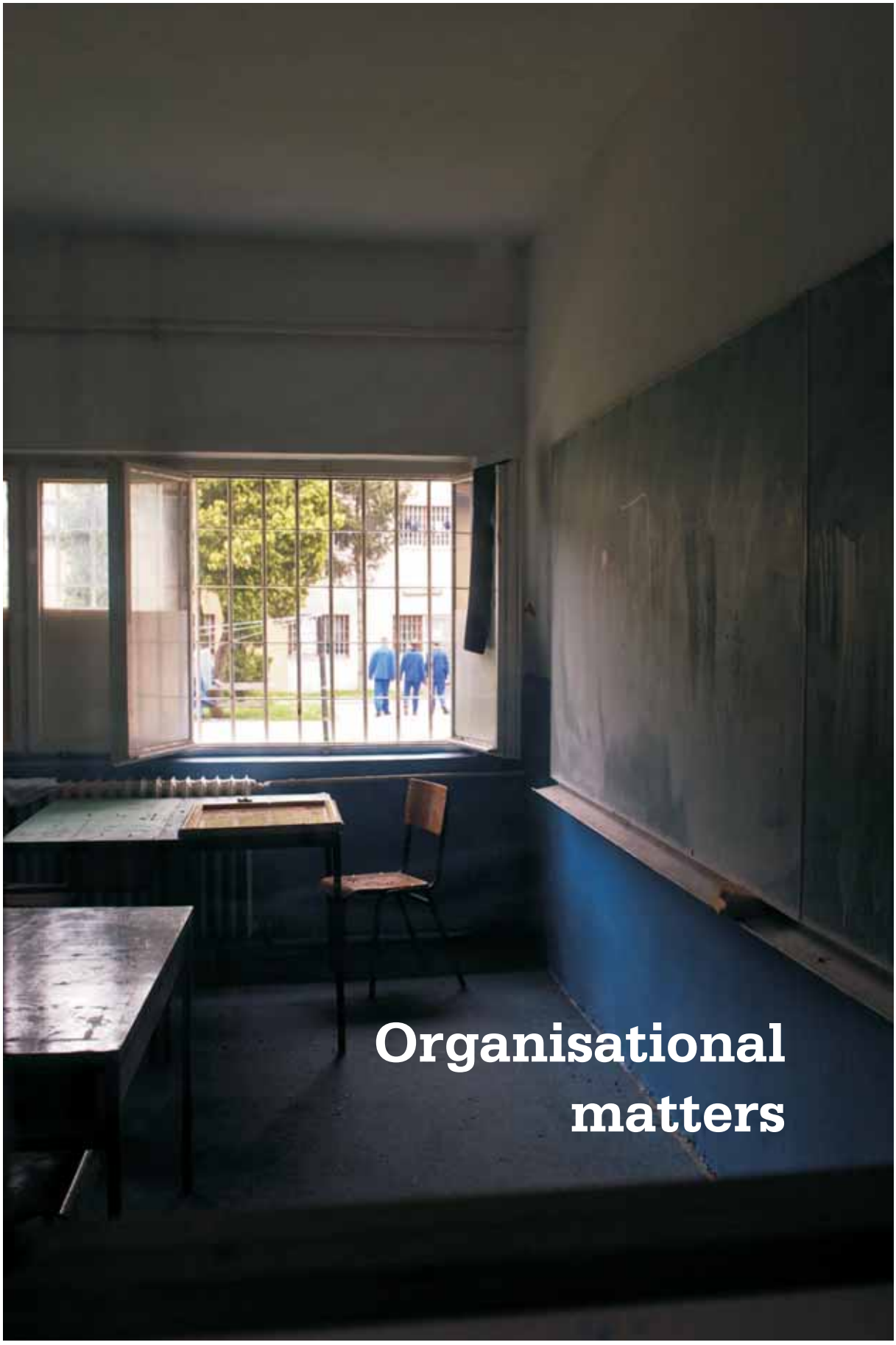
63. On the other hand, health-care staff should be very attentive to the situation of all prisoners placed under solitary confinement. The health-care staff should be informed of every such placement and should visit the prisoner immediately after placement and thereafter, on a regular basis, at least once per day, and provide them with prompt medical assistance and treatment as required. They should report to the prison director whenever a prisoner's health is being put seriously at risk by being held in solitary confinement.

Conclusion

64. The aim of the CPT in setting out these standards is to minimise the use of solitary confinement in prisons, not only because of the mental, somatic and social damage it can do to prisoners but also given the opportunity it can provide for the deliberate infliction of ill-treatment. The CPT considers that solitary confinement should only be imposed in exceptional circumstances, as a last resort and for the shortest possible time.

Prisoners undergoing solitary confinement should be accommodated in decent conditions. Further, the measure should involve the minimum restrictions on prisoners consistent with its objective and the prisoner's behaviour, and should always be accompanied by strenuous efforts on the part of staff to resolve the underlying issues. More specifically, regimes in solitary confinement should be as positive as possible and directed at addressing the factors which have made the measure necessary. In addition, legal and practical safeguards need to be built into decision-making processes in relation to the imposition and review of solitary confinement.

Ensuring that solitary confinement is always a proportionate response to difficult situations in prisons will promote positive staff-prisoner interaction and limit the damage done to the very persons who are often already among the most disturbed members of the inmate population.



Organisational matters

Organisational matters

CPT membership

65. The CPT learned with sadness of the death on 21 October 2011 of the renowned Italian jurist, Judge Antonio Cassese. He was the Committee's very first President, holding that office from November 1989 to September 1993.

Even before becoming the CPT's President, Antonio Cassese played an important role in the negotiations leading to the adoption of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment. With his remarkable intellect and boundless energy, he then guided the Committee through its difficult first years. Together with his fellow Bureau members, the Danish surgeon Bent Sørensen and the Swiss psychiatrist Jacques Bernheim, Antonio Cassese shaped the course that the CPT would follow.

66. At the time of publication of this General Report, the CPT has 46 members. The Committee regrets that some nine years after Bosnia and Herzegovina became a Party to the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, there has still never been a member elected in respect of that country.

67. Two new members were elected to vacant seats during the period covered by this General Report, namely Baltasar Garzón Real (in respect of Spain) and Ana Racu (in respect of Moldova). Further, five sitting members were re-elected – Haritini Dipla (Greece), Lətif Hüseynov (Azerbaijan), Marzena Ksel (Poland), Anna Lamperová (Slovak Republic) and Celso Manata (Portugal).

68. The next biennial renewal of the CPT's membership is due to take place at the end of this year, the terms of office of 23 members of the Committee expiring on 19 December 2011. To date, elections for 11 of the seats concerned have taken place. The CPT hopes that elections for the remaining 12 seats will take place in the near future, as this will greatly facilitate the planning of the Committee's visits for the following year. In this connection, the CPT is concerned to note that lists of candidates in respect of two countries (Latvia and Montenegro) have not yet been forwarded to the Bureau of the Parliamentary Assembly.

69. Given the challenging and specialised nature of the CPT's activities, it is essential that the Committee continues to have a highly qualified membership in terms of relevant professional expertise and empirical experience. The effectiveness of the CPT will ultimately depend on the quality of its members.

The importance of this question was emphasised by the Parliamentary Assembly in its Resolution 1808 (2011) on Strengthening torture prevention mechanisms in Europe, national delegations to the Assembly being invited to make the procedures for selecting candidates to the CPT more transparent and better suited to the needs of the Committee, according to the indications in Assembly Resolution 1540 adopted in 2007. The CPT wishes to reiterate its full support for Resolution 1540, according to which national selection procedures should include public calls for candidatures, consultation on candidates with both State and non-governmental bodies, and interviews with shortlisted candidates to assess their qualifications, motivation and availability, as well as language skills.

The CPT also welcomes the stipulation in paragraph 4 of Resolution 1808, that "If it is considered that a candidate may have a conflict of interest, the person in question shall be required to undertake in writing that, if elected, he or she will relinquish the functions that may give rise to such a conflict".

70. At present, there is on the whole a good spread of professional experience within the CPT's membership. That said, the Committee still needs more members with first-hand knowledge of the work of law enforcement agencies. It would also be helpful to have more members from the medical profession with relevant forensic skills (in particular as regards the observing and recording of physical injuries).

71. The number of women among the CPT's membership stands at 19 out of 46. Consequently, applying the "less-than-40 %" criterion used by the Parliamentary Assembly in Resolution 1540, neither sex is currently under-represented in the Committee.

Bureau of the CPT

72. During the CPT's March 2011 meeting, elections were held for the Bureau of the Committee. Lətif Hüseynov, Professor of Public International Law at Baku State University, was elected as the CPT's President. Vladimir Ortakov, Psychiatric Consultant at the Sistina Clinical Hospital in Skopje, was elected as the Committee's 1st Vice-President, and Haritini Dipla, Professor of International Law at Athens University, was re-elected as the Committee's 2nd Vice-President.

CPT secretariat

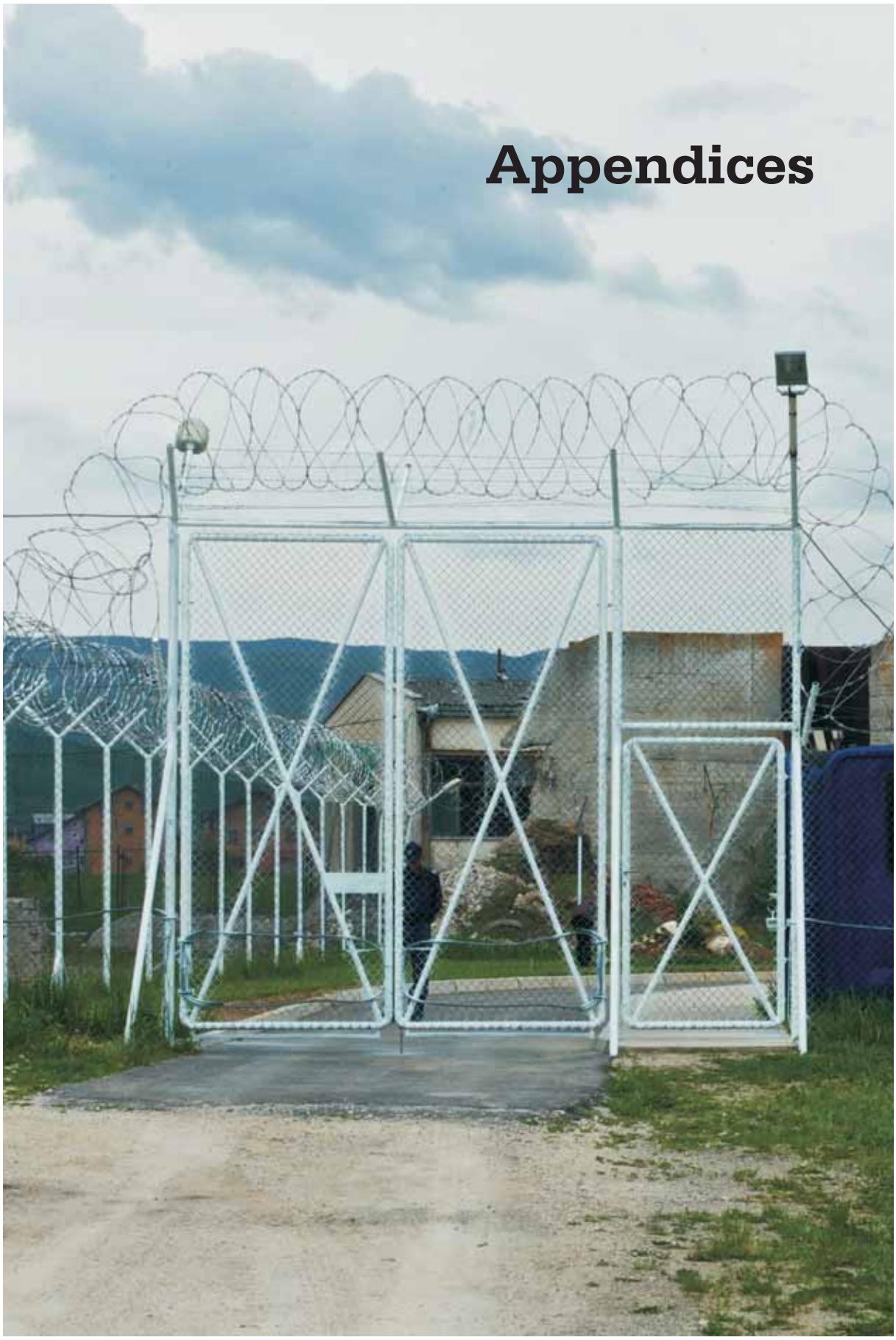
73. Several experienced administrators have left the CPT's secretariat over the last twelve months following their appointment to posts or positions in other parts of the Organisation. Petya Nestorova, the former Head of Division 2, left in October 2010 to head the secretariat of the Council of Europe Convention on action against trafficking in human beings, and Caterina Bolognese and Marco Leidekker left in March 2011 to head the Council of Europe's Offices in Tbilisi and Tirana respectively. Further, another experienced administrator, Muriel Iseli, has recently taken unpaid leave. The process of finding replacements is already well advanced, and should be completed early next year. However, as already indicated (see paragraph 2), this significant turnover of staff has inevitably acted as a brake on the Committee's visiting activities during the period covered by this General Report.

In the light of these staff developments, there has been a modest reorganisation of the operational divisions; an updated organigram of the CPT's secretariat is set out in Appendix 5.

74. It remains the case that one of the administrators in the CPT's secretariat occupies a "position" (i.e. an employment established for a fixed term). As has been stressed in previous General Reports, to assign a position to the CPT's secretariat is not consistent with the permanent and specialised nature of the Committee's activities. More specifically, the CPT wishes to avoid the risk of making a considerable investment in training a staff member for work with the Committee only to see the person concerned then leave, simply because a post becomes available in another department. This has already happened twice in recent years. The CPT therefore reiterates its request that the position in its secretariat be either transformed into a post or exchanged with a post from elsewhere in the Organisation.

75. The CPT has been requesting for a decade now that each of the three operational divisions in its secretariat be provided with a B4 official; to date, only one of the divisions has the benefit of such an official. The Committee wishes to stress once again that these officials would be able to perform a range of support tasks, thereby ensuring that optimal use is made of the existing complement of administrators (which the CPT is not seeking to have increased). The CPT very much hopes that it will be possible to meet this long-standing request, in the context of the current re-organisation of the Council of Europe's secretariat.

Appendices



1. The CPT's mandate and modus operandi

The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) was set up under the 1987 Council of Europe Convention of the same name (hereinafter "the Convention"). According to Article 1 of the Convention:

"There shall be established a European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment... The Committee shall, by means of visits, examine the treatment of persons deprived of their liberty with a view to strengthening, if necessary, the protection of such persons from torture and from inhuman or degrading treatment or punishment."

The work of the CPT is designed to be an integrated part of the Council of Europe system for the protection of human rights, placing a proactive non-judicial mechanism alongside the existing reactive judicial mechanism of the European Court of Human Rights.

The CPT implements its essentially preventive function through two kinds of visits – periodic and ad hoc. Periodic visits are carried out to all Parties to the Convention on a regular basis. Ad hoc visits are organised in these States when they appear to the Committee "to be required in the circumstances".

When carrying out a visit, the CPT enjoys extensive powers under the Convention: access to the territory of the State concerned and the right to travel without restriction; unlimited access to any place where persons are deprived of their liberty, including the right to move inside such places without restriction; access to full information on places where persons deprived of their liberty are being held, as well as to other information available to the State which is necessary for the Committee to carry out its task.

The Committee is also entitled to interview in private persons deprived of their liberty and to communicate freely with anyone whom it believes can supply relevant information.

Each Party to the Convention must permit visits to any place within its jurisdiction "where persons are deprived of their liberty by a public authority". The CPT's mandate thus extends beyond prisons and police stations to encompass, for example, psychiatric institutions, detention areas at military barracks, holding centres for asylum seekers or other categories of foreigners, and places in which young persons may be deprived of their liberty by judicial or administrative order.

Two fundamental principles govern relations between the CPT and Parties to the Convention – co-operation and confidentiality. In this respect, it should be emphasised that the role of the Committee is not to condemn States, but rather to assist them to prevent the ill-treatment of persons deprived of their liberty.

After each visit, the CPT draws up a report which sets out its findings and includes, if necessary, recommendations and other advice, on the basis of which a dialogue is developed with the State concerned. The Committee's visit report is, in principle, confidential; however, almost all States have chosen to waive the rule of confidentiality and publish the report.

2. Signatures and ratifications of the Convention establishing the CPT[12]

Council of Europe member States	Date of signature	Date of ratification	Date of entry into force
Albania	02/10/1996	02/10/1996	01/02/1997
Andorra	10/09/1996	06/01/1997	01/05/1997
Armenia	11/05/2001	18/06/2002	01/10/2002
Austria	26/11/1987	06/01/1989	01/05/1989
Azerbaijan	21/12/2001	15/04/2002	01/08/2002
Belgium	26/11/1987	23/07/1991	01/11/1991
Bosnia and Herzegovina	12/07/2002	12/07/2002	01/11/2002
Bulgaria	30/09/1993	03/05/1994	01/09/1994
Croatia	06/11/1996	11/10/1997	01/02/1998
Cyprus	26/11/1987	03/04/1989	01/08/1989
Czech Republic	23/12/1992	07/09/1995	01/01/1996
Denmark	26/11/1987	02/05/1989	01/09/1989
Estonia	28/06/1996	06/11/1996	01/03/1997
Finland	16/11/1989	20/12/1990	01/04/1991
France	26/11/1987	09/01/1989	01/05/1989
Georgia	16/02/2000	20/06/2000	01/10/2000
Germany	26/11/1987	21/02/1990	01/06/1990
Greece	26/11/1987	02/08/1991	01/12/1991
Hungary	09/02/1993	04/11/1993	01/03/1994
Iceland	26/11/1987	19/06/1990	01/10/1990
Ireland	14/03/1988	14/03/1988	01/02/1989
Italy	26/11/1987	29/12/1988	01/04/1989
Latvia	11/09/1997	10/02/1998	01/06/1998
Liechtenstein	26/11/1987	12/09/1991	01/01/1992
Lithuania	14/09/1995	26/11/1998	01/03/1999
Luxembourg	26/11/1987	06/09/1988	01/02/1989
Malta	26/11/1987	07/03/1988	01/02/1989
Moldova	02/05/1996	02/10/1997	01/02/1998
Monaco	30/11/2005	30/11/2005	01/03/2006
Montenegro			06/06/2006[a]
Netherlands	26/11/1987	12/10/1988	01/02/1989
Norway	26/11/1987	21/04/1989	01/08/1989
Poland	11/07/1994	10/10/1994	01/02/1995
Portugal	26/11/1987	29/03/1990	01/07/1990
Romania	04/11/1993	04/10/1994	01/02/1995
Russian Federation	28/02/1996	05/05/1998	01/09/1998
San Marino	16/11/1989	31/01/1990	01/05/1990
Serbia	03/03/2004	03/03/2004	01/07/2004
Slovakia	23/12/1992	11/05/1994	01/09/1994
Slovenia	04/11/1993	02/02/1994	01/06/1994
Spain	26/11/1987	02/05/1989	01/09/1989
Sweden	26/11/1987	21/06/1988	01/02/1989
Switzerland	26/11/1987	07/10/1988	01/02/1989
"The former Yugoslav Republic of Macedonia"	14/06/1996	06/06/1997	01/10/1997
Turkey	11/01/1988	26/02/1988	01/02/1989
Ukraine	02/05/1996	05/05/1997	01/09/1997
United Kingdom	26/11/1987	24/06/1988	01/02/1989

a. On 14 June 2006, the Committee of Ministers of the Council of Europe agreed that the Republic of Montenegro was a Party to the Convention with effect from 6 June 2006, the date of the Republic's declaration of succession to the Council of Europe Conventions of which Serbia and Montenegro was a signatory or party.

12. The European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (ECPT) is open for signature by the member States of the Council of Europe. Since 1 March 2002, the Committee of Ministers of the Council of Europe has been able to invite any non-member State of the Council of Europe to accede to the Convention.

3. The CPT's field of operations

Geographical scope

Note: This is an unofficial representation of States bound by the Convention. For technical reasons it has not been possible to show the entire territory of certain of the States concerned.

States bound by the Convention

Albania
Andorra
Armenia
Austria
Azerbaijan
Belgium
Bosnia and Herzegovina
Bulgaria
Croatia
Cyprus
Czech Republic
Denmark
Estonia
Finland
France
Georgia
Germany
Greece
Hungary
Iceland
Ireland
Italy
Latvia
Liechtenstein
Lithuania
Luxembourg
Malta
Moldova
Monaco
Montenegro
Netherlands
Norway
Poland
Portugal
Romania
Russian Federation
San Marino
Serbia
Slovakia
Slovenia
Spain
Sweden
Switzerland
"The former Yugoslav Republic of Macedonia"
Turkey
Ukraine
United Kingdom

47 States; prison population: 1 814 800 prisoners

Main source: Council of Europe Annual Penal Statistics (SPACE I 2009.1); data as at 1 September 2009

It should be noted that, as well as prisons, the CPT's mandate covers all other categories of places where persons are deprived of their liberty: police establishments, detention centres for juveniles, military detention facilities, holding centres for aliens, psychiatric hospitals, homes for the elderly, etc.

4. CPT members

in order of precedence – as at 15 October 2011

Name	Elected in respect of	Term of office expires
Mr Lətif HÜSEYNOV, President	Azerbaijan	19/12/2015
Mr Vladimir ORTAKOV, 1st Vice-President	"the former Yugoslav Republic of Macedonia"	19/12/2011
Ms Haritini DIPLA, 2nd Vice-President	Greece	19/12/2015
Mr Marc NÈVE	Belgium	19/12/2011
Mr Petros MICHAELIDES	Cyprus	19/12/2011
Mr Mario FELICE	Malta	19/12/2011
Mr Pétur HAUKSSON	Iceland	19/12/2011
Mr Mauro PALMA	Italy	19/12/2011
Mr Eugenijus GEFENAS	Lithuania	19/12/2011
Mr Jean-Pierre RESTELLINI	Switzerland	19/12/2013
Ms Marija DEFINIS GOJANOVIĆ	Croatia	19/12/2013
Ms Isolde KIEBER	Liechtenstein	19/12/2013
Mr Joan-Miquel RASCAGNERES	Andorra	19/12/2011
Mr Celso José DAS NEVES MANATA	Portugal	19/12/2015
Mr Jørgen Worsaae RASMUSSEN	Denmark	19/12/2013
Mr Antonius Maria VAN KALMTHOUT	Netherlands	19/12/2013
Ms Elena SEREDA	Russian Federation	19/12/2011
Mr George TUGUSHI	Georgia	19/12/2013
Mr Wolfgang HEINZ	Germany	19/12/2013
Mr Tim DALTON	Ireland	19/12/2011
Mr Ivan JANKOVIĆ	Serbia	19/12/2013
Ms Olivera VULIĆ	Montenegro	19/12/2011
Mr Xavier RONSIN	France	19/12/2013
Ms Sonja KURTÉN-VARTIO	Finland	19/12/2011
Mr Dan DERMENGIU	Romania	19/12/2011
Ms Anna ŠABATOVÁ	Czech Republic	19/12/2011
Ms Maria Rita MORGANTI	San Marino	19/12/2011
Ms Ilvija PŪCE	Latvia	19/12/2011
Mr Arman VARDANYAN	Armenia	19/12/2011
Ms Dajena KUMBARO	Albania	19/12/2011
Ms Marzena KSEL	Poland	19/12/2015
Ms Anna LAMPEROVÁ	Slovak Republic	19/12/2015
Mr Stefan KRAKOWSKI	Sweden	19/12/2013
Mr Vincent THEIS	Luxembourg	19/12/2013
Ms Yakin ERTÜRK	Turkey	19/12/2013
Mr Georg HØYER	Norway	19/12/2013
Mr James MCMANUS	United Kingdom	19/12/2013
Ms Nadia POLNAREVA	Bulgaria	19/12/2013
Ms Anna MOLNÁR	Hungary	19/12/2013
Ms Marika VÄLI	Estonia	19/12/2013
Ms Branka ZOBEC HRASTAR	Slovenia	19/12/2013
Ms Julia KOZMA	Austria	19/12/2013
Mr Régis BERGONZI	Monaco	19/12/2013
Mr Mykola GNATOVSKYY	Ukraine	19/12/2013
Ms Ana RACU	Moldova	19/12/2013
Mr Baltasar GARZÓN REAL	Spain	19/12/2013

Six members of the CPT do not appear in this photograph.

5. CPT secretariat

Central section
Mr Trevor STEVENS, Executive Secretary
Mr Fabrice KELLENS, Deputy Executive Secretary
Secretariat
Ms Antonella NASTASIE
Ms Nadine SCHAEFFER
Mr Patrick MÜLLER, Research, information strategies and media contacts
Ms Claire ASKIN, Archives, publications and documentary research
Ms Morven TRAIN, Administrative, budgetary and staff questions

Divisions responsible for visits[13]

Division 1		
Mr Michael NEURAUTER, Head of Division	Albania	Luxembourg
Mr Elvin ALIYEV	Austria	Malta
Mr Petr HNATIK	Belgium	Norway
Mr Julien ATTUIL	Czech Republic	San Marino
Ms Yvonne HARTLAND, Administrative Assistant	Estonia	Slovakia
Secretariat	Hungary	Slovenia
Ms Nelly TASNADI	Italy	Turkey
	Latvia	
	Lithuania	

Division 2		
Mr Borys WODZ, Head of Division	Armenia	Moldova
Mr Johan FRIESTEDT	Azerbaijan	Monaco
Ms Isabelle SERVOZ-GALLUCCI	Bulgaria	Poland
Ms Almut SCHRÖDER	Denmark	Romania
Secretariat	Finland	Russian Federation
Ms Natia MAMISTVALOVA	France	Sweden
	Georgia	Ukraine
	Iceland	

Division 3		
Mr Hugh CHETWYND, Head of Division	Andorra	Netherlands
Ms Stephanie MEGIES	Bosnia and Herzegovina	Portugal
Mr Cristian LODA	Croatia	Serbia
...	Cyprus	Spain
Secretariat	Germany	Switzerland
Ms Diane PÉNEAU	Greece	"The former Yugoslav
	Ireland	Republic of Macedonia"
	Liechtenstein	United Kingdom
	Montenegro	

13. The Executive and Deputy Executive Secretaries are directly involved in the operational activities of the divisions concerning certain countries.

Four members of the CPT's Secretariat do not appear in this photograph.

6. Publication of CPT visit reports

as at 15 October 2011

States	Visits	Reports sent	Reports published
Albania	10	10	8
Andorra	2	2	2
Armenia	5	5	5
Austria	5	5	5
Azerbaijan	5	5	2
Belgium	5	5	5
Bosnia and Herzegovina	5	5	3
Bulgaria	7	7	6
Croatia	3	3	3
Cyprus	5	5	4
Czech Republic	6	6	5
Denmark	4	4	4
Estonia	4	4	4
Finland	4	4	4
France	11	11	10
Georgia	5	5	5
Germany	6	7 [a]	5
Greece	10	10	9
Hungary	6	6	6
Iceland	3	3	3
Ireland	5	5	5
Italy	9	9	8
Latvia	5	5	5
Liechtenstein	3	3	3
Lithuania	4	4	4
Luxembourg	4	4	4
Malta	6	6	6
Moldova	12	12 [b]	9
Monaco	1	1	1
Montenegro	1	1	1
Netherlands	7	7	7
Norway	5	4	4
Poland	4	4	3
Portugal	7	7	7
Romania	9	8 [c]	7 [d]
Russian Federation	21	18 [e]	1
San Marino	3	3	3
Serbia	5 [f]	6 [g]	4
Slovakia	4	4	4
Slovenia	3	3	3
Spain	12	11	10
Sweden	5	5	5
Switzerland	5	5	5
"The former Yugoslav Republic of Macedonia"	9	9	8
Turkey	22	20 [h]	20 [h]
Ukraine	7	7	6
United Kingdom	15	18 [i]	15

a. Including one report drawn up in pursuance of the exchange of letters between the ICTY and the Council of Europe dated 7 and 24 November 2000.
b. Covering eleven visits.
c. Covering the nine visits.
d. Covering eight visits.
e. Covering the twenty-one visits.
f. Organised in September 2004 to Serbia and Montenegro, in March 2007 and in June 2010 to Kosovo and in November 2007 and February 2011 to Serbia.
g. Covering the five visits. Including three reports on Kosovo (two addressed to UNMIK and one to the Secretary General of NATO).
h. Covering the twenty-two visits.
i. Including three reports drawn up in pursuance of the exchange of letters between the ICTY and the Council of Europe dated 7 and 24 November 2000.

7. Countries and places of detention visited by CPT delegations; 2010-2011

Periodic visits

Bosnia and Herzegovina

05/04/2011 - 14/04/2011

Police establishments

Federation of Bosnia and Herzegovina

- Federal Directorate of the Police, Sarajevo
- Goražde Police Station, Canton of Bosna Podrinje
- Konjic Police Station, Canton of Herzegovina-Neretva
- Mostar Centar Police Station, Canton of Herzegovina-Neretva
- Novo Sarajevo Police Station, Canton of Sarajevo
- Sarajevo Centar Police Station, Canton of Sarajevo

Republika Srspka

- Banja Luka Central Police Station
- Banja Luka Laktaši Police Station
- Bosanska Gradiška Police Station
- Foča Police Station
- Istočno Sarajevo Police Station
- Sokolac Police Station

Immigration detention centres

State of Bosnia and Herzegovina

- Lukavica immigration detention centre

Prison establishments

State of Bosnia and Herzegovina

- Pre-trial detention centre, Sarajevo

Federation of Bosnia and Herzegovina

- Remand section of Mostar Prison
- Sarajevo Remand Prison
- Zenica Closed Prison (high-security unit)

Republika Srpska

- Banja Luka Prison
- Doboj Prison
- Foča Closed Prison
- Istočno Sarajevo Prison (remand section)

Prosecutor's Offices

Republika Srpska

- Special Prosecutor's Office for Combating Organised Crime, Banja Luka
- Istočno Sarajevo District Prosecutor's Office

Psychiatric institutions

Federation of Bosnia and Herzegovina

- Forensic Psychiatric Annexe in Zenica Prison

Republika Srpska

- Sokolac Psychiatric Clinic

Social care homes

Federation of Bosnia and Herzegovina

- Fojnica "Drin" Home for Mentally Disabled Persons

Bulgaria

18/10/2010 - 29/10/2010

Establishments under the Ministry of the Interior

- Balchik Police Directorate
- 5th District Police Directorate, Plovdiv
- 6th District Police Directorate, Plovdiv
- 3rd District Police Directorate, Sofia
- 8th District Police Directorate, Sofia
- 9th District Police Directorate, Sofia
- 1st District Police Directorate, Varna
- 2nd District Police Directorate, Varna
- Home for Temporary Placement of Adults, Varna
- Home for Temporary Placement of Minors, Varna
- Sobering-up centre, Varna
- Home for Temporary Placement of Foreign Nationals, Busmantsi

Establishments under the Ministry of Justice

- Lovech Prison Hospital
- Plovdiv Prison
- Varna Prison

Investigation detention facilities at:

- Balchik
- Lovech
- Plovdiv
- Sofia
- Varna
- Veliko Turnovo

Establishments under the Ministry of Health

- Karvuna State Psychiatric Hospital
- Lovech State Psychiatric Hospital (forensic ward)

Establishments under the Ministry of Labour and Social Policy

- Home for men with intellectual retardation, Oborishte, Valchi Dol municipality
- Home for men with psychiatric disorders, Pastra, Rila municipality

Czech Republic

07/09/2010 - 16/09/2010

Establishments under the Ministry of the Interior

- Chomutov District Police Headquarters
- Hradec Králové District Police Headquarters
- Kladno Police Station
- Kladno-Kročehlavy District Police Headquarters
- Pardubice District Police Headquarters
- Prague-Kongresová Regional Police Headquarters
- Rychnov nad Kněžnou District Police Headquarters
- Ústí nad Labem District Police Headquarters
- Reception Centre for Asylum-Seekers at Prague-Ruzyně International Airport
- Aliens Police Station at Prague-Ruzyně International Airport (transit zone)

Establishments under the Ministry of Justice

- Hradec Králové Remand Prison
- Pardubice Prison
- Prague-Ruzyně Prison (remand section)
- Teplice Remand Prison
- Všehrdy Prison (units for juveniles)

Establishments under the Ministry of Health

- Horní Beřkovice Psychiatric Hospital

Establishments under the Ministry of Education

- Dečín-Boletice Educational Institute for Youth and Children

France

28/11/2010 - 10/12/2010

Establishments under the Ministry of the Interior, Overseas Affairs, Territorial Communities and Immigration

- Reception, Research and Judicial Investigation Service, 18th administrative district, Paris
- Béthune Police Headquarters (Pas-de-Calais)
- Bobigny Police Headquarters (Seine-Saint-Denis)
- Lille Police Headquarters (Nord)
- Rouen Police Headquarters (Seine Maritime)
- Vénissieux/Saint-Fons Police Headquarters (Rhône)
- Territorial Brigade of the National Gendarmerie, Saint-Pol-sur-Ternoise (Pas-de-Calais)
- Administrative Holding Centre for Foreign Nationals, Paris-Vincennes
- Administrative Holding Centre for Foreign Nationals, Rouen-Oissel (Seine Maritime)

Establishments under the Ministry of Justice and Liberties

- Le Havre Prison (Seine Maritime)
- Poissy Prison (Yvelines)

Establishments under the Ministry of Labour, Employment and Health

- Paul Guiraud Hospital Complex in Villejuif (Val-de-Marne), including the unit for difficult patients (UMD) Henri Colin
- Val de Lys-Artois Public Mental Health Establishment, Saint-Venant (Pas-de-Calais)
- Le Vinatier Specialised Hospital in Bron (Rhône), in particular the specially adapted hospital unit (UHSA) for prisoners in need of psychiatric care and the intensive psychiatric care unit (USIP)

Germany

25/11/2010 - 07/12/2010

Baden-Württemberg

- Freiburg North Police Station
- Stuttgart Police Headquarters
- Freiburg Prison (Unit for preventive detention)
- Schwäbisch Gmünd Prison for women (including the detached unit for male prisoners in Ellwangen)

Bavaria

- Munich-Perlach Police Station 24
- Munich-Stadelheim Prison (Unit for male immigration detainees and detached unit for women)

Berlin

- Federal Police Station, Central Railway Station
- District Police Headquarters 3
- Berlin Juvenile Detention Centre

North-Rhine Westphalia

- Düsseldorf Airport Federal Police Station, transit zone
- Cologne Police Headquarters
- Cologne-Centre Police Station
- Cologne Prison (Units for juveniles and young adults and high-security unit)
- Herford Juvenile Prison
- Rheine Forensic Psychiatric Clinic

Saxony

- Leipzig Police Headquarters
- Leipzig Prison

Saxony-Anhalt

- Burg Prison (Unit for preventive detention)

Moldova

01/06/2011 - 10/06/2011

Establishments under the Ministry of Internal Affairs

- Bălți Police Station and Temporary Detention Isolator
- Directorate General of Operational Services, Chișinău
- Directorate of Criminal Investigations, Chișinău
- Temporary Detention Isolator of the Chișinău Police Headquarters
- Ciocana District Police Station, Chișinău
- Rîșcani District Police Station, Chișinău
- Hîncești Police Station and Temporary Detention Isolator
- Temporary Placement Centre for foreign nationals, Chișinău

Establishments under the Ministry of Justice

- Penitentiary establishment No. 11, Bălți
- Penitentiary establishment No. 17, Rezina (including the unit for life-sentenced prisoners)
- Psychiatric Unit of the Pruncul Prison Hospital

Establishments under the Ministry of Health

- Orhei Psychiatric Hospital
- Secure Ward of Chișinău Psychiatric Hospital (Units 31 and 37)

Establishments under the Ministry of Labour, Social Protection and Family

- Orhei Psychoneurological Home for boys

Norway

18/05/2011 - 27/05/2011

Police establishments

- Bergen District Police Headquarters
- Oslo District Police Headquarters
- Grenland District Police Headquarters, Skien
- Trandum Aliens Holding Centre

Prisons

- Bergen Prison
- Bredtveit Prison
- Eidsberg Prison
- Ila Prison (Unit for Preventive Detention)
- Oslo Prison
- Skien Prison

Psychiatric establishments

- Regional Department of Forensic and High-Security Psychiatry, Oslo University Hospital (Dikemark)

Romania

05/09/2010 - 16/09/2010

Establishments under the Ministry of the Administration and the Interior

- Central detention facility (No. 1) at Bucharest Municipal Police Headquarters
- Detention facility No. 3 at Bucharest Police Station Section 5
- Detention facility No. 8 at Bucharest Police Station Section 13
- Police Station Section 3, Bucharest
- Police Station Section 5, Bucharest
- Detention facility at Dolj County Police Headquarters, Craiova
- Ilfov Police Station

Establishments under the Ministry of Justice

- Unit for Juveniles at Bucharest-Rahova Prison
- Craiova Prison for Juveniles and Young Adults (in particular, the situation of juveniles)
- Poarta Albă Prison, Units II and IV (for prisoners under the maximum security regime, prisoners sentenced to life imprisonment or to long sentences, and vulnerable prisoners)
- Găeşti Rehabilitation Centre
- Poarta Albă Prison Hospital

Serbia

01/02/2011 - 11/02/2011

Establishments under the Ministry of the Interior

- Aleksinac Police Station
- Metropolitan Police Headquarters, Belgrade
- Novi Belgrade Police Station, Belgrade
- Savski Venac Police Station, Belgrade
- Voždovac Police Station, Belgrade
- Zemun Police Station, Belgrade
- Jagodina Police Station
- Jagodina Traffic Police Station
- Niš District Police Unit
- Požarevac District Police Unit
- Požarevac Police Station
- Smederevo Police Station
- Smederevska Palanka Police Station

Establishments under the Ministry of Justice

- Belgrade District Prison
- Požarevac-Zabela Correctional Institution
- Požarevac Correctional Institution for Women
- Special Prison Hospital, Belgrade

Establishments under the Ministry of Health

- Dr Laza Lazarević Special Psychiatric Hospital, Belgrade
- Special Psychiatric Hospital, Gornja Toponica, Niš

Establishments under the Ministry of Labour and Social Policy

- Educational Institution for Juveniles, Niš

Spain

31/05/2011 - 13/06/2011

Establishments under the Ministry of the Interior of Spain

National Police

- National Police Station, Cádiz
- Central registry of detained persons, Moratalaz, Madrid
- National Police Station, Moratalaz, Madrid
- National Police Station, Puente de Vallecas, Madrid
- National Police Station, Puerto de Santa María

Guardia Civil

- Detention Unit of the Central Section of the Information Service, Jefatura, Madrid
- Tres Cantos Station, Madrid
- Las Rozas Station, Madrid

Prison establishments[14]

- Córdoba Prison
- Madrid IV Prison (Navalcarnero)
- Nanclares de la Oca Prison
- Puerto III Prison Cadiz

Foreigner detention centres

- Zona Franca, Barcelona
- Aluche, Madrid

Establishments under the Autonomous Regional Government of the Basque Country

- General Headquarters and Police Academy Arkaute, Basque Autonomous Police (Ertzaintza), Vitoria

Establishments under the Autonomous Regional Government of Catalonia

Catalan Autonomous Police (Mossos d'Esquadra)

- Mossos d'Esquadra District Station "Les Corts", Barcelona
- Mossos d'Esquadra District Station Badalona, Barcelona
- Mossos d'Esquadra Juvenile Detention Centre, Ciutat de la Justícia, Barcelona
- Mossos d'Esquadra District Station, Granollers
- Mossos d'Esquadra District Station, l'Hospitalet

Prisons

- Penitentiary Centre Brians 1
- Penitentiary Centre Joves (Quatre Camins)
- Penitentiary Centre Lledoners
- Penitentiary Centre for men ("la Modelo"), Barcelona

Juvenile Institutions

- Alzina Educational Centre

14. Madrid V Prison (Soto del Real) and Madrid II Prison (Alcalá-Meco – men) were also visited, for the purpose of interviewing specific prisoners.

"The former Yugoslav Republic of Macedonia"

21/09/2010 - 01/10/2010

Establishments under the Ministry of the Interior

- Gevgelija Police Station
- Gostivar Police Station
- Kavadarci Police Station
- Kumanovo Police Station
- Centar Police Station, Skopje
- Bit Pazar Police Station, Skopje
- Gazi Baba Police Station, Skopje
- Tetovo Police Station
- Veles Police Station

Establishments under the Ministry of Justice

- Idrizovo Prison
- Skopje Remand Prison
- Štip Prison
- Tetovo Prison (remand section)
- "Tetovo" Educational-Correctional Institution in Skopje Prison

Institutions under the Ministry of Health

- Demir Hisar Psychiatric Hospital
- Negorci Psychiatric Hospital
- Skopje Psychiatric Hospital
- Closed Ward for Prisoners at Skopje Clinical Centre

Institutions under the Ministry of Labour and Social Policy

- Demir Kapija Special Institution for mentally disabled persons

Institution under the Ministry of Education

- University Institute of Forensic Medicine

Ad hoc visits

Albania

30/01/2011 - 01/02/2011

Prisons

- Tirana Prison No. 302
- Tirana Prison No. 313

In addition, the delegation held consultations with police officers and examined relevant records at the Police Directorate General and Police Stations Nos. 1 and 2 in Tirana.

Greece

20/01/2011 - 27/01/2011

Establishments under the Ministry of Citizen's Protection

Attica Region

- Agio Pantaleimons Police Station, Athens
- Acropolis Police Station, Athens
- Alexander Street Police Headquarters, Athens
- Aspropyrgos Holding Facility for Irregular Migrants, Athens
- Athens Airport Holding Areas
- Elefsinas Police Station, Athens
- Omonia Police Station, Athens
- Piraeus Holding Facility for Irregular Migrants

Central Greece Region

- Amfissa Police Transfer Centre
- Lamia Police Transfer Centre

Evros Region

- Alexandroupolis Police Station
- Feres Border Guard Station
- Filakio Special holding facility for illegal immigrants
- Neo Himonio Border Guard Station
- Orestiada Police Station
- Soufli Police and Border Guard Station
- Tychero Border Guard Station

Macedonia Region

- Dodecanesis Street Police Station, Thessaloniki
- Menemene Police Station, Thessaloniki
- Monasterou Police Station, Thessaloniki

Peloponnesus Region

- Argos Police Station
- Sparta Police Station
- Sparta Special Holding Facility for irregular migrants
- Tripoli Police Station

Establishments under the Ministry of Justice

- Amfissa Prison
- Domokos Prison
- Korydallos Men's Prison
- Korydallos Women's Remand Prison
- Thessaloniki Prison
- Thiva Women's Prison
- Tripoli Prison

Russian Federation [North Caucasian region]

27/04/2011 - 06/05/2011

Republic of Dagestan

- Khasavyurt City Internal Affairs Division and IVS (temporary detention facility)
- Kizilyurt City Internal Affairs Division and IVS
- IVS of the Department of Internal Affairs of the City of Makhachkala
- Makhachkala Internal Affairs Division for Transport
- Centre for Combating Extremism of the Ministry of Internal Affairs of the Republic of Dagestan, Makhachkala
- Directorate of the Federal Drug Control Service (FSKN) for the Republic of Dagestan, Makhachkala
- SIZO No. 1, Makhachkala

Chechen Republic

- IVS of the Ministry of Internal Affairs of the Chechen Republic, Grozny
- IVS of the Temporary Operational task force of Agencies and Units (VOGOiP) of the Ministry of Internal Affairs of Russia, located on the premises of the Operational/Search Bureau (ORB-2) of the Main Department of the Ministry of Internal Affairs responsible for the North Caucasian Federal Region, Grozny
- Leninskyi District Division of Internal Affairs and IVS, Grozny
- Zavodskoy District Division of Internal Affairs and IVS, Grozny
- SIZO No. 1, Grozny

Republic of North Ossetia-Alania

- Prigorodnyi District Division of Internal Affairs and IVS, Oktyabrskoye
- IVS of the Ministry of Internal Affairs of the Republic of North Ossetia-Alania, Vladikavkaz
- Department of Internal Affairs for the City of Vladikavkaz
- District Division of Internal Affairs No. 2, Vladikavkaz
- SIZO No. 1, Vladikavkaz
- Federal SIZO No. 6, Vladikavkaz

Further, in the context of allegations of the unlawful detention of persons, the delegation visited the Headquarters of the Special Purpose Police Unit (OMON) of the Ministry of Internal Affairs for the Chechen Republic, located in Grozny.

8. Public statement concerning Greece

(made on 15 March 2011)

1. Since 1993, the CPT has carried out ten visits to Greece. The Committee has consistently striven to pursue a constructive dialogue with the Greek authorities, repeatedly putting forward recommendations about the treatment and conditions of detention of persons deprived of their liberty. However, the persistent lack of action to improve the situation in the light of the Committee's recommendations, as regards the detention of irregular migrants and the state of the prison system, has left the Committee with no other choice but to resort to the exceptional measure of issuing this public statement.

2. Already in the report on its visit to Greece in 1997, the CPT expressed concern about the approach of the Greek authorities towards the detention of irregular migrants. The Committee made it clear that detaining irregular migrants "for weeks or even months in very poorly furnished and inadequately lit and/or ventilated premises, without offering them either the possibility of daily outdoor exercise or a minimum of activities with which to occupy themselves during the day, is unacceptable and could even amount to inhuman and degrading treatment."

3. The reports on the 2005, 2007, 2008 and 2009 visits all paint a similar picture of irregular migrants being held in very poor conditions in police stations and other ill-adapted premises, often disused warehouses, for periods of up to six months, and even longer, with no access to outdoor exercise, no other activities and inadequate health-care provision. Recommendations to improve the situation nevertheless continued to be ignored. Despite significant numbers of irregular migrants entering Greece via its eastern land and sea borders over a period of years, no steps were taken to put in place a coordinated and acceptable approach as regards their detention and treatment.

4. The lack of action by the Greek authorities to implement the CPT's recommendations concerning irregular migrants led to the Committee setting in motion, in November 2008, the procedure for adopting a public statement[15]. Following the periodic visit in September 2009, this procedure was extended to cover the situation in the prison system. Indeed, the findings made during that visit revealed that the concerns raised by the CPT in previous reports had not been addressed and that in fact there had been a further deterioration in prison conditions; particular reference should be made to the severe overcrowding, in conjunction with insufficient staffing levels and poor health-care provision.

5. In January 2010, the CPT held high-level talks in Athens with the Greek authorities to impress upon them the urgency of engaging in a meaningful dialogue with the Committee and of taking action to improve the conditions in which irregular migrants and prisoners are held.

15. Article 10, paragraph 2, of the Convention establishing the CPT reads as follows: "If the Party fails to co-operate or refuses to improve the situation in the light of the Committee's recommendations, the Committee may decide, after the Party has had an opportunity to make known its views, by a majority of two-thirds of its members to make a public statement on the matter."

6. The Greek authorities have continuously asserted that action was being taken to improve the situation. For example, by letter of 23 November 2009, they informed the CPT that administrative detention of irregular migrants in police and border guard stations would be ended and that, in the future, administratively detained irregular migrants would only be accommodated in dedicated detention facilities. It was also stated that the Piraeus aliens detention facility, which the CPT had been criticising repeatedly since 1997, would be demolished in early 2010.

7. Regrettably, the findings made during the CPT's most recent visit to Greece, in January 2011, demonstrated that the information provided by the authorities was not reliable. Police and border guard stations continued to hold ever greater numbers of irregular migrants in even worse conditions. For example, at Soufli police and border guard station, in the Evros region, members of the Committee's delegation had to walk over persons lying on the floor to access the detention facility. There were 146 irregular migrants crammed into a room of 110 m^2, with no access to outdoor exercise or any other possibility to move around and with only one functioning toilet and shower at their disposal; 65 of them had been held in these deplorable conditions for longer than four weeks and a number for longer than four months. They were not even permitted to change their clothes. At times, women were placed in the detention facility together with the men. Similar conditions existed at almost all the police premises visited by the CPT's delegation. In the purpose-built Filakio special holding facility for foreigners in the Evros region, irregular migrants, including juveniles and families with young children, were kept locked up for weeks and months in filthy, overcrowded, unhygienic cage-like conditions, with no daily access to outdoor exercise. As for the Piraeus facility mentioned above, it continues to operate and, in January 2011, was holding irregular migrants in far worse conditions than those first described in the report on the 1997 visit. Likewise, Athens airport detention facility continued to hold people in conditions akin to those recently found by the European Court of Human Rights, in the case of M.S.S. v. Belgium and Greece, to be in violation of Article 3 of the European Convention on Human Rights; no action has been taken to implement the recommendations concerning this facility first put forward by the CPT in the report on its 2005 visit.

8. The CPT has emphasised time and again the need to address the structural deficiencies in Greece's detention policy, and has attempted to exercise its preventive function by recommending practical measures to ensure that all irregular migrants deprived of their liberty are held in decent conditions. However, the Committee has been met by inaction from the Greek authorities in addressing the very serious concerns raised.

9. The same is true with regard to the situation in prisons. The CPT has observed a steady deterioration in the living conditions and treatment of prisoners over the past decade. The Committee has identified a number of fundamental structural issues which serve to undermine attempts to remedy this state of affairs. They include the lack of a strategic plan to manage prisons, which are complex institutions, the absence of an effective system of reporting and supervision, and inadequate management of staff. The CPT has highlighted in its reports the unsuitable material conditions, the absence of an appropriate regime and the poor provision of health care. It has found that due to the totally inadequate staffing levels, effective control within the accommodation areas of some of the prisons visited has progressively been ceded to groups of strong prisoners. All these issues are compounded by the severe overcrowding within most Greek prisons.

10. The Greek authorities have yet to recognise that the prison system as it is currently operating is not able to provide safe and secure custody for inmates. Discussions with the prison administration in Athens indicated a lack of appreciation on their part of the actual situation in the country's prison establishments.

11. The findings of the 2011 visit confirmed that a regulated prison system, as aspired to in law, has given way to the practice of warehousing prisoners. No action has been taken to implement the CPT's repeated recommendations to improve the situation in establishments visited as regards living conditions, staffing levels, purposeful activities and aspects of health care, not to mention inter-prisoner violence. Conditions are especially worrying at Amfissa, Korydallos Men's and Korydallos Women's Prisons. Even in a new prison such as Domokos, many of the same deficiencies are replicated.

12. The CPT fully recognises the challenge faced by Greece in having to cope with a constant influx of irregular migrants in recent years. It is highly unlikely that this influx will diminish in the near future. It is of crucial importance that the international community – and particularly the European Union – assists the Greek authorities to meet this challenge. However, such support must go hand in hand with a clear demonstration by the Greek authorities of their commitment to redress the current situation. Plans and new laws must be followed up with concrete action to put in place the structural reforms required. A similar commitment by the Greek authorities is necessary for the recovery of the country's prison system.

13. The CPT's aim in making this public statement is to motivate and assist the Greek authorities to take decisive action to improve the treatment of persons deprived of their liberty in Greece, in line with the fundamental values to which Greece, as a member State of the Council of Europe and the European Union, has subscribed. In pursuit of that objective and in furtherance of its mandate, the Committee is fully committed to continuing its dialogue with the Greek authorities.

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