EXECUTIVE SUMMARY

In December 2019, the CPT visited 12 law enforcement establishments (police and gendarmerie), four prisons and one large psychiatric care establishment. It was the seventh periodic visit to France.

<u>Co-operation</u> with the French authorities during the visit was good. Nevertheless, the CPT encountered difficulties in gaining access to medical data and records of criminal procedures hearings, which were essential for the performance of its mission. Moreover, despite the recommendations made on numerous occasions by the CPT, the material conditions of detention in police establishments, the issue of prison overcrowding and the conditions in which detained persons were transferred to and treated in hospital, as well as the lack of psychiatric places for persons in care without consent, remained sources of serious concern.

Police and gendarmerie

The vast majority of the persons interviewed did not report any physical ill-treatment by members of the police force. Nevertheless, as found in the past, several people indicated to the delegation that they had been deliberately beaten by police officers during their arrest or on police premises. Allegations of insults, including of a racist or homophobic nature, were also received, as well as threats made with a weapon. The CPT is also concerned about the ground restraint technique sometimes used during arrests, which can lead to positional asphyxia. It recommends that the use of force should be strictly necessary and that no brutality would be justified once the person is under control. A "zero tolerance" message towards ill-treatment should be regularly sent to all law enforcement officers. Measures should also be taken to strengthen the fight against impunity, in particular by the permanent wearing of an identification number and the opening of rapid and effective investigations in the event of allegations of ill treatment.

The police custody regime continued to offer, in law, all the safeguards necessary against ill-treatment. However, in practice, various measures are still needed, in particular to improve the quality of notification of rights and to allow effective access to a lawyer in all circumstances.

The CPT is extremely concerned about the material conditions of detention in some of the police stations visited. Persons held in these facilities should be able to maintain decent hygiene and sleep on clean mattresses and with clean blankets. It is regrettable that no real progress has been made in equipping the security rooms in gendarmerie premises with a call system which can be used by detained persons, particularly at night.

As regards the Medico-Judicial Unit (UMJ) at the Hôtel Dieu in Paris, the CPT calls upon the French authorities to ensure that the access of persons deprived of their liberty to this establishment is no longer visible to the public. Further, it recommends that the current technique of searching for illicit substances (stool search) be discontinued immediately, as it is considered to be detrimental to the dignity of persons suspected of having transported drugs *in corpore*.

Prisons

Since 1991, the CPT has noted that prisons are overcrowded to worrying levels, with occupancy rates exceeding 200% in some establishments. This overcrowding in remand prisons is all the more striking as other establishments are under-used. At the time of the visit, almost 1,500 prisoners were sleeping on mattresses on the floor. In the three prisons visited (Bordeaux-Gradignan, Lille-Sequedin and Maubeuge), many prisoners were accommodated in two or three cells measuring less than 10 m². The CPT calls upon the French authorities to take urgent measures to ensure that each detainee has a bed and at least 4 m² of living space in a collective cell. A comprehensive strategy to reduce the prison population should be adopted, including measures to limit the number of incarcerations and to facilitate the adjustment of sentences. The Committee welcomes the drastic reduction in the prison population during the Covid-19 pandemic and asks the authorities to inform it of their intentions as to the sustainability of this situation.

During the visit, a small number of allegations of intentional violence by staff against prisoners were received, as well as a larger number of allegations of excessive use of force, including painful physical restraint techniques during placement in disciplinary cells. Inter-prisoner violence was a significant problem in some establishments (Bordeaux-Gradignan, Lille-Sequedin and Maubeuge), most often taking place in the corridors and the exercise yards. The Committee makes specific recommendations to prevent all forms of violence and ensure the safety of prisoners, including in the exercise yards.

In terms of material conditions, there was a significant difference between the establishments visited. Vendin-le-Vieil prison offered very good conditions of incarceration, whereas the other establishments were overcrowded, ageing or dilapidated: heating problems and broken windows (Bordeaux-Gradignan) or the presence of rats (Lille-Sequedin and Maubeuge). The Committee is concerned about the material conditions in the disciplinary and isolation units, whose cells were often poorly insulated, lacked natural light and whose exercise yards were too small and under-equipped. In contrast to the situation at Vendin-le-Vieil Prison, the majority of detained persons in the other establishments spent almost the entire day in their cells, with the activities on offer keeping them occupied for only a few hours a week at best.

In the two women's wards visited (Bordeaux-Gradignan and Lille-Sequedin), women prisoners were offered fewer activities and work than men in the same establishment. Movements and procedures were designed for male prisoners.

The Committee continues to be concerned about the placement of detainees in solitary confinement for prolonged periods, sometimes exceeding several years, because of its impact on mental health.

Access to somatic care was, on the whole, satisfactory, although some teams - medical in Lille-Sequedin, nursing in Maubeuge and psychiatric in Maubeuge and Vendin-le-Vieil - should be reinforced. The CPT considers that it is unacceptable that persons suffering from severe psychiatric disorders remain detained in prison for lack of transfer to adequate care facilities. The treatment of persons held in specially adapted hospital units (UHSA) is a definite step forward, but there are still not enough places in these facilities. Furthermore, the Committee once again deplores the fact that the transfer and care of detainees in hospitals are still often carried out in unacceptable conditions: almost systematic use of shackles and frequent presence of escort staff during consultations.

With regard to security measures, strip searches should be motivated by an individual assessment and carried out in stages. The report notes that there is an escalation of security measures, raising the threshold for passive security higher and higher, particularly in the radicalisation assessment and management areas and in the Vendin-le-Vieil isolation area. Measures such as opening the doors in the presence of more officers and systematically wearing body armour give a negative and potentially counterproductive image of dangerousness to all persons detained. It seems necessary to break out of this spiral and to re-establish a humane and dynamic security approach.

Psychiatry

At Cadillac Hospital, the visit focused on the forensic unit, which includes a unit for difficult patients (UMD), a specially equipped hospital unit (UHSA) and a psychiatric intensive care unit (USIP), as well as the closed general psychiatry units.

The vast majority of the patients with whom the delegation spoke felt that they were treated correctly by the health care staff, despite a perceived lack of time and availability. However, a small number of patients complained of having been subjected to abuse of language (insults and/or threats), as well as excessive use of force, most often during restraints or placements in isolation rooms, in order to control an agitated patient. The CPT regrets that the use of physical force by staff, nursing or otherwise, which may sometimes be justified, was not systematically recorded, and when it was, the data did not make it possible to demonstrate how it had been strictly necessary and applied in accordance with the principle of proportionality.

The material living conditions in the establishment were extremely disparate depending on the unit, with the most dilapidated offering little or no privacy for patients, particularly for resting or washing. The closed general psychiatric wards were under strain, suffering from a lack of beds and regular overcrowding. The CPT calls upon the authorities to ensure decent living conditions in all units, as well as an adequate number of beds in general psychiatry.

The CPT has noted the overall quality and monitoring of the medication administered to patients but reiterates its serious reservations about the way in which certain treatments are administered on the basis of pro re nata (so-called "as needed") prescriptions, more particularly intramuscular injections of short-acting tranquillisers, in cases of agitation. The CPT reiterates the correct practices that are required in such situations.

Patients in the forensic units were generally offered therapeutic activities adapted to their needs. In contrast, the CPT regrets that the treatment of patients in the closed general psychiatric wards was essentially limited to mainly/only drug treatment.

While the Committee welcomes the legal obligation, since 2016, to record the use of seclusion or restraint measures, it remains concerned that the placement of patients in seclusion remained frequent, even systematic (on admission to some units) and was often perceived by patients as a form of punishment. Moreover, seclusion was sometimes carried out in inappropriate premises, in particular without a call system. The monitoring of patients subject to seclusion and restraint measures remained largely insufficient, while their duration was excessive and/or insufficiently justified in the files. Finally, the registers consulted revealed a number of shortcomings that should be remedied in order to be able to make effective use of the data, analyse practices and pursue the stated objective of reducing the use of these measures.