

## EXECUTIVE SUMMARY

The main objective of the 2021 periodic visit was to review the measures taken by the Bulgarian authorities in response to the recommendations made by the Committee after previous visits. In this connection, particular attention was paid to the treatment and conditions of detention of persons in police custody and penitentiary establishments. The delegation also examined the treatment, conditions and legal safeguards offered to patients with psychiatric disorders, and residents of social care institutions.

### Police establishments

The great majority of the interviewed persons stated that they had been treated correctly by the police. However, the delegation again received several allegations of physical ill-treatment (mostly in Sofia). Nearly all of them concerned the excessive use of force by police officers upon apprehension, a few also referred to physical ill-treatment and psychological pressure during questioning by police officers.

As regards the fundamental safeguards against ill-treatment advocated by the CPT – namely the right to notify one's detention to a third party, the right of access to a lawyer and to a doctor, and the right to be informed of the above-mentioned rights – the Committee very much regrets the absence of any real progress in their application since the CPT's previous visits. In short, these safeguards were hardly ever applicable during the initial 24-hour police custody.

Material conditions in police directorates equipped with cells fitted with beds could generally be considered as acceptable for the maximum period of 24 hours of custody. That said, detained persons were not always given a mattress and a blanket for the night, food arrangements varied, and the level of cleanliness often left much to be desired. However, in virtually none of the police directorates were the material conditions satisfactory for any period exceeding 24 hours.

### Penitentiary establishments

The delegation carried out follow-up visits to Plovdiv and Sofia Prisons as well as to the Investigation Detention Facilities (IDF) located in Plovdiv and on G.M. Dimitrov Boulevard in Sofia; further, a first-time visit was carried out to Kremikovtsi Prison Hostel.

The CPT wishes to highlight as a positive development since the 2017 periodic visit that the prison population had further reduced in Bulgaria, and the national legal norm of 4 m<sup>2</sup> per prisoner was generally respected in the establishments visited (except at Plovdiv Prison).

The delegation received hardly any credible allegations of recent deliberate physical ill-treatment of prisoners by staff in the penitentiary establishments visited (except at Plovdiv Prison); in general, staff-prisoner relations appeared relaxed and even almost cordial at times. However, inter-prisoner violence was a problem in all the establishments visited, as also acknowledged by their management.

The (relatively) best material conditions were observed at Plovdiv IDF; the worst – i.e., extremely poor and in some areas even unacceptable – were found in some parts of Sofia Prison and in most of the accommodation at Kremikovtsi Prison Hostel.

All the penitentiary establishments visited continued (to varying extents) to be infested with cockroaches and bedbugs. Clearly, efforts made so far to eradicate the vermin had not brought any real improvement.

As regards purposeful activities on offer, some (mostly unpaid) work was offered to sentenced prisoners, as was some basic education; however, this was still far from satisfactory. As for remand prisoners, they continued to be locked in their cells for up to 23 hours per day without being offered any organized activities.

In all the penitentiary establishments visited, the health-care services were severely understaffed. Further, as had been the case in the past, none of the penitentiary establishments visited had any health-care staff present after the regular working hours and on weekends.

The delegation again observed severe problems with the supply of medication (including, in some instances, long delays and interruptions of supply). In addition, as previously, prisoners or their families had to pay for most of the medicines, for which a separate permission was required (which rendered the procedure even slower and more cumbersome).

Access to psychiatric care was very insufficient, especially given the presence of many inmates with mental health issues, some related to drug use.

Several of the establishments visited were accommodating inmates with (sometimes severe) confirmed physical and/or learning disability. However, none of the establishments offered suitable material environment, adapted equipment, appropriate care and staff attention that those prisoners required. In practice, some of the prisoners concerned were forced to rely on the help of their cellmates and other fellow prisoners for the most basic life necessities such as eating, washing, and using the toilet. The CPT recommends that the Bulgarian authorities take steps to remedy this highly unsatisfactory state of affairs.

The Committee is also concerned about the lack of progress in addressing the widespread substance use problem among prisoners and the related health issues such as HIV and hepatitis.

Furthermore, the CPT stresses once again that inadequate staff complements found in the penitentiary establishments visited can only increase the risk of violence and intimidation between prisoners. They also undermine the quality and level of the activities offered to the inmates and jeopardise the prospect of preparation for release and social rehabilitation.

### **Psychiatric establishments**

The delegation visited Kardzhali State Psychiatric Hospital for the first time, as well as Karlukovo State Psychiatric Hospital, last time visited by the CPT in 2006, and Lovech State Psychiatric Hospital, the forensic ward of which had been last time visited by the CPT in 2010.

Regarding ill-treatment of patients by staff, in Lovech and Kardzhali hospitals, although many patients were not critical of staff or even spoke positively of them, small numbers of complaints that staff would occasionally shout, push or slap patients were received by the delegation. However, in Karlukovo, a number of allegations were received that, apart from staff shouting at patients, orderlies would also push, slap and occasionally hit or kick them, with some such staff drinking alcohol whilst on duty.

As regards living conditions, the CPT delegation noted that in all three hospitals visited there had been substantial internal refurbishment with notably better conditions now being provided in Karlukovo and Lovech hospitals, compared to those found when they were last visited by the CPT.

However, despite the renovations, patients' accommodation remained generally bare, with very limited, if any, lockable personal space and a lack of privacy and personalisation. Moreover, none of the hospitals offered appropriately secure outdoor exercise areas, so patients were often restricted to one hour per day of outdoor exercise, when supervision was available.

The number of psychiatrists and other doctors represented some improvement compared to previous visits. However, the Committee remains concerned that many medical staff are approaching or beyond retirement age with no imminent replacements anticipated.

Furthermore, as during previous visits, the numbers of ward-based staff were still insufficient to offer the necessary level of personalised care and attention, and as regards multi-disciplinary clinical staff, such as psychologists, social workers, and occupational therapists, these were also notably insufficient in number to meet the many psycho-social treatment and rehabilitation needs of patients, which greatly hampered their effective therapeutic improvement.

As a result, opportunities for psychological, occupational, and creative therapies and recreation in all the hospitals visited were very limited, with most patients just laying on their beds or wandering idly around. Furthermore, many patients were not fully aware of their diagnosis and/or their medications and their side effects, nor had they apparently been sufficiently involved in their own treatment planning.

The Committee notes that seclusion, mechanical and chemical restraint of patients was practiced in all hospitals visited. There was no evidence of the widespread overuse of restraint measures and when mechanical restraint was applied, unlike during earlier visits, properly designed restraint belts were being used in all the hospitals visited. However, despite years of recommendations made by the Committee, the use of means of restraint still does not conform with international guidelines and is often recorded without respecting the relevant legal requirements or not recorded at all.

Moreover, it is of grave concern that in Kardzhali Hospital some patients (including voluntary patients) gave consistent and credible accounts to the CPT delegation of being placed alone in 4 or 5-point belt fixation to beds in seclusion rooms for over 48 hours, in incontinence pads throughout, into which they had to urinate and defecate, those pads being changed every six hours. Some patients also reported that their hands were fixed above their head, causing pain, swelling and loss of sensation in their upper limbs. Such painful interventions could be said to amount to ill-treatment.

Regarding legal safeguards, as during previous visits, a number of legally competent patients who had signed consent to hospitalisation forms and were still deemed voluntary, were nevertheless not truly consenting to their hospitalisation, stating that they wanted to leave but were not allowed to do so, and were thus *de facto* detained.

The Committee is further concerned to note that, as found during previous visits, significant numbers of patients had been identified by the Directors in all the hospitals visited as no longer requiring in-patient treatment. However, due to the continuing lack of effective community-based mental health support services, patients were remaining in inappropriate institutional environments, seemingly indefinitely, with greatly adverse effects upon their wellbeing.

## Social care homes

The delegation visited, for the first time, the social care home for persons with learning disabilities in Banya and the social care homes for persons with psychiatric disorders in Gara Lakatnik and Petkovo.

In Gara Lakatnik, the delegation received no credible allegations of physical ill-treatment of residents by staff; indeed, the atmosphere appeared generally relaxed, and a number of residents spoke positively about the staff. By contrast, in Petkovo, numerous accounts were received from residents that orderlies would insult, frequently shout, and often slap residents.

In Banya, a number of consistent allegations were received that one of the guards would shout, drink alcohol on duty, carry a wooden stick with which he would threaten residents and on occasion would hit residents, including with the stick.

As regards living conditions, the Committee notes that, following two immediate observations invoked by the CPT delegation at the end of the visit, the Bulgarian authorities took measures in Banya Home to repair the roof of one of the accommodation blocks and to renovate a wing of another block as well as to substantially improve hygienic conditions therein.

Regarding care staff, in all homes visited, despite the official staff complements being deployed, the numbers of nurses and orderlies were insufficient or totally inadequate to provide proper individual, personalised, and safe care to residents on a 24-hour basis; in this sense, the findings were similar to those of the previous visits. The Committee is also concerned to note that residents are not provided with regular and consistent psychiatric and somatic health care.

With regards to mechanical restraint and seclusion, although such measures remain illegal in social care establishments under Bulgarian law, such restrictive practices were still found to be occurring in two of the three homes visited, despite the Committee's repeated recommendations to end such practice.

For more than 25 years now, the CPT has consistently expressed its deep concern regarding a number of issues concerning the treatment, conditions and legal safeguards offered to patients with psychiatric disorders and residents of social care institutions.

However, the findings of the 2021 visit have once again demonstrated the grave long-standing problems that have not been addressed systemically. The CPT is of the view that action in this respect is long overdue and that the approach to the whole issue of mental health care and institutional social care in Bulgaria should radically change.

For these reasons, the Committee has decided to make a public statement, pursuant to Article 10, paragraph 2, of the Convention; it took this decision at its 106th plenary meeting in October 2021.