

33rd GENERAL REPORT

Activities 2023



CPT EUROPEAN COMMITTEE FOR THE PREVENTION
OF TORTURE AND INHUMAN OR DEGRADING
TREATMENT OR PUNISHMENT

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE

33rd GENERAL REPORT

Activities 2023

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

1 January – 31 December **2023**

French edition:

33^e rapport général du Comité européen pour la prévention de la torture et des peines ou traitements inhumains ou dégradants (CPT).

The reproduction of extracts (up to 500 words) is authorised, except for commercial purposes, as long as the integrity of the text is preserved, the excerpt is not used out of context, does not provide incomplete information or does not otherwise mislead the reader as to the nature, scope or content of the text. The source text must always be acknowledged as follows “© Council of Europe, year of the publication”. All other requests concerning the reproduction/translation of all or part of the document should be addressed to the Directorate of Communications, Council of Europe (F-67075 Strasbourg Cedex or publishing@coe.int).

All other correspondence concerning this document should be addressed to Secretariat of the CPT (European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment), Council of Europe, F-67075 Strasbourg Cedex.

Cover design and layout:
Documents and Publications Production
Department (DPDP), Council of Europe
Photo: Council of Europe.

This publication has not been copy-edited by the DPDP Editorial Unit to correct typographical and grammatical errors.

© Council of Europe, April 2024
Printed at the Council of Europe

Contents

FOREWORD	5
ACTIVITIES DURING THE PERIOD 1 JANUARY TO 31 DECEMBER 2023	9
Visits	9
Periodic visits	9
Ad hoc visits	9
High-level talks with national authorities	12
Plenary meetings and activities of subgroups	13
Contacts with other bodies	15
PUBLICATIONS	17
Introduction	17
Selected publications	17
TRANSGENDER PERSONS: CORE PRINCIPLES TO ENSURE THEIR RESPECTFUL AND DECENT TREATMENT IN PRISON	35
Preliminary remarks	35
Overarching / general principle	36
Placement and prison location decisions	36
Risk of ill-treatment and verbal abuse by staff & inter-prisoner violence and intimidation	39
Regime, conditions & staffing	40
Body searches	41
Transport / transfers	42
Access to healthcare	42
THE CPT AND THE ENVIRONMENT	45
ORGANISATIONAL MATTERS	47
CPT membership	47
Bureau of the CPT	47
Secretariat of the CPT	47
APPENDICES	49
1. The CPT's mandate and modus operandi	49
2. The CPT's field of operations	50
3. CPT members	54
4. CPT Secretariat	56
5. CPT visits, reports and publications	58
6. Countries and places of deprivation of liberty visited by CPT delegations	60



“ It is a signal of the strength of a democratic country to treat persons deprived of their liberty with respect and dignity during a period of war and to continue to permit external monitoring.

Alan Mitchell
President of the CPT

Foreword

I am pleased to present to you the 33rd General Report on the activities of the CPT, which covers the year 2023 – a year in which the Committee managed to carry out 18 visits monitoring the conditions of detention and the treatment of persons deprived of their liberty, to strengthen their protection from torture and inhuman or degrading treatment or punishment.

The work of the CPT is only made possible by the collective commitment of the members of the Committee, the experts who assist them and our dedicated Secretariat. At the end of 2023, we bid farewell to several long-serving members and welcomed eight new members from diverse professional backgrounds. They will inject fresh insights into the challenges we face and help maintain our dynamism and effectiveness going forward. The Secretariat saw the departure of several colleagues, including the Executive Secretary in April 2023. The good news is that 2024 should bring the necessary reinforcements, including a new Executive Secretary. At the time of writing, the seats in respect of Albania, Bosnia and Herzegovina, Malta, Poland and Slovak Republic remain vacant. The seat in respect of the Russian Federation also remains vacant.

In addition to the 18 visits carried out in 2023, the Committee held High Level Talks with ministers and senior officials in Greece, Lithuania and Poland to further strengthen the CPT's relationship with these member states in the prevention of ill-treatment of those deprived of their liberty. The Committee also appreciates that at the end of most visits its delegations have the opportunity to provide feedback to the relevant ministers. This is an important part of the Committee's ongoing dialogue with member states. It is also positive that almost all countries now systematically authorise the publication of the visit reports and government responses. In addition, the Committee is encouraged by the growing number of countries that are signing up to the automatic publication procedure. This is a good sign, and the Committee very much hopes that the current number of 15 countries will grow further in 2024.

During 2023, the Committee's visits covered each of the types of places of detention under its mandate. I would like to highlight two issues.

The question of migration and how to treat foreign nationals continues to be a subject of debate across Council of Europe member states. Consequently, the treatment of foreign nationals deprived of their liberty remained a priority for the CPT in 2023, with this issue examined during visits to Belgium, Cyprus, Estonia, France (French Guiana & Guadeloupe), Germany, Greece, Hungary, Malta, the Slovak Republic and the United Kingdom. While many of the reports on these visits remain confidential at the time of writing, suffice it to say that toxic public discourse surrounding foreign nationals does have a bearing on the way in which

these persons are treated when deprived of their liberty. Further, the concerns raised by the CPT in its 2022 General Report on informal forced removals at borders, often accompanied by violence, remain. Immigration detention will continue to be a focus of the Committee.

The second, perennial, topic with which the CPT has been grappling for over 30 years is that of prison overcrowding. In 2023, prison populations in several European countries rose significantly as the respite caused by the Covid-19 pandemic dissipated. The Committee must recall the nefarious consequences that prison overcrowding has in undermining the functioning of prisons – poorer living conditions, increased tensions and violence, fewer purposeful activities and less preparation for prisoners returning to the community. The evidence of such is abundantly apparent as the CPT, the European Court of Human Rights and the Committee of Ministers of the Council of Europe have repeatedly made clear in numerous reports, decisions and recommendations. Resolving prison overcrowding is key to the effective functioning of prisons and to ensuring that prisoners are not exposed to inhuman and degrading treatment. Structural reforms are required, and inspiration can be sought from the good practice that exists in several member states of the Council of Europe on how to tackle prison overcrowding.

The prison setting is also the focus of our substantive section this year. It addresses the treatment of transgender persons in prisons. It should be underlined that this important topic is reflective of a dynamic and evolving social reality within European countries. The Committee is increasingly meeting transgender persons held in prisons. This is not surprising as prisons are a microcosm of society, often with amplified issues given the smaller, confined settings. Hence, the treatment of transgender persons in prisons mirrors broader societal attitudes toward persons who do not fall into historical understandings of gender. Debates as to how best to treat transgender persons in prisons are occurring across the Council of Europe region. The Committee aims to contribute to this discussion by setting out its thinking and its standards. It is important that there is an open discussion with all relevant stakeholders about the treatment of transgender persons in prisons. However, a few states continue to deny the existence of transgender persons and hence make no specific provision for their treatment in prison, which may lead to situations in which such persons become exposed to ill-treatment. We would very much welcome feedback on this text. Through dialogue and exchanges we can together promote good practices and ensure that all transgender persons in prison are treated with dignity and care.

As we are all more than aware, the environment and the climatic changes we are experiencing call for urgent and sustained action. While this is not the mandate of the CPT, we nevertheless encounter the effects of climate change when we visit places of detention. The Committee has started to reflect on how environmental issues may impact our mandate and be effectively addressed. In this General Report, we sketch out our first steps in this area.

Lastly, a word about Ukraine. The invasion of Ukraine by the Russian Federation in February 2022, and the ongoing war of aggression ever since has had a profound effect on the actions of the Council of Europe, including the work of the CPT. In October 2023, the Committee decided that it was appropriate to resume its work in Ukraine and to confirm that, in spite of the war, the protection of human rights is upheld in places of deprivation of liberty. The law enforcement agencies and the courts are operating, and persons are being remanded in custody and sentenced to terms of imprisonment. It is a signal of the strength of a democratic country to treat persons deprived of their liberty with respect and dignity during

a period of war and to continue to permit external monitoring. The visit went well, and the CPT intends to pursue its dialogue with the Ukrainian authorities in 2024.

I trust that you will find the overview of the CPT's work in 2023, as outlined in this General Report, informative. As always, the Committee stresses the principle of cooperation and, in this vein, we welcome comments and suggestions on our work generally and on this report.

Alan Mitchell
President of the CPT

2023 IN FIGURES:

18 VISITS

10 PERIODIC & 8 AD HOC



181 DAYS

IN THE FIELD

**229 PLACES OF
DETENTION
VISITED**



97 POLICE
STATIONS

48 PRISONS

20 PSYCHIATRIC
HOSPITALS

8 SOCIAL CARE
INSTITUTIONS

38 IMMIGRATION
DETENTION CENTERS

18 OTHER PLACES
OF DETENTION



Preventing torture in Europe

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE

Activities during the period 1 January to 31 December 2023

Visits

1. In the course of 2023, the CPT organised 18 visits (totalling 181 days), including 10 periodic visits¹ and 8 ad hoc visits. Details regarding these visits (such as countries, dates and establishments visited) are provided in Appendix 6. Two of these visits were financed under the Exceptional measures for Monitoring mechanisms with on-site visits.²

Periodic visits

2. Periodic visits were carried out to **Albania, Armenia, Cyprus, Estonia, Hungary, Luxembourg, Malta, North Macedonia, Slovak Republic** and **Ukraine**. The main objective of these visits was to examine the treatment and conditions of detention of persons detained in various types of establishments and to review the measures taken by the relevant authorities to implement recommendations made by the Committee after previous visits to the countries concerned. In this regard, particular attention was paid to forensic psychiatric patients and prisoners with a mental disorder (Albania); residents of social care homes (Armenia); persons held under immigration legislation (Cyprus); persons in solitary confinement (Estonia); civil involuntary and forensic psychiatric patients, and persons detained in prisons (Hungary); procedural safeguards offered to patients and detained persons under mental health and criminal legislation (Luxembourg); professional prison management including clear reporting lines and accountability (North Macedonia); persons held under immigration legislation (Malta); civil and forensic psychiatric patients and immigration detainees (Slovak Republic) and life-sentenced prisoners and military detention facilities (Ukraine).

3. In March 2023, the CPT announced its programme of periodic visits for 2024. The following eight countries were chosen: **Bosnia and Herzegovina, Czech Republic, Denmark, France, Georgia, Ireland, Norway** and **Slovenia**.

Ad hoc visits

4. In the course of 2023, the CPT carried out ad hoc visits to **Bulgaria, France, Georgia, Germany** (return flight), **Greece, Serbia** and two visits to **the United Kingdom**.

5. The primary objective of the visit to **Bulgaria** in March was to review the implementation of the long-standing CPT recommendations as regards the situation of persons deprived of their liberty in psychiatric institutions and social care homes. To this end, the delegation visited several establishments and held consultations with Ministers, Deputy Ministers and other representatives from the Ministries for Justice, Health and Labour and Social Policy.

1. The periodic visits to Estonia and Ukraine were postponed from 2022 to 2023.

2. See the document [CM\(2020\)182](#).



In the course of 2023, the CPT carried out ad hoc visits to Bulgaria, France, Georgia, Germany (return flight), Greece, Serbia and two visits to the United Kingdom.



6. The primary objective of the visit to **France** in November/December was to examine the treatment of persons detained in penitentiary establishments and police custody, including foreign nationals deprived of their liberty under immigration law, in overseas territories, specifically in French Guiana and Guadeloupe. The treatment and conditions of care for involuntary patients held at the psychiatric unit of the Hospital Andrée Rosemon in Cayenne (CHC) and the public mental health establishment ("*Etablissement Public de Santé Mentale*") of Guadeloupe were another focus of the visit.
7. The primary objective of the visit to **Georgia** in March was to examine the treatment of persons deprived of their liberty on the secure wards of Vivamedi Clinic in Tbilisi, where prisoners receiving inpatient treatment are accommodated.
8. The primary objective of the visit to **Germany** in September was to examine the treatment of foreign nationals deprived of their liberty under immigration legislation, as well as the procedures and safeguards applied to them in the context of their removal. More specifically, the delegation observed the preparation and conduct of a joint return operation (JRO) by air from Germany to Pakistan, on a flight which was organised by Germany, with the participation of three other countries, and supported by the European Border and Coast Guard Agency (Frontex).
9. The primary objective of the visit to **Greece** in November/December was to examine the treatment of persons deprived of their liberty under immigration legislation. To this end, the delegation visited immigration detention centres, including the new EU-funded reception and identification centres on the Aegean islands, and police and border guard stations. It also considered the situation of unaccompanied migrant children and persons with special needs and vulnerabilities.
10. The primary objective of the visit to **Serbia** in March was to examine the treatment of persons deprived of their liberty by the police and notably the action taken to prevent police ill-treatment. The delegation also reviewed the effectiveness of investigations by the prosecutorial authorities and the Internal Control Service of the Ministry of the Interior into complaints of ill-treatment of detained persons by police officers.
11. The primary objective of the visit to the **United Kingdom** in January was to examine the treatment and conditions of detention of persons sentenced by the International Criminal Tribunal for the former Yugoslavia (ICTY) who were serving their sentences in UK prison establishments. This visit took place in pursuance of the exchange of letters between the ICTY and the CPT, and the agreement between the Government of the United Kingdom and the ICTY on the enforcement of sentences imposed by the ICTY and the international residual mechanism for criminal tribunals.
12. The primary objective of the visit to the **United Kingdom** in March/April was to examine the treatment and conditions of detention of persons held under immigration legislation, both in immigration removal centres and prison establishments. The visit also afforded the delegation the possibility to examine the effectiveness of the safeguarding procedures in place for persons with vulnerabilities deprived of their liberty in immigration detention centres accommodating both men and women.



Over the last year the CPT has also sought to intensify its ongoing dialogue with certain states by means of high-level talks outside the framework of visits.

High-level talks with national authorities

13. As is standard practice for the CPT, visiting delegations continued to hold talks with the national authorities, both at the outset and the end of each visit. The end-of-visit talks usually involve the participation of Ministers and are the occasion for the delegation to present their preliminary observations.

Over the last year the CPT has also sought to intensify its ongoing dialogue with certain states by means of high-level talks outside the framework of visits, as detailed below.

14. On 21 February a delegation led by Alan Mitchell, CPT President, held high-level talks in an open and positive atmosphere in Warsaw, **Poland**. The delegation met Michał Woś, Secretary of State at the Ministry of Justice along with several other senior Ministry officials, and with Jacek Kitliński, Director General of the Prison Service. The aim of the talks was to relaunch the dialogue between the CPT and the Polish authorities in a spirit of cooperation, in particular as regards the implementation of the Committee's long-standing recommendations concerning the treatment of persons deprived of their liberty. Assurances were received that all of the CPT's recommendations were being analysed carefully and that a detailed response to the report on the [2022 periodic visit](#) would be provided by the mid-May deadline.

15. The President also led a CPT delegation for high-level talks held in Vilnius, **Lithuania** on 27 February, with the aim of discussing the action taken by the Government to address the long-standing recommendations to improve the situation in prisons as set out in the CPT's report on the December 2021 visit to the country, which was [published on 23 February 2023](#), together with the response of the Lithuanian authorities.

The delegation met Ewelina Dobrowolska, Minister of Justice, Elanas Jablonskas, Vice-Minister of Justice, Virginijus Kulikauskas, the Director of the Lithuanian Prison Service, and several other senior officials from the Ministry of Justice. These positive talks notably focussed on the existence of the informal prisoner hierarchy and the challenges caused by it, which led to an open and constructive discussion about the measures envisaged by the Ministry of Justice to address the situation. Despite these efforts, the Committee concluded from its 2021 visit findings that the measures to address these deeply rooted problems have been ineffective, and the situation remained unacceptable, leading the CPT to set in motion the procedure provided for in Article 10, paragraph 2, of the Convention.

16. Finally, high-level talks were also held with the Minister and Deputy Minister of Citizen Protection, Yannis Oikonomou and Kostas Katsafados, with Dimitra Lygoura, Secretary General for Anti-Crime Policy, and with senior officials responsible for prison matters in Athens, **Greece** on 23 and 24 October. High-level talks had previously taken place in September 2022 with the Minister of Citizen Protection and the Minister of State at the Prime Minister's Office to discuss the urgency of the situation and the measures required to strengthen the protection of persons held in prison from torture and from inhuman or degrading treatment or punishment. The delegation also met with the Ombudsman and Deputy Ombudsman, and with the UNHCR senior protection officer for Greece. This further round of dialogue took place in light of the response of the Greek authorities to the report on the November/December 2021 ad hoc visit, both of which were [published on 31 August 2023](#).

The CPT representatives reiterated the main concerns of the Committee regarding the prison system, notably the overarching problems of overcrowding and chronic shortage of staff, which compounded other shortcomings such as poor material conditions, absence of an appropriate regime, high levels of inter-prisoner violence and intimidation as well as insufficient and inadequate medical care in prisons. The lack of progress in addressing these issues sufficiently over many years led to the CPT deciding to open the procedure under Article 10, paragraph 2, of the Convention in March 2022. The Minister of Citizen Protection and his team reiterated their commitment to implementing the recommendations set out by the CPT in its visit reports and referenced the recently adopted Strategic Plan for Prisons for 2023 to 2025, which had been a key recommendation put forward by the Committee.

Plenary meetings and activities of subgroups

17. The CPT held three plenary meetings in 2023 (in March, July and November), during which 21 visit reports were adopted.

18. In addition to continuing its discussion of the ongoing intergovernmental activities of the Council of Europe on matters within the CPT's mandate, and of its own internal working methods, during the March plenary meeting, the CPT also elected a new Bureau and a new member was welcomed. A second new member was sworn in during the November plenary, when the Committee also amended its Rules of Procedure to provide for the exceptional adoption of visit reports by written procedure.

CPT MEETINGS

CONFERENCE ON SOLITARY CONFINEMENT

Reykjavík, 17-18 April 2023
Conference organised with Amnesty International

CONFERENCE ON PRACTICES OF NATIONAL PREVENTIVE MECHANISMS

Marrakech, 23-24 June 2023

CONFERENCE ON THE SAFEGUARD OF FUNDAMENTAL RIGHTS DURING FORCED RETURN OPERATIONS FROM A EUROPEAN PERSPECTIVE

Rome, 14 September 2023
Conference organised by the Italian Data Protection Authority

ROUND TABLE ON DEFINING THE FRAMEWORK FOR ESTABLISHING NATIONAL INDEPENDENT HUMAN RIGHTS BORDER MONITORING MECHANISMS

Belgrade, 27 October 2023

CONFERENCE ON PROMOTING AUTONOMY IN MENTAL HEALTHCARE

Riga, 14 November 2023

CONFERENCE ON MONITORING THE DETENTION CONDITIONS OF VULNERABLE PERSONS

Tunis, 23-24 November 2023
Conference organised with the "Instance Nationale pour la Prévention de la Torture" (INPT)

ROUND TABLE ON LIVING SPACE AND OVERCROWDING IN PRISONS

Paris, 14 April 2023
Round table organised with the French Ministry of Justice

CONFERENCE ON THE DETENTION OF PEOPLE WITH INTELLECTUAL AND PSYCHOSOCIAL DISABILITIES

Vienna, 22 May 2023
32nd session of the Commission on Crime Prevention and Criminal Justice (CCPCJ)

« CONCERTINA, RENCONTRES ESTIVALES AUTOUR DES ENFERMEMENTS »

Dieulefit, 30 June - 02 July 2023
Event supported by the French Ministry of Justice and the Council of Europe

WORKSHOP ON EXTERNAL MONITORING OF DETENTION PRACTICES IN THE CONTEXT OF MIGRATION

Izmir, 12-13 October 2023
Workshop organised by the Republic of Türkiye Ministry of Interior Presidency of Migration Management

CONFERENCE ON INNOVATIONS IN THE REHABILITATION PROCESS OF INMATES AND PROBATIONERS

Tbilissi, 01-03 November 2023

WORKSHOP ON DEVELOPING GUIDELINES ON MONITORING CORRUPTION IN PRISONS

London, 20-21 November 2023
Workshop organised with Penal Reform International

70+
EVENTS

19. The two standing subgroups of the CPT, the Working Group on Health and the Working Group on the CPT's Jurisprudence, met either before or during the week of the plenary meetings. The Working Group on Health 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. In the margins of the July plenary, it organised a training seminar for CPT medical members and experts to harmonise and improve the assessment of prison healthcare during country visits, and to update the checklist which is used in support of these assessments. The task of the Working Group on the CPT's Jurisprudence is to advise the CPT on developments in the Committee's standards as reflected in visit reports and to identify areas where there is room for development of those standards.

Contacts with other bodies

20. In 2023, the CPT continued to promote contact with other bodies **within the Council of Europe** including the Parliamentary Assembly, the Council of Europe Development Bank, the CoE Commissioner for Human Rights, the Department for the Execution of Judgments of the European Court of Human Rights, the Special Representative of the Secretary General (SRSG) on Migration and Refugees, the European Commission against Racism and Intolerance (ECRI), the Penological Council (PC-CP) and the Division for Cooperation in Police and Deprivation of Liberty .

The President of the CPT presented the 32nd General Report to the Ministers' Deputies at a hearing which took place on 29 March. The following day he also gave a press conference on the General Report in Brussels and in particular on its substantive section on pushbacks of foreign nationals. He also participated in the 28th Council of Europe Conference of Directors of Prison and Probation Services (CDPPS) on 6-7 June, and gave the closing address.

21. The November plenary welcomed the reestablishment of the CPT tradition of holding an exchange of views with the European Court of Human Rights, following a three-year hiatus which had been imposed by the Covid-19 pandemic. This significant exchange, led by the President of the Court, Judge Síofra O'Leary, who was joined by two former CPT Presidents, Judge Lətif Hüseynov (elected in respect of Azerbaijan) and Judge Mykola Gnatovskyy (elected in respect of Ukraine), focused on two critical topics: the issue of prisoner hierarchies and pushbacks of foreign nationals across international borders. The discussions underscored mutual concerns and collaborative efforts between the CPT and the Court in addressing complex human rights challenges.

22. Other Council of Europe activities in which the CPT participated included, *inter alia* a hearing of the Parliamentary Assembly of the Council of Europe on systematic torture and ill-treatment in Europe, in Paris on 22 March 2023, a conference in Kazakhstan on 20 April under the Central Asia Rule of Law Programme, entitled "Prevention of torture and ill-treatment: International and European standards and good practices", and a hearing before the PACE Migration Committee on "access to asylum procedures" on 8 December.

23. Regarding interlocutors **outside the Council of Europe**, the CPT maintained its close contacts with the United Nations, in particular with the Subcommittee on Prevention of Torture (SPT). For example, the CPT members attended two SPT events in Geneva: the 9 February conference to mark the joint 20th anniversary of the Optional Protocol to the Convention Against Torture (OPCAT) and the 15th anniversary of the SPT, and the day

of general discussion on 8 June on their draft general comment on OPCAT's Article 4. Further, CPT representatives took part in the Organization for Security and Co-operation in Europe (OSCE) Human Dimension conference in Vienna on 24-25 April.

In addition, the CPT and its Secretariat maintained ongoing contacts and exchanges of information with UNHCR offices both in Strasbourg and in the countries where the CPT undertook visits. Regular contacts and exchanges with the International Committee of the Red Cross (ICRC) on issues of mutual interest within the Council of Europe area were also upheld. Moreover, the CPT and its Secretariat continued to engage with EU Heads of delegations and officials, particularly during country visits and on the occasion of the Annual EU-CoE consultations with DG NEAR (Progress Report on the 2023 EU Enlargement Package), and maintained regular exchanges with the European Coast and Border Guard Agency (Frontex) Fundamental Rights Officer and his team as well as with the EU Agencies for Fundamental Rights and for Asylum.

24. Contacts with other external bodies also included, *inter alia* participation in: an online meeting on privately run detention centres organised by Bristol University/ the South African research centre (23 March); a round table with the French Ministry of Justice on living space in prisons and overcrowding (Paris, 14 April); an Amnesty International conference on solitary confinement in Iceland (Reykjavik, 17-18 April); the thirty-second session of the Commission on Crime Prevention and Criminal Justice (CCPCJ), on the detention of people with intellectual and psychosocial disabilities (Vienna, 22 May); a conference on Practices of National Preventive Mechanisms in Africa (Marrakech, 23-24 June); an event supported by the French Ministry of Justice and the Council of Europe entitled "*Concertina: Rencontres estivales autour des enfermements*" in Dieulefit (France, 30 June-2 July); a Conference organised by the Italian Garante on "The safeguard of fundamental rights during forced return operations from a European perspective" (Rome, 14 September); a colloquium on disciplinary proceedings in prison establishments by the *Association Nationale des Assesseurs Extérieur en Commission de discipline des établissements pénitentiaires* (ANAEC) (Paris, 7 October); a Workshop on External Monitoring of Detention Practices in the Context of Migration (İzmir, 12-13 October); a Regional Thematic Panel on Defining the Framework for Establishing National Independent Human Rights Border Monitoring Mechanisms (Belgrade, 27 October); a prison conference on "Innovations in the rehabilitation process of inmates and probationers" (Tbilisi, 1-3 November); a Conference on "Promoting autonomy in mental healthcare" (Riga, 14 November); a two-day workshop on developing guidelines on monitoring corruption in prisons with Penal Reform International (London, 20 and 21 November) and a conference with the "*Instance Nationale pour la Prévention de la Torture*" (INPT) on "Monitoring the Detention Conditions of Vulnerable Persons" (Tunis, 23-24 November 2023).

Publications

Introduction

25. In 2023, the CPT published 17 visit reports. As of 31 December 2023, out of 20 reports submitted to governments during the year, 10 have been made public. A state-by-state table showing the situation as regards publication of CPT visit reports is set out in Appendix 5.

Selected publications

26. This section takes a closer look at some of the visit reports and related government responses published in 2023.

IN 2023 :

17 REPORTS
PUBLISHED



SINCE 1989 :

504 REPORTS SENT TO THE AUTHORITIES

462 REPORTS
PUBLISHED

42 UNPUBLISHED
REPORTS

15 AUTOMATIC PUBLICATION AGREEMENTS
WITH MEMBER STATES



Procedural safeguards against refoulement, including the legal remedies against the removal order, need to be further strengthened to ensure that no-one is sent back to a country where they run a real risk of ill-treatment.



Belgium and Cyprus

Reports on the November 2022 joint ad hoc visits to Belgium and Cyprus (return flight) and responses of the Belgian and Cypriot authorities

(treatment of foreign nationals deprived of their liberty under immigration legislation and safeguards afforded to them in the context of their forced removal)

27. On 8 November 2022, the CPT monitored its sixth removal operation by air. It concerned a joint return operation (JRO) from Brussels (Belgium), via Larnaka (Cyprus) to Kinshasa (Democratic Republic of Congo), supported by the European Border and Coast Guard Agency (Frontex). For the first time, CPT delegations observed simultaneously the pre-boarding preparations as well as the boarding itself in two locations: Belgium (Brussels) and Cyprus (Larnaka).

28. In its report on the visit to **Belgium**, the CPT noted that no allegations of ill-treatment were received from the persons being removed. The Committee found that they were treated with respect by escort officers of the Belgian Federal Police throughout the removal operation, which was carried out professionally. Nevertheless, the CPT considers that procedural safeguards against refoulement, including the legal remedies against the removal order, need to be further strengthened to ensure that no-one is sent back to a country where they run a real risk of ill-treatment. This risk should be adequately assessed at the time of removal.

29. As regards the use of force and means of restraint, the CPT takes note of the detailed guidelines and operational instructions issued by the Belgian authorities, which reflect the Committee's position on this matter. It welcomes the proportionate and gradual nature of the resort to force and means of restraint demonstrated by all Federal Police escorts based on a dynamic security approach. Several recommendations are made to improve medical confidentiality and the transmission of medical information.

30. In their response, the Belgian authorities indicate that measures have been engaged at European level to improve the way that medical information is shared by member states participating in JROs with the medical doctor accompanying the flight. At national level, the authorities have taken steps towards improving the accessibility of information on the Frontex complaints mechanism. The Belgian authorities also refer to the existing laws, procedures and practices in reply to the CPT's recommendations to strengthen safeguards against *refoulement*, and note that families with children are not held in immigration detention centres.

31. In its report on the visit to **Cyprus**, the CPT found that the persons being returned were treated with respect by the Cypriot Police but highlighted the need for clear guidelines on the flight preparation phase and boarding procedure, including as regards health-related issues. It also became aware of allegations of ill-treatment after aborted removal attempts, which took place in the months prior to the CPT's visit. This requires that the Cypriot authorities take a proactive approach as regards the detection and prevention of ill-treatment, including the systematic medical screening of foreign nationals, upon their arrival at the immigration detention centre and after an aborted removal attempt, as well as the documenting and reporting of medical evidence of ill-treatment.

32. The CPT also makes specific recommendations aimed at improving safeguards in the context of the preparation for removal, namely as regards the timely notification of the removal, access to a lawyer and a medical examination by a doctor before the removal, in the context of a "fit-to-fly" assessment.



All detained persons should be provided with a minimum standard of living conditions guaranteeing their dignity.



33. In their response, the Cypriot authorities provide information on the ongoing investigations carried out into the cases of alleged ill-treatment raised by the CPT. The authorities also indicate the steps taken in relation to, among others, medical examinations, documenting and reporting of injuries, procedures for police escorts during forced and voluntary returns, the use of means of restraint, and the provision of interpretation services and training for escort officers. As a matter of public policy, no vulnerable persons are being detained in immigration detention, including unaccompanied children or families with children.

Reports and responses published in July 2023

(CPT/Inf (2023) 20 and CPT/Inf (2023) 21 - CPT/Inf (2023) 18 and CPT/Inf (2023) 19)

Italy

Report on the March/April 2022 periodic visit to Italy and response of the Italian authorities

(situation of persons in prisons and in social care homes)

34. With regard to prison overcrowding, the Committee noted that, following the reduction in the Italian prison population as a result of the Covid-19 pandemic, the return to the normal operation of the judiciary led to an increase in the prison population, which, at the time of the visit, was effectively 114% of official capacity. The CPT reiterates its view that the problem of overcrowding requires a more comprehensive and coherent strategy, covering both admission to and release from prison, in order to ensure that imprisonment is truly a measure of last resort.

35. There were many reports of violence and intimidation between prisoners in the prisons visited. The Italian authorities need to put in place a comprehensive strategy to prevent inter-prisoner violence and intimidation, including through the promotion by the prison administration (DAP) of a genuine dynamic security approach by prison staff.

36. With regard to restrictive measures and segregation, the CPT calls for a number of steps to be taken, in particular: the abolition of the measure of judicially imposed solitary confinement of prisoners under Article 72 of the Penal Code and the review of the modalities of implementation of the segregation measure for prisoners under Article 32 of the Prison Regulations. The Committee also reiterates its recommendations concerning the review of the management of prisoners subject to the “41-bis” regime.

37. As regards material conditions, the CPT recommends that greater efforts be made in all the prisons visited to ensure, *inter alia* that cells are properly equipped, windows are repaired, radiators are working, the widespread green mould in communal showers is dealt with, and the provision of hot water and the quality of food are improved. Furthermore, the CPT considers that all detained persons should be provided with a minimum standard of living conditions guaranteeing their dignity; each person should be provided with a regular supply of toiletries and cleaning products, as well as clean bedding and a pillow.

38. Despite the Committee’s positive assessment overall of the provision of health services in prisons, it makes a number of specific recommendations to improve the confidentiality of medical examinations and the quality of the recording of injuries. The report also concludes that prisons do not provide a therapeutic environment and that it is inappropriate for persons requiring specialised psychiatric treatment, such as forensic patients, to remain in prison pending their transfer to a REMS secure residence (*Residenza per l’Esecuzione delle Misure di*



Prison staff should be trained in the use of trauma-informed practices to enable them to support and deal with women with mental disorders and other trauma.

Sicurezza). It is also important to provide appropriate training, particularly in interpersonal skills, to prison officers working in units accommodating persons with mental disorders. In addition, persons considered to be at high risk of self-harm or suicide should be placed in more secure cells.

39. With regard to the women's sections of Milan San Vittore and Turin Lorusso e Cutugno prisons, the CPT makes several recommendations to improve the material conditions and, in particular, to provide a structured programme of activities for women with a mental disorder. In addition, prison staff should be trained in the use of trauma-informed practices to enable them to support and deal with women with mental disorders and other trauma. With regard to transgender persons in prison, the CPT found that there was no clear policy or guidelines for their management and that the transgender women it met were often accommodated in wings which did not cater for their specific needs.

40. The CPT considers that, given the high level of segregation and the lack of viable alternatives in the community, the residents of the two nursing homes visited in Milan are *de facto* deprived of their liberty. The report describes in detail the application of the Covid-19 related restrictions in force in the two RSAs visited in Milan (in terms of lack of access to fresh air, communal facilities, prohibition of visits, suspension of rehabilitation and physiotherapy activities) and the gradual, slow and detrimental effects of these restrictions on the mental and somatic health of the residents. In this respect, the Italian authorities should take urgent measures to reduce the restrictions in force and to ensure a less restrictive interpretation of their imposition in the future, in light of clear scientific and specific epidemiological circumstances.

41. The residential units in both nursing homes were generally in a good state of repair, properly equipped, spacious and well-ventilated and the level of hygiene was impeccable. At the Istituto Palazzolo nursing home, the CPT found certain deficiencies in the form of austere and depersonalised conditions in communal areas and impersonal and poorly furnished multiple-occupancy rooms which did not provide an adequate level of privacy.

42. The number of staff assigned to each accommodation unit was in line with regional legislation. However, a certain shortage of nursing staff was noted and the number of nursing assistants (OSS) could be strengthened, to look after the residents during the most critical phases of the day and to offer them a more stable environment.

43. The CPT gained a very good impression of the level of healthcare provided to residents in both nursing homes. However, the level of physiotherapy interventions should be increased. As regards the use of restraints for the protection and postural correction of nursing home residents (that is, lap trays, pelvic belts and bed rails), the report indicates that there was no excessive and disproportionate use of such restraints; however, the CPT recommends that their use be regulated in a uniform manner at the national level.

44. In their reply, the Italian authorities provided detailed information on the implementation of the CPT's recommendations. In particular, the Department of Prison Administration referred to the adoption of circulars on the improvement of regime activities for medium-security inmates and the strengthening of dynamic surveillance. Reference is also made to the material improvements introduced in Turin, Monza, Milan San Vittore and Rome Regina Coeli prisons. The healthcare authorities of the Region of Lombardy provided extensive information on the resumption of activities and the lifting of restrictions on visits for residents of nursing homes, as well as on the reinforcement of staffing levels in the same establishments.

Report and response published in March 2023
(CPT/Inf (2023) 5 and CPT/Inf (2023) 6)

Lithuania

Report on the periodic visit to Lithuania in December 2021 and response of the Lithuanian authorities

(situation of persons in police custody, prisons, and immigration detention, as well as of civil psychiatric patients)

45. Most of the persons interviewed by the delegation who were or had recently been in police custody, stated that the police had treated them in a correct manner upon apprehension and during subsequent questioning, as well as in the course of police custody.

46. Approximately half of the detainees in the police arrest houses visited were remand prisoners returned to police custody due to the needs of the investigation, or for attending a court hearing, usually for the maximum allowed time-limit of seven days. The Committee recommended that the Lithuanian authorities take further steps to ensure that the return of prisoners to police arrest houses is sought and authorised only very exceptionally (as required by law). As a rule, the prisoners concerned should not be held overnight in police establishments.

47. Turning to prisons, in the reports on its 2016 periodic and 2018 ad hoc visit, the Committee had expressed its concern regarding the lack of progress observed regarding its recommendations on widespread inter-prisoner violence and the informal prisoner hierarchy,



As a rule, remand prisoners returned to police custody due to the needs of the investigation, or for attending a court hearing, should not be held overnight in police establishments.

as well as the abundance of illegal drugs combined with a lack of targeted strategies to help the large numbers of drug users within prisons, and stressed that this could oblige the CPT to consider having recourse to Article 10, paragraph 2, of the Convention.³

48. Despite the existence of government-developed action plans, the findings of the 2021 visit showed a lack of progress and a failure by the Lithuanian authorities to address numerous fundamental shortcomings within the penitentiary system. Therefore, the CPT decided, during its 108th plenary meeting in July 2022, to set in motion the procedure provided for in Article 10, paragraph 2, of the Convention.

49. The CPT's 2021 report indicated that the roots of inter-prisoner violence appeared to have remained the same, namely, the informal prisoner hierarchy, the omnipresence of illegal drugs, and a lack of adequate custodial staff presence in prisoner accommodation areas.

50. The Committee called for a holistic approach to tackle the phenomenon of informal prisoner hierarchy, preferably in the form of a targeted strategy, including the introduction of a comprehensive risk and needs assessment upon admission, the creation of separate units/sectors for prisoners who do not (or no longer) wish to be involved in the informal prisoner hierarchy, offering adequate (or even superior) conditions and regimes which reward pro-social

3. "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."

and cooperative behaviour, allowing separation of informal prisoner leaders, promoting activities which reject prisoners' classification into castes, developing opportunities for work and education, and further strengthening individual sentence planning.

51. The high influx of drugs and their widespread use in prisons must, in the Committee's view, be addressed through a range of measures, including significantly increased ratios of properly trained staff, improved physical security measures, the use of dynamic security, and the application of a daily regime offering prisoners meaningful activities for at least eight hours a day. Moreover, the functioning of rehabilitation centres should be considerably improved (and new ones opened in prisons where they do not yet exist), with serious consideration given to the creation of drug-free units or sectors in every prison.

52. The Committee further noted that much-anticipated plans to construct several new prisons had not yet been implemented, and called upon the Lithuanian authorities to take all possible measures to significantly speed up the process of modernising the prison estate, especially its conversion to cell-type accommodation.

53. Regarding immigration detention, the CPT delegation did not receive any allegations of physical ill-treatment which would have occurred in the three foreigners' registration centres visited. However, the CPT urged the Lithuanian authorities to tackle the issue of overcrowding and significantly improve the conditions of hygiene in the facilities, which, further, must not be prison-like in design and operation.

54. Likewise, the Committee reminded that immigration detainees should be afforded a regime which is appropriate to their legal status, with limited restrictions in place and a varied offer of activities.

55. In their response, the Lithuanian authorities set out the measures taken or envisaged to implement the recommendations made by the Committee in the report, including further modernisation of the prison estate, the latest amendments to the Code of Execution of Sentences, integration of violence prevention measures in prisons, etc. The authorities also informed the CPT that the Foreigners' Registration Centre in Medininkai had been closed and the one in Kybartai would be closed in the course of the year 2023.

Report and response published in February 2023
(CPT/Inf (2023) 01 and CPT/Inf (2023) 02)

Luxembourg

Report on the March/April 2023 periodic visit to Luxembourg

(situation of children deprived of their liberty; treatment of persons detained by the police and in prisons; patients subject to a placement measure in closed psychiatric units in hospitals)

56. Regarding the situation of children deprived of their liberty in Luxembourg, the CPT received no allegations of physical ill-treatment. While a reform of the youth protection system is currently being elaborated in Luxembourg, it is regrettable that the Luxembourg authorities have still not implemented the CPT's recommendation, issued repeatedly since its very first visit in 1993, demanding that children no longer be incarcerated at Luxembourg Prison. The Committee found that their living conditions at Luxembourg Prison were unacceptable in view of the unsuitable material conditions for children, without strict separation from adult prisoners, and the impoverished regime, meaning that the children detained there were left to their own devices. The CPT noted that the living conditions at

the Security Unit for children at the State Socio-educational Centre, opened in 2017, were also deplorable due to the deteriorated material conditions and impoverished regime, particularly following repeated incidents of violence. The Committee took note of the certain positive changes since the end of the visit, and encourages the authorities to continue their efforts to improve the living conditions at the Security Unit, expand the activities offered to children and reduce incidents of violence between young people. The CPT once again recommends that the legislation be amended to strengthen the guarantees attached to child placement procedures.

57. As regards persons deprived of their liberty by the police, the CPT received some allegations of physical ill-treatment by police officers during police custody and of excessive use of force during apprehension, involving truncheon blows, punches and/or slaps. Several persons also reported having been insulted and, in one case, threatened with being struck by police officers. Efforts to prevent and effectively combat police ill-treatment and excessive use of force must be strengthened. In addition, the Committee regrets that the police of the Grand Duchy continues to question certain suspects through the bars of the “security cells” – cells measuring barely 2 m², located inside the interview offices in most police stations. In the CPT’s view, the use of these security cells during interviews could be considered humiliating and even potentially degrading for the persons concerned. The CPT calls on the Luxembourg authorities to stop placing suspects in such cells during police questioning, the ultimate objective being to dismantle them entirely. In its report, the Committee remains concerned about the security measures applied by the police, in particular the lack of confidentiality during medical examinations, the systematic use of searches and handcuffing during transfers, and the practice of tying detained persons to fixed objects in courts and hospitals.

58. In the prisons visited, no allegations of physical ill-treatment of detained persons by staff were received. In its report, the CPT stressed that the material conditions were excellent in the new Uerschterhaff Prison (CPU).

59. The Committee also examined the closed psychiatry sector in the Grand Duchy, which is currently facing several structural problems, including a lack of places available, and a shortage of psychiatrists. The CPT requests information from the authorities on the measures taken to address these problems, including the planned opening of a “socio-judicial psychiatry unit”. In its report, the Committee reiterates that urgent measures must be taken to ensure that all patients placed in closed psychiatric units can benefit from daily outdoor exercise in an appropriate outdoor space. At the two hospitals visited, the CPT also noted excessive use of pro re nata (PRN) prescriptions. The Committee recommends that this practice be better regulated and less frequently applied when it comes to the use of rapid-acting tranquilizers by injection. In addition, the CPT observed excessive use of mechanical restraint in the intensive psychiatry unit of the Émile Mayrisch Hospital (CHEM), including for long periods and without direct and continuous supervision by nurses. The Committee considers it unacceptable that mechanical and chemical restraint measures are also applied based on a PRN prescription, and also calls on the authorities to strengthen safeguards in the event of involuntary placement.

60. The report was made public in accordance with the automatic publication procedure adopted by the Luxembourg Government.

Report published in September 2023
(CPT/Inf (2023) 26)

Montenegro

Report on the ad hoc visit to Montenegro in June 2022 and response of the Montenegrin authorities

(situation of remand prisoners, on police ill-treatment and accountability for ill-treatment in Montenegro)

61. The report highlights that a considerable number of allegations of serious physical ill-treatment of detained persons by police officers were received by the CPT delegation. These included allegations against officers from the Sector for the Fight against Organised Crime and Corruption, Special Units, criminal police and inspectors from a variety of different police stations located in several parts of the country. The allegations included slaps, punches and kicks to the head, abdomen, chest and arms and the use of falaka (blows to the soles of the feet), the grabbing and squeezing of suspects' genitals, electric shocks with dog collars, asphyxiation through placing a plastic bag over the head of the suspect, threats at gunpoint, threats of rape, and the stripping of suspects, tying them to a chair and dousing them with cold water. In addition, the delegation also heard of threats made against the children or other family members of the suspect to pressure them to make a confession or to impart certain pieces of information. In the Committee's view, these alleged actions may well amount to torture.

62. Most of the alleged torture and/or ill-treatment occurred during the pre-investigation phase of criminal proceedings, apparently for the purpose of extracting information or a confession. In many (but by no means all) instances, these allegations concerned persons who had been summoned to police premises to give an initial statement or information, but who were not yet formally designated as a suspect. They had been summoned for "Informative Talks" with the police. Safeguards surrounding such talks must be strengthened.

63. The CPT made a series of recommendations to address this phenomenon and called upon the Minister of the Interior, the Director of Police and regional police directors to actively promote a change of culture within the ranks of the law enforcement agencies. Further, police officers should be encouraged to report all cases of violence by colleagues through clear reporting lines to a distinct authority outside the police unit concerned. Also, a robust legal framework for the protection of individuals who disclose information on ill-treatment and other malpractice should be put in place.

64. In addition, the CPT stressed that it is essential that effective investigations into allegations of ill-treatment be undertaken to demonstrate that criminal acts by the police will be punished. The report outlines, in a series of recommendations, measures to improve accountability and oversight mechanisms and the adequacy of sanctions.

65. Also in focus was the situation of remand prisoners in Montenegro. In this context, the CPT found that persons detained in the Remand Prison of Spuž Facility and the remand section of Bijelo Polje Prison were held for long periods in poor conditions and with a lack of any purposeful regime. The situation was exacerbated by the fact that pre-trial detainees are locked in their cells for 23 hours a day for months (and even years) on end, with numerous judicially imposed restrictions throughout the pre-trial period. The cumulative effects of this situation for persons held on remand, notably at Spuž Remand Prison, together with a reduced frequency of contact with the outside world may well, in the Committee's view, amount to inhuman and degrading treatment. The Montenegrin authorities should devise and implement a comprehensive regime of out-of-cell activities for remand prisoners, among other measures to remedy the situation.



||| The allegations included slaps, punches and kicks to the head, abdomen, chest and arms and the use of falaka, electric shocks with dog collars, asphyxiation through placing a plastic bag over the head of the suspect, threats of rape...



66. In their response, the Montenegrin authorities refer to various measures, including ongoing investigations and convictions of some police officers concerning the specific cases highlighted by the CPT. Further, it references training programmes for police officers and notes the increased use of body-worn video cameras by police officers and the improved means of identifying officers and the equipment they use during interventions. It also outlines measures underway to strengthen safeguards against ill-treatment. In addition, the response refers to improvements made to the material conditions of the prisons visited and further plans for the construction of the new “Mojkovac Prison”.

Report and response published in June 2023
(CPT/Inf (2023) 10 and CPT/Inf (2023) 11)

Portugal

Report on the periodic visit to Portugal in May/June 2022 and response of the Portuguese authorities

(treatment of persons deprived of their liberty by police; situation of women held in prisons; Lisbon Central Prison; treatment of forensic patients)

67. The findings of the 2022 visit indicate that physical ill-treatment of apprehended persons by officers of the Public Security Police (PSP) and the National Republican Guard (GNR) is still not an infrequent practice. The alleged ill-treatment took place at the time of apprehension, as well as during time spent in a police station. It consisted primarily of slaps, punches, blows with a baton and kicks to the body after the apprehended person had been brought under control. The report details several cases of alleged physical ill-treatment corroborated by medical injury reports, and requests detailed feedback on the corresponding criminal and disciplinary proceedings. Further, the practice of handcuffing persons to furniture in police premises persists, often for periods of several hours and at times in areas accessible by the public.

68. The CPT acknowledges that the Portuguese authorities are not denying the general existence of the problem of ill-treatment of persons deprived of their liberty by law enforcement officials, and that some measures have been taken to address the matter. However, ill-treatment of detained persons by police officers is a resilient phenomenon in Portugal and there is still some way to go to create a policing culture robust enough to firmly reject and effectively sanction ill-treatment within police ranks.

69. In this regard, the report reiterates that effective investigations into allegations of ill-treatment would serve as an important dissuasive factor for officers inclined to engage in ill-treatment. However, the system of investigating such cases remains dysfunctional. For instance, evidence of potential police ill-treatment detected upon a person's entry to prison is usually recorded, but often not rapidly transmitted to the Inspector General for Internal Affairs (IGAI) or the Public Prosecutor's Office. Moreover, even once cases are transmitted, no swift action is taken to initiate an investigation. Such situations can only serve to embed a perception of *de facto* impunity of acts of police ill-treatment.

The CPT therefore considers that the Portuguese authorities should commission an independent review of their current system for the investigation of allegations of ill-treatment by police officers. This should include establishing protocols to ensure that whenever an incident of alleged ill-treatment, or of injuries indicative of ill-treatment, is forwarded to an investigatory body by the prison authorities, a representative of the investigatory body



Effective investigations into allegations of ill-treatment would serve as an important dissuasive factor for officers inclined to engage in ill-treatment.

interviews the person concerned within 48 hours, with a view to determining whether a forensic medical examination is necessary and what further investigative steps are required.

70. As regards Lisbon Central Prison, the report describes once again a number of credible allegations of physical ill-treatment by staff, consisting primarily of slaps, punches and kicks. The overall material conditions at the prison, described in previous CPT reports as being in a “state of advanced dilapidation”, had further deteriorated. In most areas of the establishment, prisoners could be said to be living in degrading circumstances, in double-occupancy cells with dirty and dilapidated walls, broken windows and unpartitioned toilets. The report therefore welcomes the Government’s plans to close down the prison.

71. In respect of forensic patients, the findings at the Forensic Unit of Magalhães Lemos Hospital were generally positive. At the Psychiatric Clinic of Santa Cruz do Bispo Prison, a few allegations of physical ill-treatment by custodial staff were received, but patients also reported that treatment by staff had improved in recent years. The report acknowledges further improvements made at this clinic, such as the reduction of overcrowding and the increase in healthcare personnel. Nevertheless, the clinic remains largely prison-like and unable to provide a suitable environment for the care and treatment of psychiatric patients. The CPT reiterates that an alternative facility must be found or built as a matter of priority.

72. In their response, the Portuguese authorities provide information on steps taken or envisaged to address the CPT’s recommendations. They confirm the plans to gradually close



Action needs to be taken to apply modern multi-disciplinary clinical treatment approaches, which include the offer of a wide range of therapeutic, rehabilitative and recreational activities as part of the treatment plan for patients.

down Lisbon Central Prison by 2026. Reference is further made to intentions to double the capacity of mental health units for forensic patients under the Ministry of Health, which would reduce the number of forensic patients held in the prison system.

Report and response published in December 2023
(CPT/Inf (2023) 35 and CPT/Inf (2023) 36)

Romania

Report on the September 2022 ad hoc visit to Romania and the response of the Romanian authorities

(treatment of patients held in psychiatric establishments and of residents accommodated in residential care centres)

73. In the course of the visit, the CPT delegation visited the Pădureni-Grajduri Psychiatric and Safety Measures Hospital for forensic psychiatric patients. It also visited the “civil” psychiatric hospitals of Bălăceanca, Botoșani, Obregia (Bucharest) and Socola (Iași), where it focused on the treatment of the most acute patients and of long-term chronic patients.

74. There is a recognition by the Romanian authorities that a fundamental reform of the mental health system is required to shift away from institutional care towards establishing mental health services in the community offering adequate social support structures.



It is also important that persons admitted to psychiatric establishments are provided with full, clear and accurate information, including on their right to consent or not to consent to hospitalisation.

The findings of the 2022 visit reinforce the urgency for action to ensure that all persons in psychiatric establishments are offered decent living conditions and appropriate treatment for their mental disorders. Underpinning these reforms is the need to reinforce staffing levels in all the hospitals visited.

75. At Pădureni-Grajduri Psychiatric and Safety Measures Hospital, the CPT found that patients were not receiving adequate care and treatment. At the time of the visit, 452 patients were obliged to share 390 beds while the hospital had an official capacity of 251 beds. All dormitories were crammed with beds and, in the admissions ward, a room of 24 m² was accommodating 18 patients sharing nine beds. The warehousing conditions of persons with mental disorders and intellectual disabilities found by the CPT in this hospital may well be considered as amounting to inhuman and degrading treatment.

76. Further, the delegation received many allegations from patients that orderlies at times pushed, slapped and punched them for minor infractions or accidents, or as part of a restraint intervention or punitively to control the patients within the often hazardous, disturbed and understaffed wards. Ending ill-treatment requires action to significantly increase the number of appropriately trained and supervised ward-based staff and to reduce the crowding of patients.

77. Treatment in all hospitals visited was primarily based on pharmacotherapy and action needs to be taken to apply modern multi-disciplinary clinical treatment approaches, which include the offer of a wide range of therapeutic, rehabilitative and recreational activities as part of the treatment plan for patients.

78. Regarding the use of means of restraint, the CPT found that the registers did not record every instance of immobilisation of a patient and that the duration of the restraint could in fact be much longer than the times recorded. On several wards, patients with learning disabilities were tied to their beds or to a fixed object, such as a radiator in the dining room, almost daily. A comprehensive policy and approach towards restraint with the necessary supervision and oversight needs to be put in place.

79. Steps also need to be taken to strengthen legal and other safeguards such as consent to treatment, patient information and complaint procedures.

80. The CPT also points out several systemic shortcomings concerning the approach to forensic mental health in Romania, which contribute to the inadequate care and treatment provided to patients. These include a complete lack of stratification of security needs of patients, lack of a pathway of care for patients with mental disorders, and the need to establish step-down facilities and develop proper community psychiatric follow-up care.

81. In all four civil psychiatric hospitals visited, patients generally spoke positively about the nursing staff. However, allegations of ill-treatment and verbal abuse by staff were heard in all the hospitals visited, apart from Obregia. In particular, on the male acute ward of Botoşani Psychiatric Clinic, the delegation received numerous allegations of patients being ill-treated (punched, slapped, pushed and shouted at) by auxiliary staff.

82. As regards living conditions, the decency and quality varied among the different wards in the hospitals visited. As a general measure, the Romanian authorities need to put in place a refurbishment programme to assist hospitals to reconfigure dormitories so that each one accommodates no more than four patients. Further, a programme of personalisation of the living accommodation for patients and of visual stimulation on the wards and day rooms where patients associate should be initiated. Patients should also benefit from unrestricted access to the outdoors during the day, unless treatment activities require their presence on the ward.

83. Regarding children accommodated in psychiatric facilities, the restraint measure of immobilisation to a bed with straps for agitated children should be ended. In parallel, the Romanian authorities should ensure that staff are trained in manual restraint techniques and that children's wards possess calming down rooms. More generally, patients must never be involved in the restraint of another patient.

84. A careful examination of the legal safeguards applied in the hospitals visited showed that, with the exception of Obregia Psychiatric Hospital, every effort was made to circumvent the provisions of the law regulating involuntary hospitalisation in order to admit patients on a "voluntary" basis. Action needs to be taken to ensure that all hospitals fully apply the provisions of the Law on Mental Health regulating the involuntary hospitalisation of patients. It is also important that persons admitted to psychiatric establishments are provided with full, clear and accurate information, including on their right to consent or not to consent to hospitalisation. There is also a need to enhance the safeguards regulating consent to treatment in hospital.

85. In their response, the Romanian authorities provide information on various measures, taken or envisaged, to implement the recommendations made by the Committee in the visit report, notably through the National Health Strategy 2023-2030 and its Action Plan.

Report and response published in October 2023
(CPT/Inf (2023) 28 and CPT/Inf (2023) 29)



The treatment of transgender persons living in prisons mirrors broader societal attitudes to persons who do not fall into historical understandings of gender.

Transgender persons: core principles to ensure their respectful and decent treatment in prison

Preliminary remarks

86. In this brief section, the CPT has decided to set out its thinking and standards on the treatment of transgender persons in prisons.⁴

It should be underlined that this important topic is reflective of a dynamic and evolving social reality within European countries, with the Committee increasingly meeting transgender persons held in prisons. The principles set out below are by no means exhaustive and have evolved as the Committee addresses various recurrent issues encountered during its visits to many countries within the Council of Europe area. They are primarily framed through the lens of the CPT's mandate, namely the prevention of ill-treatment. The Committee would welcome the comments and practical suggestions of all those stakeholders with experience of prisons on how best to ensure the securing and protection of transgender persons' rights in prison.

87. Prisons are a microcosm of society, often with amplified issues given their smaller, confined settings. Hence, the treatment of transgender persons living in prisons mirrors broader societal attitudes to persons who do not fall into historical understandings of gender.

88. Prison managers can promote the respectful treatment of transgender persons living in prisons by adopting an inter-disciplinary approach, taking into account the possible legal, medical and social ramifications of their actions. Appropriately tailored safeguards against abuse and ill-treatment may be necessary, and careful consideration should be given to the manner in which a broad spectrum of prison policies designed with cisgender prisoners in mind could adversely affect the lives of transgender persons living in prisons. If insufficient thought is given to these considerations, it heightens the risk that transgender persons living in prison may be subjected to inhuman or degrading treatment.

89. Transgender persons living in prisons can experience an amplification of pre-existing trauma, underpinned at least in certain Council of Europe member states, by the lack of legal gender recognition and/or an inability formally to affirm their gender identity. Regrettably, discrimination, transphobia and mistreatment on the ground of gender identity remain rife in the Council of Europe area and regressive attitudes of this nature may be mirrored in prisons, on occasion leading to violence against transgender prisoners by other prisoners or even by prison staff. In the CPT's experience, few countries have been able to meet fully the needs of transgender persons in prison. The following principles aim to support prisons

4. Commonly used terms and definitions can be found, *inter alia*, in the reports of the United Nations Independent Expert on sexual orientation and gender identity including 'the Promotion and protection of all human rights, civil, political, economic, social and cultural rights, including the right to development: The law of inclusion', 3 June 2021; Report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity: Protection against violence and discrimination based on sexual orientation and gender identity, A/73/152, 12 July 2018 the [Yogyakartaprinciples.org](https://www.yogyakartaprinciples.org) – [The Application of International Human Rights Law in relation to Sexual Orientation and Gender Identity](https://www.yogyakartaprinciples.org) and Additional Principles and State Obligations on the Application of International Human Rights Law in Relation to Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics to Complement the Yogyakarta Principles (YP+10); the European Commission against Racism and Intolerance (ECRI) General Policy [Recommendation No. 17 on combating intolerance and discrimination against LGBTI persons](#).

to manage, protect and ensure adequate and decent treatment for this vulnerable segment of the prison population.

90. The CPT is fully aware of the different policies, practices and debates about the placement of transgender persons in female or male sections or even in dedicated specific parts of prisons. Across the Council of Europe region, it has seen widely divergent approaches to the placement and treatment of transgender prisoners. Given the relative paucity of specific international standards and the increasing frequency with which the CPT meets transgender persons in prisons during country visits, the Committee considers that it is an apposite moment to set out its standards. While certain key principles could also apply to other places of deprivation of liberty, the CPT wishes primarily to focus on transgender persons in prison settings.

Overarching / general principle

91. Within the framework of the prevention of ill-treatment, the CPT underlines that transgender persons, as well as any LGBTI persons, held in detention can be in a situation of vulnerability, at heightened risk of intimidation and abuse. As such, the Committee endorses the existing international norms that emphasise the obligations of states to put in place safeguards to protect transgender persons in detention, including the Yogyakarta Principles and Additional Principles on the application of international human rights law in relation to sexual orientation and gender identity, notably Principles 5, 9 and 10.

It also underlines and agrees with the case law of the European Court of Human Rights and the decisions of the European Committee of Social Rights, highlighting that national legislation should provide for recognition of persons of a gender other than that assigned at birth and should not include any requirement as a pre-condition to legal gender recognition such as gender-affirming surgery.⁵ The CPT recognises that not all transgender persons wish to proceed to gender-affirming surgery and treatment in a prison context. Such surgery should not be a condition to recognition. The Committee considers that if a person self-identifies as transgender during the prison admission procedure, then this should be sufficient *per se* for the prison to treat the person as such in all decisions taken concerning that person, including placement decisions (notwithstanding the need to take due account of individual risk assessments (see below)).

Placement and prison location decisions

92. The birth of the concept of the prison considerably predates the comparatively recent evolution of our understanding of gender. Prisons' physical infrastructure and layout, regimes and operation were originally devised around the needs of men, who have always

5. See, in this connection, [European Court of Human Rights \(ECtHR\) \(2020\), Gender Identity issues, fact sheet](#); European Court of Human Rights, *A. P., Garçon and Nicot v. France* application nos. 79885/12, 52471/13 and 52596/13, [Judgment \(6.4.2017\)](#); European Committee of Social Rights 2018: [Transgender Europe and ILGA-Europe v. the Czech Republic](#) paragraph 89 and Resolution of the Council of Europe Committee of Ministers [CM/ResChS\(2018\)9](#); see also the UN revised Standard Minimum Rules for the Treatment of Prisoners ([Nelson Mandela Rules](#)), 7(a) and the [Annual report of the Sub-Committee on the Prevention of Torture \(SPT\), March 2015](#), paragraph 68 and ECRI General Policy [Recommendation No. 17 on combating intolerance and discrimination against LGBTI persons](#), recommendation 25; [ECRI 5th cycle monitoring report on Serbia](#), paragraph 100; [ECRI 6th cycle report on the Czech Republic](#), paragraph 14.



As a matter of principle, transgender persons should be accommodated in the prison section corresponding to the gender with which they identify.

composed the vast majority of prisoners and of persons who work in prisons. The majority of prisons are not recent and have been based or refurbished on designs and spaces often created without regard to the distinctive needs of different categories of prisoners, including transgender prisoners. Carceral spaces premised on a historical understanding of gender inevitably create challenges for prison managers, who must consider where best to accommodate transgender prisoners.

93. Another challenge is the widely divergent criteria for placement of transgender persons across the Council of Europe region, which varies considerably depending on the individual state's policies. In some states, the criteria for placement is self-identification and declaration, in others it is legal recognition and, in a few, it is gender-affirming surgery (which translates, in the prison placement context, to the default position that, before surgery, transgender prisoners are placed in the section of the sex they were assigned at birth). In some states, it is the sentencing judge who decides on a person's initial placement facility in accordance with legal gender recognition, but there remains a margin for the specific prison administration to decide upon placement depending on various criteria, including gender identity. In other states, placement will be to the prison section with which the transgender person self-identifies upon self-declaration. In all of these cases, the underlying norm is that placement is subject to individual risk assessment. Few states have specific policies and legislation in place to guide prison authorities on placement and often this is done on a case-by-case basis. Instead, many states have developed a practice over time, which

provides separate accommodation for transgender prisoners but promotes participation in some activities with other prisoners of the same gender.

94. Placement decisions for transgender prisoners can also be a highly-charged politically and socially sensitive topic. Indeed, in a handful of recent unfortunate cases, media and political attention has focused on the placement in women's prison sections of transgender women accused or convicted of sexual offences against women. This placement was despite the fact that prison administrations in many Council of Europe states are already well-versed in making individual risk assessments when persons are committed to prison. Indeed, here the CPT underlines the fundamental premise of the positive obligation on states under Article 3 of the European Convention on Human Rights (ECHR) to fulfil their duty of care to ensure all persons held in prisons are kept safe.

95. In the view of the CPT, there is no valid security reason why, in principle, a balanced individual risk assessment carried out when a transgender person is admitted to prison should differ from that which is carried out on the committal of a cisgender person. In both cases, the dual objective should be the same: to make a placement decision that will most effectively protect the person being committed from others who may wish to cause them harm, and to limit the risk that they may be placed in a location in which they may cause harm to others. The CPT would also note, in this regard, that while inter-prisoner violence between cisgender persons living in prisons remains a very significant issue in many member states, it is never suggested that this security issue is best viewed through a gender lens.

96. Equally, as broadly reflected in the Yogyakarta Principles, risk management in prisons should not operate under the false stereotype that suppressing or ignoring transgender persons' characteristics and needs will reduce the risk of violence in prisons. In practice, the CPT has seen that in many states, transgender persons are initially allocated to a prison based on their legal gender, and usually not allocated to an establishment purely based on their gender identity, as opposed to their sex assigned at birth (although occasionally this has been seen). Often, transgender women prisoners are placed in male sections of prisons,⁶ and sometimes on specific (male) segregation wings for protection for particularly vulnerable prisoners. In some cases, they have been prevented from wearing women's clothes and made to wear men's clothes. In other cases, the male protection units where they have been placed also house men accused of or sentenced for sexual crimes.

97. The international norms referred to above indicate that national authorities should adopt legislation explicitly regulating the change of name and gender marker for transgender persons and establish clear guidelines for gender-affirming procedures and their official recognition. Such legislation should guarantee the full legal recognition of a person's gender identity and allow gender marker changes to be made in personal documents, in a quick, transparent and accessible way, without for example the requirement for gender-affirming surgery. Moreover, the CPT underlines the emphasis that Rule 7a of the Nelson Mandela Rules places on prisoners' admission records and the prison file management system needing to include "precise information enabling determination of his or her unique identity, respecting his or her self-perceived gender".

6. The CPT notes that while there are transgender men in prisons across the Council of Europe region, the majority of persons with whom the CPT has met during its visits across the Council of Europe region have been transgender women.

98. In line with the above precepts and international norms, the CPT considers that, as a matter of principle, transgender persons should be accommodated in the prison section corresponding to the gender with which they identify. If, after an individualised risk assessment, there are exceptional security or other reasons to accommodate them elsewhere, those reasons should be clearly documented, and subject to regular review. In any case, just as for cisgender persons living in prisons, transgender prisoners should always be held in locations that best afford their safety and that of others. If they are held, even briefly, in any form of separate or dedicated section of a prison, they should be offered activities and association time with other prisoners of the gender with which they identify.

99. Moreover, the CPT considers that transgender persons should also be proactively consulted in their initial entry needs and risk assessment procedures before placement decisions are made, as well as given the option that their gender identity be kept confidential if they so wish.

Segregation / isolation

100. As mentioned above, transgender persons might be placed in a situation where they are separated from the mainstream prison population for protection purposes; this might be with certain other categories of vulnerable persons or it may be alone. Given that it is widely recognised that isolation or segregation can have long-term negative consequences on an individual, especially if it is prolonged or indefinite, such placement can only be justified in exceptional circumstances, in the short-term, and with the proper safeguards in place.⁷ The CPT considers that all newly admitted prisoners should be allocated to ordinary accommodation units as soon as possible after an individual risk and needs assessment has taken place upon admission. Moreover, conditions for all prisoners, including newly arrived and/or transgender prisoners, should not amount to a solitary confinement type regime.

Risk of ill-treatment and verbal abuse by staff & inter-prisoner violence and intimidation

101. It is well recognised that transgender – as well as all LGBTI persons in detention – are in an overall situation of vulnerability, at the risk of potential intimidation and abuse by other detained persons, as well as by prison staff.⁸ The placement of a transgender person in a prison section accommodating persons of a different gender from that with which they identify also inherently heightens the risk of violence and intimidation directed towards that individual.

102. The Committee wishes for situations to be avoided where transgender persons feel that they need to suppress their identity and try to be invisible due to the lack of protection afforded by the prison.

103. In several states, the CPT has repeatedly met transgender women prisoners held in male sections of prisons who stated that they did not feel safe. In some cases, transgender women alleged that they had been sexually abused and assaulted by other prisoners. It

7. See [Rule 53A of the European Prison Rules 2020](#).

8. See, for example, Recommendation 4 in [Recommendation CM/Rec\(2010\)5 of the Committee of Ministers to member states on measures to combat discrimination on grounds of sexual orientation or gender identity \(Adopted by the Committee of Ministers on 31 March 2010 at the 1081st meeting of the Ministers' Deputies\)](#).

has also met many (mostly women) transgender prisoners who had been verbally abused by staff. In most of these cases, those transgender persons were not getting any specific support following these traumatic events.

104. During other visits, transgender women prisoners held in all-male settings reported that they were not systematically allowed different shower times, that they felt unsafe and were humiliated by constantly being referred to by their male names (see below). In some instances, they were also prohibited from wearing female clothing and generally prevented from expressing their identity as women. In contrast, the CPT has also seen some good practice recently where transgender women prisoners, who had self-identified as such, were held in the female section of the prison and were allowed to shower at different times, wear female clothing and be addressed by staff by their chosen names.

105. The CPT considers that national authorities should pay particular attention to the risks of discrimination and exclusion faced by transgender persons in closed institutions. They should ensure that policies include strategies to combat ill-treatment by prison staff as well as strategies to reduce any incidences of inter-prisoner violence and intimidation directed against transgender prisoners. Such a strategy should include preventive and corrective measures, including the systematic recording and reporting of all such incidents and investigation into all allegations of targeted bullying of, or violence against, transgender prisoners.

106. Overall, the CPT wishes to emphasise that the duty of care which is owed by the prison authorities to persons in their charge includes the responsibility to protect them from other prisoners who might wish to cause them harm. The prison authorities must act generally to protect prisoners, as well as in a proactive manner to prevent violence and bullying of prisoners by other prisoners, and especially of those who might be considered more vulnerable in a prison setting, such as transgender prisoners.

Regime, conditions & staffing

107. The CPT has found various instances in which transgender women prisoners were held in male units of prisons where there were no female custodial officers present on the section and daily oversight was carried out by male custodial officers. The CPT considers that this is not appropriate. All prison units should be staffed by male and female custodial officers. If exceptionally for a short period it is necessary to place a transgender woman on a male unit, steps must be taken to ensure that there is always at least one female custodial officer on duty at all times.

108. The CPT has also seen poor and inappropriate regimes and material conditions in transgender units. In one instance, the transgender unit was an extension of the disciplinary unit, where the transgender women prisoners had no access to any purposeful activities or space outside of their unit and lived in poor and dilapidated conditions. The CPT requested the swift transfer of the transgender women to alternative accommodation; this was done shortly after the visit, with the transgender women transferred to a designated small unit within a women's prison.

109. Further, the CPT considers that prison management and custodial staff should enable transgender prisoners to dress in the clothes associated with the self-identified gender and should address them by their chosen names. Prison authorities should allow for the use of preferred names, titles and pronouns, in all verbal and written communication, irrespective of

official documents. Respectful language and terms should always be used when discussing or referring to all individuals, regardless of gender. Custodial staff should be reminded of their duty to respect the gender identity of transgender prisoners, in particular in terms of accommodation, clothing and the use of their chosen name. Any use of derogatory, demeaning and stigmatising language should be prohibited.

110. Moreover, national and prison authorities should ensure that all prison staff receive regular awareness courses to ensure they understand and address the special needs of transgender persons living in prison. Training should be designed to empower prison staff in preventing, identifying and responding to bullying, harassment and discrimination on the grounds of sex, sexual orientation, gender identity, gender expression and sex characteristics. Initial and regular ongoing training should support staff in their daily interactions with transgender prisoners and involve external experts with relevant practical experience as well as peer counselling. The CPT considers that member states' authorities should draw up a clear policy and guidelines for the management of transgender prisoners guaranteeing that their specific needs are met.

Body searches

111. The Committee has seen that the issue of body searches for security reasons can be a notably sensitive issue. During one CPT visit, transgender women prisoners stated that they had been subjected to a strip search upon their admission to the prison, as well as at other times during their sentence, which had entailed them removing all their clothes and standing naked while male officers examined whether they were concealing any forbidden items. The CPT underlines that such a procedure is totally inappropriate and was rightly perceived as degrading by the women concerned.

112. A strip search is a very invasive and potentially degrading measure, and can magnify the risk of humiliation. These should only occur when absolutely necessary and based on a justifiable risk. When carrying out such a search, every reasonable effort should be made to minimise embarrassment and maintain as much dignity as possible; persons who are searched, transgender as well as cisgender, should not be required to remove all their clothing at the same time, for example, a person should be allowed to remove clothes above the waist and to put those clothes back on before removing further clothing. In addition, ordinarily the search should be carried out by a custodial officer of the same gender as that with which the person being searched has self-identified and, as a rule, a second officer of the same gender should also be present during any strip search as a protection for detained persons and staff alike.

113. During another visit, the CPT noted that female prison officers were uncomfortable with searching transgender women and had refused to perform the searches, and that the transgender women prisoners whom the CPT had met had been searched either by male officers, or by both female and male officers (female officer on their upper body and a male officer on their lower body).

114. Overall, in the case of prisoners who identify as transgender, admissions staff should discuss with them during the initial admissions process the gender of the officer who would conduct rub down and strip searches, in line with the transgender person's identity and preference. The prisoner's search choice must be recorded. The prisoner should be advised that this does not allow them to choose the staff members who search them.

If the prisoner refuses to select a search preference, they should in principle be searched in line with their gender identity. Moreover, staff should receive training on how to carry out searches in a professional and respectful manner.

Transport / transfers

115. Prison authorities should ensure that policies and practices for escorting prisoners remain sensitive to the marginalisation and stigmatisation of, and discrimination against, transgender persons. On various visits, the CPT has recommended that the authorities take decisive steps to prevent violence, intimidation, and/or thefts perpetrated by detained persons against their fellow passengers and that appropriate measures should be taken to prevent prisoners being subjected to intimidation and verbal abuse by fellow prisoners. In particular, female prisoners (including transgender women prisoners) should not be transferred together with male prisoners in the same secure vehicle.

Access to healthcare

116. At a minimum, national authorities should ensure that access to health services and standards of care in prisons and other closed settings are at least equivalent to those available in the community.

Prevention of self-harm and suicide

117. The CPT notes that there may be an increased risk of self-harm or suicide and/or violence-related psycho-trauma for many transgender persons in prisons, in line with the similarly high risks found outside prisons. Studies indicate that self-harm or suicide risk factors may include discrimination, family rejection and internalised (or externalised) transphobia. It is therefore important to assess the risk of suicide among transgender persons in prison and discuss any past experiences of prejudice or mistreatment to prevent further victimisation.⁹

118. The CPT considers that national authorities should take the necessary steps to ensure that transgender persons in prisons (and, where appropriate, in other closed institutions) have access to assessment and treatment in the same conditions as in the community, including regular access to mental healthcare services and psychosocial support (see below).

Access to mental healthcare services and psychosocial support

119. Transgender persons may become vulnerable in prison. As such, prison authorities should facilitate their access to psychosocial support through multidisciplinary case management approaches, with the meaningful engagement of the person concerned.

9. See, for example, Newcomb, M. E., Hill, R., Buehler, K., Ryan, D. T., Whitton, S. W., & Mustanski, B. (2020). [High Burden of Mental Health Problems, Substance Use, Violence, and Related Psychosocial Factors in Transgender, Non-Binary, and Gender Diverse Youth and Young Adults](#). *Archives of sexual behaviour*, 49(2), 645–659. and Narang, P., Sarai, S. K., Aldrin, S., & Lippmann, S. (2018). [Suicide Among Transgender and Gender-Nonconforming People](#). *The primary care companion for CNS disorders*, 20(3), 18nr02273.; 'mapping of good practices for the management of transgender prisoners'; Association for the Prevention of Torture (APT)'s [Towards the Effective Protection of LGBTI Persons Deprived of Liberty: A Monitoring Guide](#); [Personnes LGBTIQ+ | CSCSP](#).

Additional psychological support should be provided, including special counselling for those victimised prior to incarceration.

120. The CPT has observed differing levels of access to psychologists across various member states, ranging from regular access to almost no access at all. Access to counselling and psychological support should be systematically offered to all transgender persons in prisons upon admission and throughout their time in prison.

Access to hormone treatment and gender-affirming surgery

121. When visiting prisons across the Council of Europe region, the CPT has had an opportunity to examine whether gender affirming procedures such as hormone treatment and surgery, together with psychological support, are available to transgender persons living in prisons, and whether there are procedures in place for changing the name and sex marker of a transgender person on identity cards and other official documents. In several countries visited, the CPT has seen that transgender women were able to continue or start hormonal treatment while in prison, however, surgical interventions had to be deferred until after release.

122. Prison authorities should allow access to gender-affirming treatments and surgery for transgender prisoners, for those who so wish. Ideally, where such health services are included in national health insurance schemes, the cost should be absorbed at an equal rate as that for transgender persons living in the community. This must be done based on a careful and comprehensive risk assessment involving medical doctors, psychologists and social workers.

123. In the CPT's view, persons deprived of their liberty should not be excluded from benefiting from these treatments and legal procedures provided for by law for transgender persons. National authorities should act to ensure that transgender persons in prisons (and, where appropriate, in other closed institutions) have access to assessment and treatment and, if they so wish, to gender affirming surgery.

Specific training for healthcare staff

124. The CPT endorses the global standards established by the World Professional Association for Transgender Health (WPATH) to improve healthcare for transgender individuals. In general, most care can be provided by primary care physicians, although access to some specialised services is necessary. Education on transgender health is essential for healthcare professionals.

General healthcare screening

125. As transgender persons are among the vulnerable groups at risk of various health problems, it is important to conduct thorough medical screenings during the healthcare admission process and, as required, at regular intervals during their imprisonment, both as a general healthcare measure, and to safeguard their own health.



||| The environment, and in particular the effects of climate change and its possible repercussions for persons deprived of their liberty, must be taken into account when assessing detention conditions.

The CPT and the environment

126. Climate disruption affects particularly the most vulnerable and has a direct impact on those who are deprived of their liberty. When heatwaves and cold snaps set in, detention conditions could quickly become unbearable and even degrading.

127. The final declaration adopted on 17 May 2023 at the Council of Europe Summit of Heads of State and Government in Reykjavík, “United around our values”, determined the interrelationship between the environment and human rights one of the priorities for the organisation.¹⁰ This commitment follows the United Nations General Assembly Resolution of 28 July 2022, which recognised the right to a healthy and sustainable environment as a new fundamental right.¹¹

128. As a mechanism for preventing ill-treatment, the CPT adopted certain standards for “A decency threshold for prisons – criteria for assessing conditions of detention” in 2021, following the Covid-19 pandemic.¹² The CPT set out the basic principles that must be respected in order to protect the human rights of all persons living in places of detention during the pandemic and not to impinge on the basic right of prisoners to live a safe, humane, healthy and dignified life while deprived of liberty.

129. In this respect, when exercising its mandate, the CPT pays close attention to the evolving case-law of the European Court of Human Rights on environmental issues, particularly when those affect the exercise of the rights guaranteed under Article 3 of the European Convention on Human Rights, which could be compromised by the deterioration of the environment and exposure to environmental risks. For example, the Court held in the past that certain conditions of detention, such as the presence of damp in cells as well as poor water and air quality, constitute a violation of Article 3 of the Convention.¹³

130. With a systemic impact on the climate, the environmental crisis is creating unprecedented challenges for the authorities of the states parties to the convention which established the CPT. This raises difficulties in different places of deprivation of liberty, both for persons deprived of liberty and staff working in these places. For example, in the face of ever more frequent heatwaves, specific measures must be taken to alleviate the high temperatures in prison cells and ensure that all detained persons have adequate access to drinking water.

131. The Committee emphasises that the environment, and in particular the effects of climate change and its possible repercussions for persons deprived of their liberty, must be taken into account when assessing detention conditions. The CPT is committed to working to ensure that environment - and climate - related issues are duly considered within the framework of its mandate.

10. [Reykjavik declaration - 4th Summit of Heads of State and Government of the Council of Europe, 16-17 May 2023](#)

11. [Resolution adopted by the General Assembly on 28 July 2022 A/RES/76/300](#)

12. See [CPT/Inf\(2021\)5-part, extract from the 30th General Report of the CPT](#)

13. See judgments in the cases of *Kadikis v. Latvia* (application no. 62393/00) and *Marian Stoicescu v. Romania* (application no. 12934/02)



In 2023, all three members of the Committee's Bureau, Alan Mitchell – President, Hans Wolff– 1st Vice-President, and Therese Rytter – 2nd Vice-President were re-elected for a further two-year term.



Organisational matters

CPT membership

132. On 31 December 2023, the CPT comprised 41 members. The seat in respect of Bosnia and Herzegovina was still vacant. No list of candidates had been received in time for the election of members in respect of Malta and the Russian Federation. The lists of candidates for Albania, Poland and the Slovak Republic have been submitted, with elections due to take place in early 2024.

133. In the course of 2023, nine members were elected: Lise-Lotte Carlsson (in respect of Finland), Tom Daems (in respect of Belgium), Slavica Dimitrievska (in respect of North Macedonia), Eleana Fitidou (in respect of Cyprus), Gautam Gulati (in respect of Ireland), Dovilė Juodkaitė (in respect of Lithuania), Imants Jurevičius (in respect of Latvia), Anahit Manasyan (in respect of Armenia) and Vasilis Tzevelekos (in respect of Greece). In addition, nine members were re-elected: Vânia Costa Ramos (in respect of Portugal), Vanessa Durich-Moulet (in respect of Andorra), Marie Kmecová (in respect of Czech Republic), Kristina Pardalos (in respect of San Marino), Ceyhun Qaracayev (in respect of Azerbaijan), Răzvan-Horatiu Radu (in respect of Romania), Aleksandar Tomčuk (in respect of Montenegro), Elsa Bára Traustadóttir (in respect of Iceland) and Elisabetta Zamparutti (in respect of Italy).

A list of CPT members as at 31 December 2023 can be found in Appendix 3.

134. The next biennial renewal of the CPT's membership is due to take place at the end of 2025, the terms of office of 22 members of the Committee expiring on 19 December of that year.

The CPT trusts that the national delegations in the Parliamentary Assembly which have not submitted a list of candidates in 2023 will do so in early 2024. This will enable the Bureau of the Assembly to examine the list of candidates and thereafter send their order of preference to the Committee of Ministers which is charged with electing a candidate to fill the vacant seats as soon as possible.

Bureau of the CPT

135. In 2023, all three members of the Committee's Bureau, Alan Mitchell (in respect of United Kingdom) – President, Hans Wolff (in respect of Switzerland) – 1st Vice-President, and Therese Rytter (in respect of Denmark) – 2nd Vice-President were re-elected for a further two-year term.

Secretariat of the CPT

136. 2023 saw several changes to the Secretariat of the CPT, with the departure of three colleagues. The Committee's former Executive Secretary Régis Brillat, together with his Assistant, Catherine Gheribi, left to take up other roles within the Council of Europe. The Committee would like to thank them for their work within the CPT. Antonella Nastasie, to whom the Committee would like to express its sincere gratitude for her contribution to the CPT's work over many years as Assistant to the Committee, retired.

137. The Committee also welcomes the appointment of four staff members in 2023, namely: Véra Manuello as Administrator, Oana Moldovean as Assistant to the Committee, Eva Gerlier as Division 1 Assistant and Mira Mastronardi-Korsos confirmed as Division 3 Assistant.

138. A list of Secretariat members as at 31 December 2023 is set out in Appendix 4.

Appendices

1. The CPT's mandate and modus operandi

The CPT was set up under the 1987 Council of Europe Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment. According to Article 1 of the Convention, “[t]he 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 States Parties to the Convention on a regular basis. Ad hoc visits are organised 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 and 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 State 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 establishments to encompass, for example, psychiatric hospitals, social welfare institutions, military detention facilities, immigration detention centres, and establishments in which juveniles may be deprived of their liberty by judicial or administrative order.

Two fundamental principles govern relations between the CPT and States Parties to the Convention – cooperation 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 in preventing 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 national authorities. The Committee’s visit report is, in principle, confidential; however, most of the reports are eventually published at the request of the Government concerned.

2. The CPT's field of operations (as at 31 December 2023)

All member states of the Council of Europe are States Parties to the Convention establishing the Committee.¹⁴

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
Republic of Moldova	02/05/1996	02/10/1997	01/02/1998

14. The Convention was opened for signature by the member states of the Council of Europe on 26 November 1987.

Council of Europe Member States	Date of signature	Date of ratification	Date of entry into force
Monaco	30/11/2005	30/11/2005	01/03/2006
Montenegro			06/06/2006 ¹⁵
Netherlands	26/11/1987	12/10/1988	01/02/1989
North Macedonia	14/06/1996	06/06/1997	01/10/1997
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
San Marino	16/11/1989	31/01/1990	01/05/1990
Serbia	03/03/2004	03/03/2004	01/07/2004
Slovak Republic	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
Türkiye	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
Council of Europe Non-Member States	Date of signature	Date of ratification	Date of entry into force
Russian Federation	28/02/1996	05/05/1998	01/09/1998

Since 1 March 2002, the Committee of Ministers of the Council of Europe may invite any non-member state of the Council of Europe to accede to the Convention. To date, no such invitation has been made.

On 16 March 2022, the Committee of Ministers decided, in the context of the procedure launched under Article 8 of the Statute of the Council of Europe, that the Russian Federation ceased to be a member of the Council of Europe as from that date. However, the Russian Federation continues to be a Contracting Party to the Convention as a non-member state of the Council of Europe (Resolution CM/Res(2022)3).

15. 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.

Monitoring of the situation of persons convicted by international tribunals or special courts and serving their sentence in a State Party to the Convention

Germany

Three visits were carried out, in 2010, 2013 and 2020 in pursuance of an Exchange of Letters dated 7 and 24 November 2000 between the International Criminal Tribunal for the former Yugoslavia (ICTY) and the CPT, and an Enforcement Agreement concluded in 2008 between the ICTY and the Government of the Federal Republic of Germany.

Portugal

One visit was carried out in 2013 in pursuance of the above-mentioned Exchange of Letters between the ICTY and the CPT, and the Agreement between the United Nations and the Portuguese Government on the Enforcement of Sentences of the ICTY dated 19 December 2007.

United Kingdom

Five visits were carried out, in 2005, 2007, 2010, 2019 and 2023 in pursuance of the above-mentioned Exchange of Letters between the ICTY and the CPT, and the Agreement between the United Nations and the Government of the United Kingdom of Great Britain and Northern Ireland on the Enforcement of Sentences of the ICTY dated 11 March 2004.

Two visits were carried out, in 2014 and 2018 in pursuance of an Exchange of Letters between the Residual Special Court for Sierra Leone (RSCSL) and the CPT dated 20 January and 5 February 2014, and an Agreement between the RSCSL and the United Kingdom Government dated 10 July 2007.

One visit was carried out in 2019 in pursuance of an Exchange of Letters between the International Criminal Court (ICC) and the CPT dated 2 and 9 November 2017, and the Enforcement Agreement between the Government of the United Kingdom of Great Britain and Northern Ireland and the ICC on the enforcement of sentences imposed by the ICC, adopted on 8 November 2007.

Special monitoring arrangements

Kosovo*

One visit was carried out in 2007 on the basis of an agreement signed in 2004 between the Council of Europe and the United Nations Interim Administration Mission in Kosovo (UNMIK) and an Exchange of Letters concluded in 2006 between the Secretaries General of the Council of Europe and the North Atlantic Treaty Organization (NATO). Two separate

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

reports were transmitted to UNMIK and NATO. The report to UNMIK has been published (together with the response provided by UNMIK).

Three visits were carried out, in 2010, 2015 and 2020 on the basis of the above-mentioned agreement between the Council of Europe and UNMIK. The reports on the aforementioned visits have been published (together with the responses provided by UNMIK).



3. CPT members in order of precedence (as at 31 December 2023)

Name	Elected in respect of:	Term of office expires:
Alan MITCHELL, President	United Kingdom	19/12/2025
Hans WOLFF, 1st Vice-President	Switzerland	19/12/2025
Therese Maria RYTTER, 2nd Vice-President	Denmark	19/12/2025
Gergely FLIEGAUF	Hungary	19/12/2025
Nico HIRSCH	Luxembourg	19/12/2025
Alexander MINCHEV	Bulgaria	19/12/2025
Ömer MÜSLÜMANOĞLU	Türkiye	19/12/2025
Marie KMECOVÁ	Czech Republic	19/12/2027
Ceyhun QARACAYEV	Azerbaijan	19/12/2027
Răzvan Horațiu RADU	Romania	19/12/2027
Vânia COSTA RAMOS	Portugal	19/12/2027
Elisabetta ZAMPARUTTI	Italy	19/12/2027
Slava NOVAK	Slovenia	19/12/2025
Vincent DELBOS	France	19/12/2025
Chila VAN DER BAS	Netherlands	19/12/2025
Victor ZAHARIA	Republic of Moldova	19/12/2025
Tinatin UPLISASHVILI	Georgia	19/12/2025

Name	Elected in respect of:	Term of office expires:
Elsa Bára TRAUSTADÓTTIR	Iceland	19/12/2027
Juan Carlos DA SILVA OCHOA	Spain	19/12/2025
Aleksandar TOMČUK	Montenegro	19/12/2027
Kristina PARDALOS	San Marino	19/12/2027
Vanessa DURICH MOULET	Andorra	19/12/2027
Gunda WÖSSNER	Germany	19/12/2025
Judith ÖHRI	Liechtenstein	19/12/2025
Asbjørn RACHLEW	Norway	19/12/2025
Sanja BEZBRADICA JELAVIĆ	Croatia	19/12/2025
Karin ROWHANI-WIMMER	Austria	19/12/2025
Mari AMOS	Estonia	19/12/2025
Dmytro YAGUNOV	Ukraine	19/12/2025
Nikola KOVAČEVIĆ	Serbia	19/12/2025
Anna JONSSON CORNELL	Sweden	19/12/2025
Jean-Charles GARDETTO	Monaco	19/12/2025
Tom DAEMS	Belgium	19/12/2027
Lise-Lotte CARLSSON	Finland	19/12/2027
Slavica DIMITRIEVSKA	North Macedonia	19/12/2027
Dovilė JUODKAITĖ	Lithuania	19/12/2027
Vasilis TZEVELEKOS	Greece	19/12/2027
Gautam GULATI	Ireland	19/12/2027
Imants JUREVIČIUS	Latvia	19/12/2027
Eleana FITIDOU	Cyprus	19/12/2027
Anahit MANASYAN	Armenia	19/12/2027

On 31 December 2023, the seats in respect of Albania, Bosnia and Herzegovina, Malta, Poland, the Slovak Republic, and the Russian Federation were vacant.



4. CPT Secretariat (as at 31 December 2023)

CPT Secretariat

Christos GIAKOUMOPOULOS, Acting Executive Secretary
Secretariat: ..., Personal Assistant
Oana MOLDOVEAN, Assistant to the Committee

Transversal Support Division

..., Head of Division
Morven TRAIN, Administrative and budgetary questions
Patrice WEBER, Information strategies and management, Communication

Secretariat: Lamia ABDENNOURI

Divisions responsible for visits

Division 1

Marco LEIDEKKER, Head of Division	Albania	Luxembourg
Administrators:	Andorra	Republic of Moldova
Petr HNATIK	Belgium	Monaco
Véra MANUELLO	Czech Republic	Netherlands
Kelly SIPP	Estonia	Norway
Catherine O'BAOILL, Administrative Assistant	France	Slovak Republic
Secretariat: Eva GERLIER	Hungary	Slovenia
	Kosovo	
	Latvia	

Division 2

Borys WÓDZ, Head of Division	Armenia	Iceland
Administrators:	Austria	Liechtenstein
Elvin ALIYEV	Azerbaijan	Lithuania
Almut SCHRÖDER	Bulgaria	Poland
Dalia ŽUKAUSKIENĖ	Denmark	Russian Federation
Secretariat: Natia MAMISTVALOVA	Finland	Sweden
	Georgia	Türkiye
	Germany	Ukraine

Division 3

Hugh CHETWYND, Head of Division	Bosnia and Herzegovina	North Macedonia
Administrators:	Croatia Cyprus	Portugal
Francesca GORDON	Greece	Romania
Paolo LOBBA	Ireland Italy	San Marino
Cristian LODA	Malta	Serbia
Sebastian RIETZ	Montenegro	Spain
..., Administrator		Switzerland
Françoise ZAHN, Administrative Assistant		United Kingdom
Secretariat: Marie-Claude FRECHOSO		

5. CPT visits, reports and publications

(as at 31 December 2023)

Visits carried out in pursuance of Article 7 of the Convention

Member States of the Council of Europe	Periodic visits	Ad hoc visits	Reports sent	Reports published	Reports not published
Albania *	7	8	14	14	0
Andorra	4	0	4	4	0
Armenia	6	5	10	10	0
Austria *	7	0	7	7	0
Azerbaijan	5	8	13	11	2
Belgium	7	5	12 ^a	12 ^a	0
Bosnia and Herzegovina	5	4	9	9	0
Bulgaria *	8	7	15	14	1
Croatia	6	1	7	7	0
Cyprus	8	1	9	8	1
Czech Republic *	6	2	8	8	0
Denmark *	6	1	7	7	0
Estonia	6	1	7	6	1
Finland *	6	0	6	6	0
France	7	9	15	15	0
Georgia	6	4	10	9	1
Germany	7	4	11	10	1
Greece	7	13	18 ^b	18	0
Hungary	7	4	10	10	1
Iceland	5	0	5	5	0
Ireland	7	0	7	7	0
Italy	8	7	15	15	0
Latvia	6	3	9	9	0
Liechtenstein	4	0	4	4	0
Lithuania *	6	2	8	8	0
Luxembourg *	5	1	6	6	0
Malta	6	4	9	9	0
Republic of Moldova *	7	10	17	14	3 ^c
Monaco *	3	0	3	3	0
Montenegro	4 ^d	1	5	5	0
Netherlands	7	5	14 ^e	14 ^e	0
North Macedonia *	7	8	14	14	0

Member States of the Council of Europe	Periodic visits	Ad hoc visits	Reports sent	Reports published	Reports not published
Norway *	5	1	6	6	0
Poland	7	1	8	7	1
Portugal	8	4	12	12	0
Romania	6	7	12 ^f	12 ^f	0
San Marino	5	0	5	5	0
Serbia	5 ^d	2	7 ^d	6 ^d	1
Slovak Republic	7	0	6	6	0
Slovenia *	5	0	5	5	0
Spain	8	10	18	18	0
Sweden *	6	1	7	7	0
Switzerland	7	1	8	8	0
Türkiye	8	25	31 ^g	27	4
Ukraine *	8	9	16	16	0
United Kingdom	9	18	28 ^h	26 ^h	2
Non-Member States of the Council of Europe	Periodic visits	Ad hoc visits	Reports sent	Reports published	Reports not published
Russian Federation ⁱ	8	22	27 ^j	4	23

* States which have authorised publication of all future visit reports of the CPT (“automatic publication procedure”).

- (a) Including one report on the visit to Tilburg Prison (Netherlands) in 2011.
- (b) These 18 reports cover 19 visits carried out. The report published in 2021 covered two visits.
- (c) Two reports concerning visits to the Transnistrian region and one report concerning a visit to Prison No. 8 in Bender.
- (d) Including one visit organised in September 2004 to Serbia and Montenegro.
- (e) Including a separate report on the visit to Tilburg Prison in the context of the periodic visit in 2011. Also including two separate reports covering the 1994 visit to the Netherlands Antilles and to Aruba.
- (f) These 12 reports cover 13 visits carried out.
- (g) These 31 reports cover 33 visits carried out.
- (h) Including two separate reports covering the 2010 visit to Jersey and Guernsey.
- (i) On 16 March 2022, the Committee of Ministers decided, in the context of the procedure launched under Article 8 of the Statute of the Council of Europe, that the Russian Federation ceases to be a member of the Council of Europe as from that date. The Russian Federation continues to be a Contracting Party to the Convention as a non-member of the Council of Europe from this date (Resolution CM/Res(2022)3).
- (j) These 27 reports cover 30 visits carried out.

6. Countries and places of deprivation of liberty visited by CPT delegations (January – December 2023)

Periodic visits

Luxembourg

27 March - 4 April 2023

Police establishments

- Police Station, Luxembourg
- Police Station, Esch-sur-Alzette

Prison establishments

- Luxembourg Prison, Schrassig
- Uerschterhaff Remand Prison, Sanem

Establishment for minors

- Security Unit (Unisec) of the State Socio-Educational Centre, Dreiborn

Psychiatric establishments

- Neuropsychiatric Hospital (CHNP), Ettelbruck
- Emile Mayrisch Hospital (CHEM), Esch-sur-Alzette

Other places of deprivation of liberty

- Cells of the District Tribunal, Cité judiciaire, Luxembourg
- Cells of the Superior Court of Justice, Cité judiciaire, Luxembourg
- Secure rooms of the CHEM, Esch-sur-Alzette

Albania

4 - 15 May 2023

Police establishments

- Elbasan Police Station
- Fier Police Station
- Koplik Police Station
- Laç Police Station
- Lezha Police Station
- Shkodra Police Station

Prison establishments

- Fier Prison
- Peqin Prison
- Tepelena Prison
- Prison No. 313, Tirana
- Prison Hospital, Tirana (unit for female forensic psychiatric patients)

Psychiatric establishments

- Temporary facility for male forensic psychiatric patients at Lezha Prison

Social care establishments

- Durres Development Centre for Persons with Disabilities
- Shkodra Development Centre for Persons with Disabilities

Cyprus

9 - 17 May 2023

Police establishments

- Ammochostos Division
- Paralimni Police Station

Larnaca Division

- Aradippou Police Station

Kofinou Police Station

- Oroklini Police Station

Limassol Division

- Germasogia Police Station
- Limassol Central Police Station

Nicosia Division

- Criminal Investigation Department (C.I.D.) Nicosia
- Lakatamia Police Detention Station
- Nicosia Central Police Station
- Pera Chorio Nisou Police Station

Paphos Division

- Paphos Central Police Station
- Polis Chrysochous Police Station

Prison establishments

- Nicosia Central Prisons

Immigration detention facilities

- Holding facilities for immigration detainees at Larnaca Airport
- Holding facility for immigration detainees at Paphos Airport
- Kokkinotrimithia Initial Registration centre "Pournara"
- Limnes Multi-purpose Immigration Centre
- Menoyia Detention Centre for Illegal Immigrants
- Crown Resorts Henipa Shelter for unaccompanied and separated children
- Various police custody facilities where foreign nationals may be held under Aliens Legislation (listed above)

Hungary

16 - 26 May 2023

Police establishments

- Police Detention Facility in Debrecen (Samsoni Street)
- Police Station in Debrecen (Budai Street)
- Police Station in Nyíregyháza (Stadion Street)
- Police Station in Székesfehérvár (Dozsa György Street)
- Police Detention Facility in Székesfehérvár (Deák Ferenc Street)
- Police detention facility in Törökszentmiklós

Establishments under the authority of the Hungarian Prison Service

- Judicial Observation and Psychiatric Institute (IMEI), Budapest
- Middle-Transdanubium National Prison (Unit Székesfehérvár)
- Szabolcs-Szatmár-Bereg County Remand Prison, Nyíregyháza
- Tiszalök National Prison
- Budapest Remand Prison (Unit II) (targeted visit to interview newly admitted remand prisoners)

Psychiatric establishments

- Psychiatric department of Flór Ferenc Hospital in Kistarcsa
- Psychiatric department of Gróf Tisza István Hospital in Berettyóújfalú

Estonia

29 May - 8 June 2023

Establishments under the Ministry of Interior

- Tallinn Detention House
- Kuressaare Detention House
- Narva Police Station
- Tallinn-East Police Station
- Tallinn Sobering-up Centre
- Tartu Police Station
- Viljandi Police Station
- Võru Police Station
- Tallinn Immigration Detention Centre (“Detention Centre of the Information Bureau of the Northern Prefecture of the Police and Border Guard Board”)
- Luhamaa Border Post
- Narva Border Post

Establishments under the Ministry of Justice

- Tallinn Prison
- Tartu Prison
- Viru Prison

Establishments under the Ministry of Social Affairs

- Ahtme Psychiatric Hospital
- Forensic Psychiatric Department of Viljandi Hospital
- Psychiatric Department of Kuressaare Hospital
- Psychiatric Clinic of Northern Estonian Medical Centre, Tallinn

Establishment under the Ministry of Defence

- Kuperjanov Infantry Battalion, Taara Army Base, Võru

Armenia

12 - 22 September 2023

Police establishments

- Detention Centre of Yerevan City Police Department
- Ashtarak Police Division
- Gavar Police Division
- Gyumri Police Division
- Hrazdan Police Division
- Martuni Police Division
- Sevan Police Division
- Talin Police Division
- Vardenis Police Division

Prison establishments

- Abovyan Prison
- Armavir Prison
- Artik Prison
- Central Prison Hospital
- Nubarashen Prison

Social care establishments

- Nork Residential Care Home for the elderly and/or persons with disabilities, Yerevan
- Vardenis Neuropsychiatric Residential Care Home for persons with psychiatric disorders and learning disabilities

Military establishments

- Disciplinary Battalion of the Military Police, Martuni
- Disciplinary Battalion of the Military Police, Yerevan

Malta

26 September - 5 October 2023

Police establishments

- Floriana Custody Centre, Police General Headquarters
- Custody Centre, Police Department, Victoria, Gozo

- Custody Centre, Malta International Airport
- Financial Crimes Investigation Department
- The Courts of Justice – Holding cells
- Hamrun Police Station

Prison establishments

- Corradino Correctional Facility
- Centre of Residential Restorative Services (CoRRS) (juveniles)

Immigration facilities

- Safi Detention Centre
- Hal Far Reception Centre (“China House”)
- Marsa Initial Reception Centre
- Dar Il Liedna (asylum seeking juveniles)

North Macedonia

2 - 12 October 2023

Police establishments

- Kičevo Police Station
- Butel/Chair Police Station, Skopje
- Bit Pazar Police Station, Skopje
- Centar Police Station, Skopje
- Gazi Baba Police Station, Skopje
- Veles Police Station

Prison establishments

- Bitola Prison (targeted visit to interview newly admitted pre-trial detainees)
- Idrizovo Prison
- Prilep Prison
- Skopje Prison
- Štip Prison
- Tetovo Education Correctional Institution

Institutions under the authority of the Ministry of Health

- Demir Hisar Psychiatric Hospital
- Skopje Psychiatric Hospital (Bardovci)

Institutions under the authority of the Ministry of Labour and Social Policy

- Demir Kapija Special Institution for Mentally Disabled Persons

Ukraine

16 - 27 October 2023

Police establishments

- Odesa Temporary Detention Facility (ITT) No. 1
- Pustomyty ITT
- Vinnytsia ITT No. 1 (Building 1, Pyrohovo street)
- Zhovkva ITT
- Zhytomyr ITT No. 1
- Lviv Police Station No. 1
- Podil Police Division, Kyiv
- Zhashkiv Police Station, Uman

Prison establishments

- Kyiv Pre-Trial Detention Facility (SIZO)
- Odesa SIZO
- Lviv Penitentiary Institution (No. 19)
- Vinnytsia Penitentiary Institution (No. 1)
- Zhytomyr Penitentiary Institution (No. 8)
- Starobabanivska Correctional Colony (№ 92), Uman
- Lviv Multi-Purpose Hospital (Prison Hospital)

Military detention facilities

- Kyiv Guardhouse (*Hauptvakht*)
- Odesa Guardhouse
- Zhytomyr Guardhouse
- Temporary holding premises for military servicemen (*KTZ*) in Lviv

The Slovak Republic

28 November - 8 December 2023

Establishments operating under the authority of the Ministry of the Interior

- Bratislava Regional Police Directorate
- Bratislava Aliens Police Department
- Nitra Regional Police Directorate
- Rožňava District Police Department
- Trnava Regional Police Directorate
- Žilina Regional Police Directorate
- Žilina-West District Police Department
- Medvedov Immigration Detention Facility

Establishments operating under the authority of the Ministry of Justice

- Hrnčiarovce nad Parnou Prison
- Ružomberok Prison
- Žilina Prison
- Bratislava Remand Prison (targeted visit to interview newly admitted remand prisoners)

Establishments operating under the authority of the Ministry of Health

- Psychiatric department of Bratislava University Hospital (Saints Cyril and Methodius Hospital)
- Psychiatric department of Rožňava Hospital
- Hronovce Detention Institute.

Ad hoc visits

United Kingdom

27 March - 6 April 2023

Establishments under the authority of the Home Office

- Brook House Immigration Removal Centre (IRC)
- Colnbrook IRC
- Colnbrook Short-Term Holding Facility
- Derwentside IRC
- Harmondsworth IRC

Establishments under the authority of the Ministry of Justice

- Pentonville Prison, London
- Wormwood Scrubs Prison, London

Georgia

25 - 27 March 2023

Health establishments

- VivaMedi Clinic, Tbilisi

Serbia

21 - 30 March 2023

Establishments under the authority of the Ministry of the Interior

- Metropolitan Police Headquarters, 29 November Street, Belgrade
- Stari Grad Police Station, Belgrade
- Novi Beograd Police Station, Belgrade
- Headquarters of the Service for combatting Organised Crime (SBPOK), Belgrade
- Zemun Police Station, Belgrade
- Novi Sad District Police Station
- Ruma Police Station

Establishments under the authority of the Ministry of Justice (remand sections only)

- Belgrade District Prison
- Novi Sad District Prison
- Sremska Mitrovica Penal Correctional Institution
- Subotica District Prison
- Kruševac Educational Correctional Facility for juvenile offenders (closed regime unit)

Bulgaria

21 - 31 March 2023

Establishments under the authority of the Ministry of Health

- Byala State Psychiatric Hospital
- Tserova Koria State Psychiatric Hospital

Establishments under the authority of the Ministry of Labour and Social Policy

- Home for persons with learning disabilities in Draganovo
- Home for persons with learning disabilities in Tri Kladentsi

Greece

21 November - 1 December 2023

Establishments under the authority of the Hellenic Police

Pre-removal detention centres

- Corinth Pre-removal Detention Centre
- Fylakio Pre-removal Detention Centre, Evros
- Kos Pre-removal Detention Centre
- Paranesti Pre-removal Detention Centre, Drama
- Petrou Ralli Pre-removal Detention Centre, Athens
- Xanthi Pre-removal Detention Centre

Police and border guard stations

- Athens Airport Special holding facility
- Omonia Police Station, Athens
- Drapetsona Police Station, Piraeus
- Didimoticho Police Station, Evros
- Feres Police and Border Guard Station, Evros
- Neo Cheimonio Police and Border Guard Station, Evros
- Orestiada Police Station, Evros
- Soufli Police and Border Guard Station, Evros
- Tycherio Police and Border Guard Station, Evros
- Kos Police Station
- Mytilene Police Station, Lesbos

Establishments under the authority of the Reception and Identification Service

Reception and identification centres

- Fylakio Reception and Identification Centre, Evros

Closed controlled access centres

- Lesvos Closed Controlled Access Centre
- Kos Closed Controlled Access Centre
- Samos Closed Controlled Access Centre

Establishments under the authority of the Hellenic Coast Guard

- Mytilene Coast Guard holding facility, Lesvos

France

28 November - 14 December 2023

French Guiana

Law enforcement establishments

- Saint-Laurent-du-Maroni border police facilities
- Saint-Georges de l'Oyapock border police facilities
- Félix Eboué International Airport border police facilities
- Cayenne Police Station
- Kourou Gendarmerie Brigade
- Mana Gendarmerie Brigade
- Régina Gendarmerie Brigade
- Saint-Georges de l'Oyapock Gendarmerie Brigade
- Saint-Laurent-du-Maroni Gendarmerie Brigade
- Cayenne Court of Appeal and Judicial Court holding facilities
- Cayenne-Rochambeau (Matoury) immigration detention centre
- Saint-Laurent-du-Maroni immigration detention premises

Prison establishments

- Rémire-Montjoly Prison

Health establishments

- Psychiatric unit ("Wapa" and "Comou" closed units) and the unit for children ("Acajou") at the Andrée Rosemon hospital in Cayenne (CHC)
- CHC emergency services
- CHC secure facilities.

Guadeloupe

Law enforcement establishments

- Point-à-Pitre Police Station
- Basse-Terre Police Station

- Capesterre-Belle-Eau Police Station
- Saint Claude Gendarmerie Brigade
- Morne-à-l'eau Gendarmerie Brigade
- « Abymes » immigration detention centre
- Point-à-Pitre Court holding facilities

Prison establishments

- Basse-Terre remand prison
- Baie-Mahault Prison

Health establishments

- Guadeloupe Public Mental Health Establishment (EPSM) (closed units in sectors 1 to 6, unit for children, and the Reception and Crisis Centre)
- Emergency services of the *Centre Hospitalier* of Basse Terre (CHBT) and the *Centre Hospitalier Universitaire* (CHU) of Guadeloupe.
- Secure facilities at the CHBT and CHU.

Germany

4 - 7 September 2023

Return Flight

During this ad hoc visit, the CPT monitored the different stages of the Frontex-supported return flight from Germany to Pakistan, including the gathering of returnees at the collecting centre of the federal state of Brandenburg and at the central gathering point at Berlin-Brandenburg Airport, the pre-flight phase at the airport facilities, the boarding of returnees, the in-flight phase, the stop-over and the hand-over phase.

“NO ONE SHALL BE SUBJECTED TO TORTURE OR TO INHUMAN OR DEGRADING TREATMENT OR PUNISHMENT”

Article 3 of the European Convention on Human Rights

Established in 1989 by the Council of Europe Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, the CPT's aim is to strengthen the protection of persons deprived of their liberty through the organisation of regular visits to places of detention.

— The Committee is an independent, non-judicial preventive mechanism, complementing the work of the European Court of Human Rights. It monitors the treatment of persons deprived of their liberty by visiting places such as prisons, juvenile detention centres, police stations, immigration detention facilities, psychiatric hospitals and social care homes. CPT delegations have unrestricted access to places of detention, and the right to interview, in private, persons deprived of their liberty. They may access all the information necessary to carry out their work, including any administrative and medical documents.

— The CPT plays an essential role in promoting decency in detention, through the development of minimum standards and good practice for states parties, as well as through coordination with other international bodies. The implementation of its recommendations has a significant impact on the development of human rights in Council of Europe member states and influences the policies, legislation and practices of national authorities regarding detention.



**Secretariat of the CPT
Council of Europe**

67 075 STRASBOURG Cedex – FRANCE
+33 (0)3 88 41 23 11

cptdoc@coe.int – www.cpt.coe.int

PREMS 052324

ENG

www.coe.int

The Council of Europe is the continent's leading human rights organisation. It comprises 46 member states, including all members of the European Union. All Council of Europe member states have signed up to the European Convention on Human Rights, a treaty designed to protect human rights, democracy and the rule of law. The European Court of Human Rights oversees the implementation of the Convention in the member states.

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE