KEY OBSERVATIONS

PRIORITY TOPICS

■ Co-operation

Take decisive action to ensure prompt and unconditional access to the medical information necessary for the CPT to carry out its work

■ Administrative detention centres

ILL-TREATMENT – Take urgent steps to prevent acts of violence between detainees

MATERIAL CONDITIONS – Ensure dignified material and hygiene conditions for detainees and develop the range of purposeful activities in detention facilities

SECURITY MEASURES – Ensure that isolation is only used as a last resort

■ Waiting areas

CHILDREN – Favour alternatives to keeping unaccompanied minors in waiting areas

GOOD PRACTICES

CHILDREN – Law No. 2024-42 of 26 January 2024 on immigration control and improved integration forbids the practice of locking up any minor (under the age of 18) in a detention centre or facility, even if accompanied by an adult.

MATERIAL CONDITIONS – The operational capacity of CRAs is revised according to the numbers present and the level of dilapidation of the premises and never exceeds the theoretical capacity.

THE CPT AND FRANCE

France ratified the ECPT in 1989, and the Committee's first visit took place in 1991.

Since ratification, the CPT has carried out 18 country visits to France – 8 periodic and 10 ad hoc – including 107 visits to police establishments, 51 to prisons, 23 to health institutions, 2 social welfare and educational-correctional establishments and 43 to immigration detention facilities.

All the visit reports have been published. France did not accept the automatic publication of the visit reports.

EXECUTIVE SUMMARY

In October 2025, the CPT visited six administrative detention centres (centres de rétention administrative – CRAs) in Coquelles, Lyon, Mesnil-Amelot and Paris-Vincennes, as well as two airport waiting areas at Lyon Saint-Exupéry and Roissy-Charles de Gaulle. This was the Committee's eighteenth visit to France and its tenth ad hoc visit.

Although the number of placements in CRAs has fallen since the CPT's visit in 2018, the average length of administrative detention has trebled to nearly 35 days on average and in excess of 40 days in several centres. The Committee questions the legitimacy of continued detention when actual removal is not reasonably feasible. Deprivation of liberty should only be used as a last resort, following an individual assessment of the situation and consideration of less intrusive alternatives, and only for the period strictly necessary and proportionate to the achievement of its legitimate objective.

The Committee deplores the lack of improvement, and even the worsening, of tensions and ill-treatment observed in detention since 2018. The material conditions observed in the CRAs visited were often dilapidated and in a state of serious disrepair. Some newer or recently renovated buildings showed signs of premature ageing. The prison-like appearance of the CRAs and the general austerity of the premises were obvious. This impression was due in particular to the rudimentary and particularly oppressive conditions on the premises. The recently built Lyon CRA No. 2 was presented to the CPT as a prototype for the design of future administrative detention centres. The configuration of this model accentuates the "prison-like" nature of CRAs, both through its enhanced security features and by limiting contact between police personnel and detainees.

Several detainees, particularly at the Paris-Vincennes CRA, alleged that they had been brutalised by police officers intervening in centres. Many people also reported provocations, insults, including of a racist nature, as well as unprofessional behaviour, in all of the CRAs visited. Detainees also indicated that they were reluctant to file complaints for fear of reprisals or out of a sense of resignation.

The CPT recognises the human and material constraints faced by the officers responsible for supervision in CRAs. Many police officers felt that they did not have the necessary resources or training to deal with the changing profile of detainees, mostly because of the "threat to public order" that they pose, and also because they often have addiction problems and psychiatric disorders. In addition, the detention facilities visited were unsuitable for looking after these groups, whether in terms of material conditions, the dynamic security system, the regime applied or healthcare. These difficulties cannot in any way justify ill-treatment or inappropriate behaviour by staff.

In 2025, the extent of violence among detainees appears to have worsened compared with the previous few years. At the national level, the number of incidents of violence among detainees almost doubled. Many detainees reported violence, often resulting in injuries (bruises, trauma, broken teeth), as well as frequent fights, theft or extortion, which could be fuelled by "settlings of scores" within the living units. Some people who were afraid asked to be placed in solitary confinement for their own safety.

Once again, this situation is mainly attributed to the persistence, or even exacerbation, of factors already identified in 2018 as sources of tension: problematic cohabitation, the almost total absence of activities, ineffective dynamic security, the poor quality of video surveillance in living areas and generally very poor material conditions. The visit carried out in 2025 highlights the widely shared feeling that these places are "real powder kegs", and the absence of an appropriate strategy to prevent violence between detainees.

The major problems of cleanliness, maintenance and dilapidation identified by the CPT call for immediate action and increased vigilance. These shortcomings contribute to a high risk of epidemics, exacerbated by overcrowding, and keeping people in material conditions such as these could undermine their dignity.

Screening for infectious diseases was not systematic. This situation is likely to promote the transmission of infectious diseases. The CPT calls on the French authorities to review the medical examination and vulnerability protocols on admission in all the CRAs visited.

With regard to persons in psychological distress or with psychiatric disorders, the CPT noted that there was no structured programme for the prevention of self-harm and other mental health crises. The Committee also questions the large number of medical certificates issued by the medical units concluding that the condition was incompatible with detention, yet which were not acted upon.

The use of segregation for "security" reasons was extremely common, particularly at the Paris-Vincennes CRA. Some people could be placed in segregation repeatedly, sometimes on more than 20 occasions. While these measures were brief in 2018 (generally lasting just a few hours), in 2025, they could go on for periods of up to several days. The grounds for placement in segregation and the assessment of the need for and proportionality of these measures thus remain unclear. The CPT notes frequent confusion between "health" and "security" isolation.

The CPT once again expresses serious reservations about the detention of unaccompanied minors in waiting areas. In principle, minors should always receive special care and be accommodated in facilities specifically designed for them, in accordance with their best interests.

Lastly, during the visit, access to places of detention and confidential interviews with detainees and national police officers took place without difficulty. However, the delegation encountered significant restrictions on access to these essential judicial and medical documents, delaying or hindering the full implementation of its mandate. The Committee points out that direct, full and timely access to relevant documents, in particular individual medical records and video surveillance material, is essential for assessing respect for and the effectiveness of detainees' rights and for the prevention of ill-treatment within the meaning of Article 3 of the European Convention on Human Rights. Ensuring this access strengthens prevention and the credibility of the system and protects dignity in detention, for the benefit of all parties to the Convention establishing the CPT.