COUNCIL OF EUROPE CONSEIL DE L'EUROPE

CPT/Inf (2012) 23

Report

to the Armenian Government on the visit to Armenia carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT)

from 5 to 7 December 2011

The Armenian Government has requested the publication of this report and of its response. The Government's response is set out in document CPT/Inf (2012) 24.

Strasbourg, 3 October 2012

Note:
In accordance with Article 11, paragraph 3, of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, certain names have been deleted.

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Copy of the letter transmitting the CPT's report

Mr Emil Babayan
Deputy Minister of Justice
Ministry of Justice
41/a Halabyan street
Yerevan 0079
ARMENIA

Strasbourg, 21 March 2012

Dear Mr Babayan,

In pursuance of Article 10, paragraph 1, of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, I enclose herewith the report to the Armenian Government drawn up by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) following its visit to Armenia from 5 to 7 December 2011. The report was adopted by the CPT at its 77th meeting, held from 5 to 9 March 2012.

The recommendations, comments and requests for information formulated by the CPT are set out in Appendix I. As regards more particularly the CPT's recommendations, having regard to Article 10 of the Convention, the Committee requests the Armenian authorities to provide **within three months** a response giving a full account of action taken to implement them. The Committee trusts that it will also be possible for the Armenian authorities to provide, in their response, reactions to the comments formulated in this report as well as replies to requests for information made.

As regards more specifically the first request for information made in paragraph 28 (i.e. confirmation that the inmate concerned has been transferred to a suitable health-care facility for assessment, nutrition and care), the CPT has requested the Armenian authorities to reply **within one month.**

The CPT would ask, in the event of the response being forwarded in Armenian, that it be accompanied by an English or French translation.

I am at your entire disposal if you have any questions concerning either the CPT's report or the future procedure.

Yours sincerely,

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

I. INTRODUCTION

A. Dates and context of the visit and composition of the delegation

1. In pursuance of Article 7 of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (hereinafter referred to as "the Convention"), a delegation of the CPT carried out a visit to Armenia from 5 to 7 December 2011[1]. The visit was one which appeared to the CPT "to be required in the circumstances" (cf. Article 7, paragraph 1, of the Convention).

2. In the report on the 2010 visit, the CPT made several recommendations concerning the treatment of life-sentenced prisoners[2], including those accommodated at Yerevan-Kentron Prison (hereafter referred to as Kentron Prison).

The information provided in the response of the Armenian authorities to that visit report, as well as in the course of subsequent correspondence with the CPT[3], did not alleviate the Committee's concerns about the above-mentioned issue and certain other problems highlighted in the report. The CPT therefore decided to return to Armenia in order to examine on the spot the steps taken by the authorities to implement the relevant recommendations of the Committee made after the 2010 visit.

For this purpose, the CPT's delegation carried out follow-up visits to Kentron Prison and to the unit for life-sentenced prisoners at Nubarashen Prison.

3. The CPT's visit was carried out by the following members of the Committee:

- Ivan JANKOVIĆ (Head of delegation)
- Marzena KSEL.

They were supported by Borys WÒDZ, Head of Division at the CPT's Secretariat, and assisted by:

- Timothy HARDING, psychiatrist and former Director of the University Institute of Forensic Medicine, Geneva, Switzerland (expert)
- Aram BAYANDURYAN (interpreter)
- Guevork GUEVORKIAN (interpreter).

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1 The CPT has previously carried out three periodic visits (October 2002, April 2006, May 2010) and two ad hoc visits (April 2004 and March 2008) to Armenia. The reports on these visits and the responses of the Armenian authorities are available on the Committee's website (http://www.cpt.coe.int).

2 See, in particular, paragraphs 69 to 74 of CPT/Inf (2011) 24.

3 In particular, the communications in reply to the letter from the CPT's President of 18 February 2011 concerning the situation of prisoners *A* and *B*, sentenced to life imprisonment and accommodated at Kentron Prison.

B. Co-operation received and consultations held by the delegation

4. In the course of the visit, the delegation held consultations with Emil BABAYAN, Deputy Minister of Justice, Nicolay ARUSTAMYAN, Advisor to the Minister of Justice, and Rafayel HOVANNISYAN, First Deputy Head of the Criminal Executive Department, as well as with other senior officials from the Ministry of Justice. A full list of the officials met during the visit is set out in Appendix II to this report.

5. The CPT wishes to thank the Armenian authorities for having facilitated the visit and responded quickly and efficiently to various requests made by the Committee. Particular words of thank go to Mr Vahe DEMIRTSHYAN, Head of the Department for International Legal Relations of the Ministry of Justice, the CPT's liaison officer.

6. On the local level, the delegation enjoyed excellent co-operation from the management and staff of Kentron Prison.

As for Nubarashen Prison, the CPT is grateful for the availability of the management and the staff. However, it should be noted that the delegation was not provided with full and accurate information about the use of one of the three disciplinary cells (i.e. the cell No. 00) at the establishment[4].

Further, it would appear that the Committee had previously received misleading information about these disciplinary cells from the Armenian authorities, which – in their letter of 6 September 2010 – informed the CPT that they were being refurbished. In fact, conditions in the disciplinary cells are at present even worse than in May 2010[5]. In this connection, the CPT must stress that the principle of co-operation, as set out in Article 3 of the Convention, encompasses the obligation to provide the Committee and its visiting delegations with accurate information[6].

7. As made clear by the CPT in the past, the principle of co-operation is not limited to steps taken to facilitate the task of visiting delegations. It also requires that decisive action be taken in response to the Committee's recommendations. In this respect, the CPT is concerned to note that the bulk of the recommendations made after the 2010 visit with respect to life-sentenced prisoners remain unimplemented.

Having regard to Articles 3 and 10, paragraph 2, of the Convention[7], the CPT calls upon the Armenian authorities to take effective steps in order to implement the Committee's recommendations.

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4 See paragraph 28.

5 See paragraph 122 of CPT/Inf (2011) 24

6 In this context, reference is also made to Article 8, paragraph 2, points b. and d. of the Convention.

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

II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED

8. At the outset, it should be emphasised that the CPT's delegation received no recent and credible allegations of deliberate physical ill-treatment of prisoners by staff in either of the establishments visited. In general, the delegation observed that – despite the difficult material environment and the impoverished regime in both establishments – the attitude of staff towards prisoners was quite correct. The Committee welcomes the fact that the progress observed in this respect during the 2010 visit has been maintained.

A. Follow-up visit to Kentron Prison

1. Conditions of detention

9. Kentron Prison was visited by the CPT several times in the past (in 2002[8], 2004, 2008 and 2010); reference is thus made to the general description of this establishment in the reports on those visits[9]. On the first day of the 2011 visit, the prison was operating close to its official capacity of 55: there were 50 male adult inmates, including three life-sentenced prisoners[10], three other sentenced inmates and 44 remand prisoners (15 on trial and 29 under investigation).

10. As regards material conditions, minor improvements since the 2010 visit were observed: some of the cells had been redecorated and received new (either full or partial) partitions and tiling of their sanitary annexes; further, access to natural light and fresh air had improved in a few of the cells (e.g. cells No. 15 and 28). The delegation also noted ongoing refurbishment of the kitchen, the corridors and the administration quarters.

That said, the great majority of the cells remained poorly lit and ventilated, and the smaller cells were still too limited in size and too narrow (less than 2 metres wide) to accommodate prisoners for prolonged periods. This unfavourable state of affairs was compounded by the insufficient living space per prisoner in the cells (e.g. there were two inmates in most of the 6 m² cells, and up to five prisoners in the 15 m² cells). The delegation was also struck by the poor state of repair and cleanliness of the food storage room and of the showers.

11. The structural limitations of the establishment (occupying a relatively small site in the centre of Yerevan, and located within the compound of the National Security Service) also had a negative impact on the regime of activities. As had been the case during previous visits, prisoners spent 23 hours per day locked inside their cells, with no organised activities. Further, outdoor exercise continued to take place in small and oppressive yards on the roof of the building.

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8 When it was still under the authority of the Ministry of National Security, predecessor of the current National Security Service.

9 See paragraphs 53 to 61 of CPT/Inf (2004) 25; paragraphs 24 and 28 of CPT/Inf (2006) 38; paragraph 30 of CPT/Inf (2010) 7, and paragraph 71 of CPT/Inf (2011) 24.

10 They were the same prisoners whom the CPT's delegation interviewed in May 2010, including prisoners *A* and *B* (see paragraph 14).

The delegation noted as a positive development that there were now TV sets in every cell (and some of the cells also had DVD players); further, inmates had access to books and newspapers (albeit essentially those brought by visitors or bought by the prisoners themselves – the prison still had no library worthy of the name). However, this could hardly be considered sufficient, in particular as regards prisoners held in the establishment for prolonged periods of time[11] .

12. Regarding contact with the outside world, the delegation observed a serious problem due – once again – to the structural limitations of Kentron Prison, namely that sentenced prisoners were prevented from receiving long-term visits, despite the fact that they were entitled to such visits under the law[12].

13. Consequently, the conclusion reached by the CPT after its previous visits, namely that conditions at Kentron Prison are not suitable for lengthy periods of detention, remains fully valid. The Committee understands that it is planned to close the establishment within the next few years (see paragraph 32). Pending this, **the CPT calls upon the Armenian authorities to take the following steps with respect to Kentron Prison:**

- **ensure, as a matter of priority, that all areas of the prison (including the cells, showers and food storage located in the basement) are maintained in a satisfactory state of repair and cleanliness;**

- **improve access to natural light and fresh air in all cells;**

- **reduce occupancy rates in the larger cells (so as to provide at least 4 m² of living space per inmate) and reserve the smaller (6 m²) cells exclusively for single occupancy and for short detention periods (i.e. not exceeding a few weeks);**

- **improve conditions in the establishment's exercise yards and, in particular, enlarge them and provide some sports equipment;**

- **develop significantly the offer of activities for all the inmates; to begin with, prisoners from different cells should be allowed to associate in the exercise yards, and some form of sports activity (e.g. table tennis, weightlifting, etc) should be offered to them during their exercise periods;**

- **ensure that sentenced prisoners are able to receive long-term visits under decent conditions, as provided for by the law.**

14. The delegation paid particular attention to the manner in which the CPT's recommendations concerning the conditions of detention of life-sentenced prisoners at Kentron Prison, made in paragraph 71 of the report on the 2010 visit, had been followed up by the Armenian authorities.

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11 Regarding specifically the life-sentenced prisoners, see paragraphs 14 and 15.

12 Section 92 of the Penitentiary Code. See also paragraph 124 of CPT/Inf (2011) 24.

As regards *material conditions*, the delegation noted that damaged floors and in-cell toilets had been repaired in the cells accommodating prisoners *A* and *B*, and effective steps had been taken to eliminate the mice in cell No. 18. However, the broken water tap in the same cell had still not been repaired, and paint was peeling off the walls in the cells of both prisoners. Further, no steps had been taken to enlarge the cells of the life-sentenced prisoners, improve access to natural light and provide a horizontal view outside.

Concerning *activities*, practically the only improvement was that all the life-sentenced prisoners now had (in the same way as other inmates) access to television, books and newspapers. It should be added that prisoners *A* and *B* had been allowed to meet once – in August 2011. Unfortunately, these were the only positive developments that could be observed. Life-sentenced prisoners still had no access to any recreational, sport, educational or work activities. Their only regular out-of-cell activity consisted of daily outdoor exercise, which was taken alone. Thus, the regime applied to the life-sentenced prisoners remained that of solitary confinement for an indefinite period[13].

15. All in all, the CPT cannot but reach the same conclusion as in the report on its 2010 visit, namely that conditions under which life-sentenced prisoners are accommodated at Kentron Prison could be considered as amounting to inhuman treatment.

In the light of the above, **the Committee calls upon the Armenian authorities to take urgent and effective steps to remedy the unacceptable situation of life-sentenced prisoners at Kentron Prison. Having regard to the establishment's structural limitations referred to in paragraph 11, the CPT has serious doubts as to whether this recommendation can be implemented without transferring the prisoners concerned to other, more suitable facilities. Pending such a development, life-sentenced prisoners must without further delay be allowed to associate with each other and with other sentenced inmates.**

2. Health care

16. Regarding the provision of health care in general, the delegation noted that access to primary care was just about acceptable at Kentron Prison. The health-care service was staffed with a full-time doctor (specialist in internal medicine) and a full-time nurse[14]. The doctor worked 8-9 hour shifts from Monday to Friday and was on call outside these periods; however, no medically trained personnel was present at the establishment at night and on weekends. It should also be added that neither the doctor nor the nurse attended regular refresher courses[15].

The delegation was told that there was no problem with the supply of basic medication and related materials. As for the premises and equipment, they were very modest: a small cramped office fitted *inter alia* with an old (broken) dental chair, an examination couch, an ECG machine (that did not appear to have been used recently), three blood pressure meters, a blood glucose meter and two stethoscopes.

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13 On this issue, see paragraphs 53 to 64 of the 21st General Report on the CPT's Activities (2010-2011), document CPT/Inf (2011) 28.

14 There was a vacant feldsher's post.

15 The nurse, who had worked in the establishment since 1979, could not remember ever having attended any such course.

17. The delegation was concerned to note that access to specialist care, especially dental and psychiatric, was problematic at Kentron Prison. In practice, specialist consultations and examinations (including for dental care) were as a rule organised only if the inmates concerned could pay for them[16]; transfers to the Prison Hospital were arranged exclusively in emergency cases.

18. Medical examination of newly-arrived prisoners was said to include screening for any injuries; however, the relevant register was poorly kept. Further, the delegation was concerned to note that, in some cases at least, the screening for – and recording of – injuries was performed by a medically untrained member of custodial staff (i.e. the duty officer), with the doctor only counter-signing the relevant entry in the register.

It should also be stressed that the quality of the medical documentation in general left much to be desired.

19. The initial medical examination was the occasion for the doctor to inquire about the presence of any transmissible diseases, in particular tuberculosis. In case of suspicion of TB, further investigations (including three consecutive sputum tests and fluorography) were performed. In addition, an annual prophylactic fluorography of all prisoners was carried out using a mobile machine.

20. **The CPT recommends that the following steps be taken with respect to the health-care service at Kentron Prison:**

- **ensure that a person qualified to provide first aid, preferably someone with a recognised nursing qualification, is always present at the establishment, including at night and on weekends;**

- **make efforts to fill the vacant feldsher's post;**

- **provide the doctor and the nurse with regular refresher courses;**

- **ensure adequate access to specialist (including dental and psychiatric) consultations and treatment; such access should be free of charge for prisoners without the necessary means to pay for it;**

- **ensure that the screening for injuries in respect of newly-arrived prisoners is always performed by a member of the health-care team, and improve the quality of the recording of such injuries;**

- **more generally, ensure that all the medical documentation is properly kept.**

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[16] One notable exception was the psychiatric assistance provided to two of the life-sentenced prisoners, see paragraph 21.

21. In the report on the 2010 visit, the CPT stated that prisoners *A* and *B* had unmet serious mental-health needs[17]. Both of these life-sentenced inmates were seen during the 2011 visit by the delegation's forensic psychiatrist, who also examined their medical files and spoke with the establishment's doctor and the visiting psychiatrist.

Some psychiatric care had been provided to the prisoners concerned since the 2010 visit, but it was clear that this assistance had been insufficient. Psychiatric interviews had taken place at about three-monthly intervals; as for the treatment, it had exclusively consisted of psychotropic medication, which had been regularly interrupted since the prison doctor did not prolong treatment after one month following the psychiatrist's visits. The visiting psychiatrist told the delegation that he did not have the time to visit Kentron Prison even on a monthly basis. There were no psychiatric nurses available, and no possibility to organise any therapeutic activities at the establishment.

Both of these life-sentenced prisoners displayed a high degree of psychological vulnerability, a clear consequence of their solitary confinement and almost total lack of meaningful activities or human contact[18]. Prisoner *A*'s mental state had changed radically since 2010: he had a bizarre and productive verbal output, with no sign of formal thought disorder or mental suffering. While not accepting that he was malingering (as suggested by the visiting psychiatrist), the CPT's expert agreed that prisoner *A* does not need hospitalisation at this stage. That said, he does require a regular psychiatric follow-up (monthly consultations); furthermore, the highly restrictive regime to which he remains subject entails a clear risk of further deterioration of his mental health.

Prisoner B's state had also changed since the 2010 visit. He had a fixed set of delusional beliefs and abnormal thought processes. Such a state requires continuous psychiatric supervision and treatment which can only be provided in a hospital setting; for example, he needs close supervision and motivation to ensure that he takes regularly the prescribed psychotropic medication.

22. In the light of the above, **the CPT calls upon the Armenian authorities to take immediate steps to provide prisoners *A* and *B* with adequate psychiatric treatment, including (in addition to regular psychiatric consultations and uninterrupted pharmacotherapy) a range of therapeutic activities such as sociotherapy and occupational therapy. In the case of prisoner *B*, the Committee recommends that steps be taken without delay to transfer him to an appropriate hospital-type facility.**

As concerns more generally the urgent need to remedy the unacceptable conditions of detention of life-sentenced prisoners at Kentron Prison, **reference should be made to the recommendations already set out in paragraph 15.**

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17 See paragraph 110 of CPT/Inf (2011) 24.

18 The establishment's social worker did visit both prisoners, but such visits had been extremely rare (three times for each of them since the CPT's last visit, i.e. over a period of 19 months).

B. Follow-up visit to the unit for life-sentenced prisoners at Nubarashen Prison

23. The material conditions at the above-mentioned unit were described in paragraph 70 of the report on the 2010 visit. During the 2011 visit, the delegation noted that – unlike in 2010 – some of the cells for life-sentenced prisoners offered rather cramped conditions[19], due to the increase of the number of such inmates in the establishment (from 92 to 101). As a consequence, the legal norm of living space per life-sentenced prisoner (6 m²) was no longer observed.

Further, the CPT was concerned to note that virtually none of the recommendations made after the 2010 visit had been implemented. In particular, the windows in many of the cells were still partially obstructed by grids and bars restricting access to natural light and fresh air; further, most of the cells were poorly heated. It should also be added that the cells were showing clear signs of wear-and-tear, and that their level of cleanliness often left a lot to be desired. **The Committee calls upon the Armenian authorities to take effective steps to remedy these shortcomings.**

Life-sentenced prisoners had access to a shower once a week. In this context, **the CPT reiterates its invitation to the Armenian authorities to increase the frequency of showers for inmates, in the light of Rule 19.4 of the European Prison Rules[20].**

24. The delegation heard numerous complaints from life-sentenced prisoners about the prohibition of cooking their own food inside the cells, reportedly introduced after the escape of two inmates from Nubarashen Prison in November 2009. Further, several prisoners complained about the quality and, especially, the prices of food items sold in the prison shop. **The Committee would like to receive the comments of the Armenian authorities on these complaints.**

25. The situation as regards out-of-cell activities for life-sentenced prisoners had remained very much the same as during the 2010 visit: there was still no access to work, education[21], vocational training or sports. Consequently, **the CPT reiterates its recommendation that the Armenian authorities develop a programme of activities for life-sentenced prisoners (including work, education, association and sports, as well as targeted rehabilitation programmes).**

As for outdoor exercise, it continued to be offered at best five times a week, and often for less than an hour at a time (reportedly due to a serious shortage of custodial staff). **The Committee calls upon the Armenian authorities to take urgent steps to ensure that life-sentenced prisoners are offered the possibility to take at least one hour of outdoor exercise every day, including on weekends.**

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19 In particular, a number of cells that had previously accommodated four prisoners now held five.

20 See paragraph 83 of CPT/Inf (2011) 24. Rule 19.4 of the European Prison Rules states: "Adequate facilities shall be provided so that every prisoner may have a bath or shower, at a temperature suitable to the climate, if possible daily but at least twice a week (or more frequently if necessary) in the interest of general hygiene".

21 Except for distance courses, which were followed by only one life-sentenced prisoner at the time of the visit.

26. The delegation was surprised to observe that no refurbishment had taken place of the three disciplinary cells located in the basement of Nubarashen Prison (cells Nos. 00, 01 and 02), despite assurances to the contrary provided by the Armenian authorities in their letter of 6 September 2010[22]. Conditions in these dark, humid, very cold, dilapidated and filthy cells were even more unacceptable than in 2010, due to their infestation by cockroaches.

Both during the visit to Nubarashen Prison and in the course of the meeting with the Deputy Minister of Justice and other senior officials at the end of the visit to Armenia, the CPT's delegation urged the authorities to immediately take the above-mentioned cells out of service, pending their complete refurbishment. The delegation received assurances that this would be done. **The Committee wishes to receive confirmation that these cells will not be used for any form of human detention until their complete refurbishment.** Further, **the CPT requests to be provided with full details of the refurbishment work carried out in relation to these cells.**

27. In cell No. 02, the delegation met a life-sentenced prisoner on hunger strike who had been transferred there one hour before the delegation's visit. The inmate concerned had committed an act of self-injury[23] and claimed that custodial staff had (unsuccessfully) attempted to give him an injection by force before his transfer. He told the delegation that he had not seen any health-care staff since the beginning of his hunger strike four days before[24]. In his medical file (examined by the delegation's doctors) there was not a single entry since the beginning of 2011. It is noteworthy that the prison's health-care staff were apparently unaware of his hunger strike and his placement in a disciplinary cell.

The Committee wishes to reiterate that hunger strikes (and acts of self-harm) should be approached from a therapeutic rather than a punitive standpoint. In this context, the inmates concerned should be accommodated in suitable facilities where their state of health can be placed under appropriate medical supervision. Further, they should not be held in conditions inferior to those of other prisoners. **The CPT calls upon the Armenian authorities to review their policy and practice for the management of prisoners on hunger strike (and those who have committed acts of self-harm) at Nubarashen Prison and in all the other penitentiary establishments in Armenia, in the light of the above remarks.**

28. Cell No. 00 was accommodating two prisoners who – according to the custodial staff – had been placed there because of their mental health problems. One of the prisoners had been held there since July 2011 (i.e. approximately five months). His medical record contained no mention of psychiatric problems. Further, he was mentally alert and displayed no obvious signs or symptoms of mental disorder. He told the delegation that he took care of his cellmate, e.g. by feeding him.

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22 See paragraph 122 of CPT/Inf (2011) 24.

23 He had sewn together his upper and lower lips and had cut himself on the right side of the neck with a small razor blade. In addition to lesions on his mouth, he had six parallel, linear superficial lesions, 0.5 – 1 cm in length on the right side of his neck and a recent slight abrasion on his right knuckle.

24 He was apparently briefly visited by a psychologist on the second day of his hunger strike.

In contrast, the second inmate gave no sign of recognition and was completely uncommunicative throughout the delegation's visit to the cell. He lay on his bed covered by stained and malodorous blankets. His hair was extremely long and unkempt, his finger nails uncut, curved and deformed. He was extremely thin, with no subcutaneous fat. His clothes were dirty with faecal stains on the trousers. According to his cellmate, he never took a shower, had to be fed and often urinated in his bed. It was clear that the inmate in question had been abandoned by the prison staff in a state of withdrawal, mutism and gross neglect.

At the end of the visit to Nubarashen Prison, the delegation told the establishment's director that to keep a mentally-disturbed prisoner under such conditions was totally unacceptable and could well be considered as amounting to inhuman and degrading treatment for both the prisoner concerned and his cell-mate. The delegation urged the director to take immediate measures to transfer the inmate concerned to a suitable health-care facility for assessment, nutrition and care; this request was reiterated during the end-of-visit talks. **The CPT wishes to receive from the Armenian authorities, within one month, confirmation that this has indeed been done. The Committee would also like to be informed whether the other inmate (who did not display any obvious signs of mental disorder) has been returned to normal accommodation.**

29. The visit to Nubarashen Prison being of a brief and targeted nature, the CPT's delegation had no opportunity to carry out a proper review of the establishment's health-care service. That said, a few issues deserve to be mentioned.

The delegation heard no complaints about access to and the quality of general health care, and there appeared to be no shortage of basic medication. However, numerous complaints were received from life-sentenced prisoners that access to specialist care, including dental and psychiatric, was problematic. The delegation also heard several complaints about the absence of medical diets. **The CPT wishes to receive the remarks of the Armenian authorities on these points.**

C. Other issues concerning life-sentenced prisoners

30. The CPT notes that – despite its long-standing recommendations on this subject – the visit entitlement for life-sentenced prisoners has still not been increased; it remains significantly less than that of other prisoners. Further, short-term visits for this category of prisoner continue to take place, as a rule, under conditions not allowing physical contact between prisoners and their visitors.

The CPT has stated in the past that this approach runs counter to the generally accepted principle that offenders are sent to prison as a punishment, not to receive punishment. On the contrary, the Committee considers that special efforts should be made to prevent the breakdown of family ties of life-sentenced prisoners.

The CPT reiterates its recommendation that the Armenian authorities amend the legislation with a view to bringing the visit entitlement of life-sentenced prisoners on a par with that of other inmates.

Further, as a general rule, visits should take place in open conditions (e.g. around a table), visits through a partition being the exception based on an individual risk assessment[25].

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25 I.e. the approach generally followed vis-à-vis other sentenced prisoners.

31. The CPT is also concerned to note that life-sentenced prisoners continue to be routinely handcuffed each time they are taken out of their cells; there is still no individualised risk assessment in this context. As stressed in the report on the 2010 visit[26]; such an approach is disproportionate and could well be considered as a form of collective punishment.

The CPT calls upon the Armenian authorities to review without further delay the security arrangements for life-sentenced prisoners; handcuffing of such prisoners when outside their cells should be an exceptional measure, always based on an individualised risk assessment.

32. Finally, the CPT must stress once again that it can see no justification for systematically segregating life-sentenced prisoners. As made clear in the report on the 2010 visit, such an approach is not in line with the standards adopted by the Council of Europe[27]. Conditions of detention of life-sentenced prisoners should be the result of a comprehensive and ongoing risk and needs assessment, based on an individualised sentence plan, and not merely a result of their sentence.

In this context, the CPT was very concerned to learn that the Armenian authorities intended to continue the above-mentioned practice also after the planned entry into service of the new prison in Armavir (scheduled for 2013) and the closure of the unit for life-sentenced prisoners at Nubarashen Prison[28]. **The CPT calls upon the Armenian authorities to review the legislation and practice as regards the segregation of life-sentenced prisoners, in the light of the above remarks.**

More generally, **the Committee would like to receive more detailed information about the new prison in Armavir (categories of inmates to be accommodated; material conditions; regime and activities; staff complement, etc), in particular as regards life-sentenced prisoners.**

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26 See paragraph 72 of CPT/Inf (2011) 24.

27 See the Committee of Ministers' Recommendation (2003) 23 of 9 October 2003 on the management by prison administrations of life-sentenced and other long-term prisoners.

28 According to the information provided by senior officials met by the delegation, Armavir Prison would have an official capacity of 1200 places and its opening would allow Kentron Prison to be closed as well as – in due course – the remaining units of Nubarashen Prison.

APPENDIX I

LIST OF THE CPT'S RECOMMENDATIONS, COMMENTS AND REQUESTS FOR INFORMATION

Follow-up visit to Kentron Prison

Conditions of detention

recommendations

- the Armenian authorities to ensure, as a matter of priority, that all areas of Kentron Prison (including the cells, showers and food storage located in the basement) are maintained in a satisfactory state of repair and cleanliness (paragraph 13);

- access to natural light and fresh air to be improved in all cells (paragraph 13);

- occupancy rates in the larger cells to be reduced (so as to provide at least 4 m² of living space per inmate) and the smaller (6 m²) cells to be reserved exclusively for single occupancy and for short detention periods (i.e. not exceeding a few weeks) (paragraph 13);

- conditions in the establishment's exercise yards to be improved and, in particular, the yards to be enlarged and provided with some sports equipment (paragraph 13);

- the offer of activities for all the inmates to be developed significantly; to begin with, prisoners from different cells should be allowed to associate in the exercise yards, and some form of sports activity (e.g. table tennis, weightlifting, etc) should be offered to them during their exercise periods (paragraph 13);

- steps to be taken to ensure that sentenced prisoners are able to receive long-term visits under decent conditions, as provided for by the law (paragraph 13);

- the Armenian authorities to take urgent and effective steps to remedy the unacceptable situation of life-sentenced prisoners at Kentron Prison. Having regard to the establishment's structural limitations referred to in paragraph 11 of the report, the CPT has serious doubts as to whether this recommendation can be implemented without transferring the prisoners concerned to other, more suitable facilities. Pending such a development, life-sentenced prisoners must without further delay be allowed to associate with each other and with other sentenced inmates (paragraph 15).

Health care

recommendations

- ensure that a person qualified to provide first aid, preferably someone with a recognised nursing qualification, is always present at Kentron Prison, including at night and on weekends (paragraph 20);

- efforts to be made to fill the vacant feldsher's post at Kentron Prison (paragraph 20);

- the doctor and the nurse at Kentron Prison to be provided with regular refresher courses (paragraph 20);

- ensure adequate access to specialist (including dental and psychiatric) consultations and treatment at Kentron Prison; such access should be free of charge for prisoners without the necessary means to pay for it (paragraph 20);

- ensure that the screening for injuries in respect of newly-arrived prisoners is always performed by a member of the health-care team, and improve the quality of the recording of such injuries (paragraph 20);

- ensure that all the medical documentation is properly kept at Kentron Prison (paragraph 20);

- the Armenian authorities to take immediate steps to provide prisoners *A* and *B* with adequate psychiatric treatment, including (in addition to regular psychiatric consultations and uninterrupted pharmacotherapy) a range of therapeutic activities such as sociotherapy and occupational therapy (paragraph 22);

- steps to be taken without delay to transfer prisoner *B* to an appropriate hospital-type facility (paragraph 22).

Follow-up visit to the unit for life-sentenced prisoners at Nubarashen Prison

recommendations

- the Armenian authorities to take effective steps to remedy the shortcomings, described in paragraph 23 of the report, as regards the material conditions in the cells of the unit for life-sentenced prisoners at Nubarashen Prison (paragraph 23);

- the Armenian authorities to develop a programme of activities for life-sentenced prisoners (including work, education, association and sports, as well as targeted rehabilitation programmes) (paragraph 25);

- the Armenian authorities to take urgent steps to ensure that life-sentenced prisoners are offered the possibility to take at least one hour of outdoor exercise every day, including on weekends (paragraph 25);

- the Armenian authorities to review their policy and practice for the management of prisoners on hunger strike (and those who have committed acts of self-harm) at Nubarashen Prison and in all the other penitentiary establishments in Armenia, in the light of the remarks set out in paragraph 27 of the report (paragraph 27).

comments

- the Armenian authorities are invited to increase the frequency of showers for inmates at the unit for life-sentenced prisoners of Nubarashen Prison, in the light of Rule 19.4 of the European Prison Rules (paragraph 23).

requests for information

- comments of the Armenian authorities on complaints from the life-sentenced prisoners about the prohibition of cooking their own food inside the cells as well as about the prices and quality of the food items sold in the prison shop (paragraph 24);

- confirmation that the cells Nos. 00, 01 and 02 at Nubarashen Prison will not be used for any form of human detention until their complete refurbishment (paragraph 26);

- full details of the refurbishment work carried out in relation to cells Nos. 00, 01 and 02 at Nubarashen Prison (paragraph 26);

- within one month, confirmation that the mentally-disturbed prisoner accommodated in cell No. 00 of Nubarashen Prison has been transferred to a suitable health-care facility for assessment, nutrition and care (paragraph 28);

- whether the other inmate from cell No. 00 of Nubarashen Prison (who did not display any obvious signs of mental disorder) has been returned to normal accommodation (paragraph 28);

- remarks of the Armenian authorities on the complaints made by life-sentenced prisoners at Nubarashen Prison that access to specialist health-care, including dental and psychiatric, was problematic and that no medical diets were available (paragraph 29).

Other issues concerning life-sentenced prisoners

recommendations

- the Armenian authorities to amend the legislation with a view to bring the visit entitlement of life-sentenced prisoners on a par with that of other inmates (paragraph 30);

- the Armenian authorities to review without further delay the security arrangements for life-sentenced prisoners; handcuffing of such prisoners when outside their cells should be an exceptional measure, always based on an individualised risk assessment (paragraph 31);

- the legislation and practice as regards the segregation of life-sentenced prisoners to be reviewed, in the light of the remarks set out in paragraph 32 of the report (paragraph 32).

comments

- as a general rule, visits for life-sentenced prisoners should take place in open conditions (e.g. around a table), visits through a partition being the exception based on an individual risk assessment (paragraph 30).

requests for information

- more detailed information about the planned new prison in Armavir (categories of inmates to be accommodated; material conditions; regime and activities; staff complement, etc), in particular as regards life-sentenced prisoners (paragraph 32).

APPENDIX II

LIST OF THE SENIOR ARMENIAN OFFICIALS WITH WHOM THE CPT'S DELEGATION HELD CONSULTATIONS

Mr Emil BABAYAN	Deputy Minister of Justice
Mr Nikolay ARUSTAMYAN	Adviser to the Minister of Justice
Mr Vahe DEMIRTSHYAN	Head of the Department for International Legal Relations, Ministry of Justice
Mr Arthur HOVHANNISYAN	Head of the Department for Legal Support, Ministry of Justice
Ms Margarit HAKOBYAN	Head of the Section for Development and European Integration, Department of International Legal Relations, Ministry of Justice
Mr Rafayel HOVHANNISYAN	First Deputy Head, Criminal Executive Department, Ministry of Justice
Mr Alexandr SARKISOV	Head of the Section for Medical Service, Criminal Executive Department, Ministry of Justice