French edition:

27e rapport général du Comité européen pour la prévention
de la torture et des peines ou traitements inhumains
ou dégradants (CPT)

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Cover and layout: Document and Publications
Production Department (SPDP), Council of Europe

This publication has not been copy-edited by the
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CPT/Inf(2018)4

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Printed at the Council of Europe
## Contents

**FOREWORD**  
5

**ACTIVITIES DURING THE PERIOD 1 JANUARY TO 31 DECEMBER 2017**  
7

- Visits  
7
- Public statements  
9
- High-level talks with national authorities  
10
- Plenary meetings and activities of subgroups  
11
- Contacts with other bodies  
11

**PUBLICATION HIGHLIGHTS**  
15

- Introduction  
15
- Selected publications  
16

**COMPLAINTS MECHANISMS**  
25

**ORGANISATIONAL MATTERS**  
31

- CPT membership  
31
- Bureau of the CPT  
32
- Secretariat of the CPT  
33

**APPENDICES**  
35

1. The CPT’s mandate and modus operandi  
35
2. Signatures and ratifications of the Convention establishing the CPT  
36
3. The CPT’s field of operations  
37
4. CPT members  
39
5. CPT Secretariat  
40
6. CPT visits, reports and publications  
42
7. Countries and places of deprivation of liberty visited by CPT delegations  
44
8. Public statement concerning Belgium  
55
To strengthen the dialogue with the state authorities after visits, reports and responses
2017 was once again an eventful year for the CPT. In addition to the scheduled periodic visits, the CPT carried out a number of ad hoc visits focused on specific topics such as immigration detention (visits to Hungary and Italy), police custody and remand detention (visits to Azerbaijan and Serbia) and treatment of forensic psychiatric patients (visit to Albania). In addition, the CPT visited the United Kingdom Sovereign Base Areas on Cyprus and Northern Ireland, and also returned to the Chechen Republic of the Russian Federation to look into the treatment of persons held by law enforcement officials.

The Committee has continued to explore ways to strengthen the dialogue with the state authorities after visits, reports and responses. High-level talks have proved to be a useful element of such dialogue. Their primary objective is usually to discuss what action is being taken or envisaged by the respective governments to implement key recommendations made in recent CPT visit reports. There have also been cases in the past where the Committee was considering issuing a public statement under Article 10, paragraph 2, of the Convention establishing the Committee and the high level of commitment demonstrated by the governments concerned in the context of these talks was such that it rendered the issuing of such a statement unnecessary. In 2017, the CPT held high-level talks in Albania, Azerbaijan, Lithuania, "the former Yugoslav Republic of Macedonia" and the United Kingdom. This is the highest number of high-level talks ever carried out by the CPT in a given year.

Regrettably, in the light of its most recent findings during its 2017 periodic visit to Belgium, the CPT felt duty-bound to issue a public statement on the ongoing failure of the Belgian authorities to implement a key longstanding recommendation of the CPT to put in place a minimum level of service guaranteeing the rights of inmates during periods of industrial action by prison staff. In the CPT’s experience, the frequency and intensity of these strikes by staff are rather unique in Europe. In the absence of a guaranteed minimum service, such strikes have devastating effects on the day-to-day lives of prisoners. The CPT hopes that a solution to this issue can be found and that the Committee of Ministers and the Parliamentary Assembly of the Council of Europe will continue to pay particular attention to this important matter.

In 2017, the CPT also boosted its efforts to make its views more visible and accessible. The Committee has updated its standards on means of restraint in psychiatric establishments for adults and encouraged the Secretariat to issue factsheets. The first factsheet, which dealt with immigration detention, was published in March 2017.

Finally, the second half of the year 2017 was marked by the emergence of unprecedented budgetary challenges within the Council of Europe. On various occasions, both the Committee of Ministers and the Parliamentary Assembly have underlined the importance which they attach to the monitoring work of the CPT. These are valuable signs of support; indeed the Committee always strives to carry out its task as effectively as possible whilst making the best use of its resources. It is vital that this monitoring work be maintained even in a very difficult budgetary context.

Mykola Gnatovskyy, President of the CPT
The CPT organised 18 visits totalling 162 days during the year 2017.
Activities during the period 1 January to 31 December 2017

Visits

1. The CPT organised 18 visits totalling 162 days during the year 2017. Ten of the visits (totalling 105 days) formed part of the CPT’s annual programme of periodic visits for 2017 and eight (57 days) were ad hoc visits which the Committee considered were required in the circumstances. Details of all these visits (dates and places of deprivation of liberty visited) are provided in Appendix 7.

Periodic visits

2. Periodic visits were carried out to Belgium, Bulgaria, Croatia, Cyprus, Estonia, Montenegro, Poland, Slovenia, Turkey and Ukraine.

The main objective of the visits was to review the measures taken by the relevant authorities to implement recommendations made by the Committee after previous visits to the countries concerned. To this end, the CPT examined the treatment and conditions of detention of persons held in police establishments and prisons. Particular attention was paid to specific categories, for instance, remand prisoners (Belgium, Montenegro, Turkey), high-security prisoners (Belgium, Turkey) and women in prison (Belgium, Croatia, Cyprus, Turkey).

Visiting delegations also continued to pay particular attention to the treatment and conditions of detention of juveniles (notably in Croatia, Estonia, Montenegro, Poland, Ukraine) and an increased amount of attention was given to persons held under aliens legislation, compared with the previous year (Cyprus, Poland, Slovenia, Turkey, Ukraine).

In addition, in many of the countries visited (Belgium, Bulgaria, Croatia, Cyprus, Montenegro, Poland, Slovenia and Ukraine), delegations visited civil and/or forensic psychiatric establishments in order to examine the treatment and legal safeguards offered to patients admitted on an involuntary basis.
Social care homes continued to be included in the programme of visits for 2017 (Bulgaria, Cyprus, Montenegro, Ukraine).

3. In line with standard practice, the CPT announced in April its programme of periodic visits for the following year. It announced its intention to examine in the course of 2018 the treatment of persons deprived of their liberty in the following eight countries: Albania, Andorra, the Czech Republic, Georgia, Hungary, Norway, Romania and the Slovak Republic.

In the past, the CPT carried out ten periodic visits per year. It has decided to reduce the number of periodic visits to eight for 2018, in order to increase its capacity to carry out ad hoc visits.

Ad hoc visits

4. In the course of 2017, the CPT carried out ad hoc visits to Albania, Azerbaijan, Hungary, Italy, the Chechen Republic of the Russian Federation, Serbia, Northern Ireland (United Kingdom) and the United Kingdom Sovereign Base Areas on Cyprus.

5. The main purpose of the ad hoc visit to Albania in February was to review progress made as regards the implementation of recommendations made by the CPT in the report on its 2014 periodic visit. Particular attention was paid to the treatment and conditions of detention of persons in police custody and the situation of remand prisoners and forensic psychiatric patients.

6. The objective of the ad hoc visit to Azerbaijan in October was to examine the treatment and conditions of detention of persons in the custody of law enforcement agencies and in penitentiary establishments and to review the measures taken by the Azerbaijani authorities in response to the relevant recommendations made by the Committee after previous visits.

7. In the same month, a delegation of the CPT also travelled to Hungary to examine the treatment and conditions of detention of persons held under aliens legislation. The CPT’s delegation visited the two transit zones at Röszke and Tompa, as well as police detention facilities in Szeged and Röszke. During this visit, the delegation also held interviews in Serbia with foreign nationals who had recently been escorted by border police officers to the other side of the Hungarian border fence.

8. The purpose of the visit to Italy in June was to examine the situation of persons held in immigration detention in Italy. The delegation visited the so-called “hotspots” in Lampedusa, Pozzallo and Trapani (Milo), as well as a mobile “hotspot” unit at Augusta port. Further, it observed a disembarkation procedure at Trapani port and visited closed removal centres in Caltanissetta, Ponte Galeria (Rome) and Turin, as well as the holding facility at Rome Fiumicino Airport.

9. In November/December, the CPT carried out an ad hoc visit to the Chechen Republic of the Russian Federation in order to review the treatment of persons deprived of their liberty by the police and examine the effectiveness of investigations into allegations of ill-treatment of detained persons by law enforcement officials.
10. The focus of the visit to Serbia in May/June was the treatment of persons deprived of their liberty by the police and the material conditions in which they were held, as well as the practical application of safeguards surrounding their detention. The delegation also examined the manner in which complaints of ill-treatment of detained persons by police officers were handled and looked into the treatment and conditions of detention of remand prisoners.

11. Northern Ireland (United Kingdom) was visited for the first time since 2008 in August/September. The focus of this ad hoc visit was to examine the conditions of detention and treatment of inmates at Maghaberry Prison and at Ash House women’s prison within Hydebank Wood College. The CPT’s delegation also visited the medium secure psychiatric establishment, Shannon Clinic. It was the first time that the CPT had examined the conditions and treatment of psychiatric patients in Northern Ireland. In addition, the situation of persons apprehended by the police in several police stations in the region was examined.

12. The CPT carried out its first visit to the United Kingdom Sovereign Base Areas (SBA) on Cyprus in February, which provided an opportunity to examine the treatment and safeguards in place for persons deprived of their liberty by the SBA Police and the British Forces Cyprus and to assess the conditions of detention and treatment of persons held in Dhekelia Prison. The CPT’s delegation also briefly assessed the situation and existing safeguards for migrants held within the SBA.

Public statements

13. On 13 July 2017, the Committee issued a public statement concerning Belgium under Article 10, paragraph 2, of the Convention; the text of the statement is reproduced in Appendix 8.

For 12 years, the CPT has consistently expressed its deep concern regarding the serious consequences which can result from industrial action by prison staff in Belgium. The question of establishing a service guaranteeing the basic rights of persons held in prison establishments (“guaranteed minimum service”) was raised in the CPT’s reports on the 2005, 2009, 2012 and 2013 visits. The dialogue between the Committee and the Belgian authorities intensified further with effect from March 2014 when, given the lack of any progress for many years, the CPT was obliged to initiate the Article 10, paragraph 2, procedure. In May 2016, the CPT carried out an ad hoc visit to Belgium in reaction to the ongoing strikes by prison staff at the time. The delegation noted that virtually all the prison staff were absent due to industrial action in the establishments visited. Police officers had been called in to assist the management, a handful of volunteer prison and health service employees and other reassigned staff. This was not sufficient to ensure acceptable conditions of detention. During its visits to the 47 Council of Europe member states over the
years, the Committee had not observed a similar phenomenon, in terms of both its extent and the risks involved.

Following its 2017 periodic visit to Belgium, the Committee concluded that the general lack of concrete progress over many years in establishing a viable system for the human rights of inmates to be upheld in all circumstances, in particular in the context of industrial action by prison staff, represented a serious failure to co-operate with the Committee and a public statement was hence issued. The Committee on Legal Affairs and Human Rights of the Parliamentary Assembly of the Council of Europe subsequently held an exchange of views with the head of the Belgian parliamentary delegation on the CPT’s public statement. In late 2017, the Committee of Ministers noted that the Belgian authorities were preparing measures to address this problem.

**High-level talks with national authorities**

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

The CPT has also continued to seek to intensify its ongoing dialogue with certain states by means of high-level talks outside the framework of a given visit.

15. The CPT held talks in Tirana (Albania) on 11 December with the national authorities. The main objective of the talks was to discuss the situation of forensic psychiatric patients and mentally ill prisoners at Zaharia Special Facility for Ill Inmates in Kruja and the Prison Hospital in Tirana, in the light of the findings during previous visits by the CPT, and the implementation of the CPT’s longstanding recommendation to construct a forensic psychiatric facility in the country.

16. On 16 and 17 February, representatives of the CPT held consultations in Baku (Azerbaijan) with the national authorities. The objective of the talks was to discuss the state of co-operation between the CPT and the Azerbaijani authorities and, in particular, the implementation of the CPT’s longstanding recommendations concerning law enforcement agencies, prisons, psychiatric hospitals and social care homes. The meeting was also an opportunity to learn about other developments since the CPT’s last visit to Azerbaijan, in March-April 2016.

17. The objective of the talks held on 4 April in Vilnius (Lithuania) was to present to members of the new Government (formed after the October 2016 elections) the main findings of the report on the CPT’s periodic visit carried out in September 2016 and transmitted to the Lithuanian authorities in March 2017. More generally, discussions were held on the ongoing dialogue between the CPT and Lithuanian authorities and, in this context, on the implementation of some of the CPT’s longstanding recommendations.

18. The objective of the talks held in Skopje (“the former Yugoslav Republic of Macedonia”) on 14 October was to learn about the action being taken by the new government to address the longstanding recommendations to improve the situation in prisons as set out in the CPT’s report on the December 2016 visit to the country.
The CPT’s delegation was provided with information and assurances that concrete action was being taken to address the dire state of the prison system and that the Prime Minister himself had publicly committed his government to remedying the situation.

19. Finally, representatives of the CPT held consultations in London (United Kingdom) with the national authorities on 26 April. The objective of these talks was to discuss the implementation of the recommendations set out in the report on the CPT’s 2016 visit to the United Kingdom which had raised serious concerns over the lack of safety for inmates and staff in prisons in England, as well as the inadequate safeguards in place to protect patients in mental health settings.

Plenary meetings and activities of subgroups

20. The CPT held three one-week plenary meetings (in March, July and November), in the course of which a total of 16 visit reports were adopted.

21. In addition to continuing its discussion of ongoing intergovernmental activities of the Council of Europe on matters within the CPT’s mandate and on its own internal working methods at all three meetings, the CPT held an exchange of views during the March meeting with judges of the European Court of Human Rights on several topics of common interest, such as prison overcrowding and solitary confinement. Following the March meeting, newly adopted standards on use of restraints in psychiatric institutions were published. Further, the July meeting was an opportunity for the CPT to revise its checklist on the inspection of a prison medical service by a CPT doctor. Both documents have been published on the CPT’s website.

22. The two standing subgroups of the CPT, the Working Group on Health (formerly known as the Medical Group) and the Working Group on the CPT’s Jurisprudence, continued to meet on the Sunday before each plenary meeting. 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. 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

23. The CPT continued to promote contact with other bodies within the Council of Europe. For instance, as mentioned above, an exchange of views was held by the Committee on Legal Affairs and Human Rights of the Parliamentary Assembly to discuss the CPT’s public statement on Belgium; this took place on 12 October. The CPT was also represented at a hearing organised by the Parliamentary Assembly on 7 December in Paris on the subject of “Detainees with severe disabilities in Europe”. As usual, the President of the CPT presented the annual general report to the Committee of Ministers during an exchange of views on 19 April. Both the Parliamentary Assembly and the Committee of Ministers also adopted texts during
the year on the topic of “25 years of the CPT: achievements and areas for improvement” (see the section on organisational matters below).

Contacts were also maintained with the European Court of Human Rights (see in particular paragraph 21 above), the Commissioner for Human Rights and his office, and the Special Representative of the Secretary General on migration and refugees, as well as many other bodies and sectors of the Council of Europe. In addition, the CPT closely followed intergovernmental standard-setting carried out by the Committee of experts on administrative detention of migrants (CJ-DAM) concerning draft European rules on the administrative detention of migrants and by the Committee on Bioethics (DH-BIO) concerning the draft Additional Protocol to the “Oviedo Convention” on the protection of human rights and dignity of persons with mental disorders.

Other Council of Europe activities in which the CPT participated were: an international expert conference entitled “Immigration Detention of Children: Coming to a Close?”, held under the auspices of the Czech Chairmanship of the Committee of Ministers in Prague (Czech Republic) on 25-26 September, a multilateral meeting on the organisation and management of prison health care on 12-13 October in Strasbourg and the 22nd Conference of Directors of Prison and Probation Services in Lillestrøm (Norway) on 20-21 June. The CPT also attended several meetings involving European national preventive mechanisms, in particular on 4-5 April (Strasbourg), 31 May and 1 June (Strasbourg) and on 14-15 November (Prague).

24. Regarding contacts with bodies outside the Council of Europe, the CPT maintained its close relations with relevant bodies and agencies of the United Nations throughout 2017. In particular, fruitful contacts were pursued with the UNHCR in the context of the preparation of CPT visits. Furthermore, CPT delegations met UNHCR representatives during their visits to Bulgaria, Cyprus, Hungary, Italy, Poland, Slovenia and Ukraine.

Over the year, the CPT maintained close contacts with the United Nations Subcommittee on Prevention of Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (SPT). It also participated in the United Nations Office on Drugs and Crime (UNODC) Expert Group Meeting on the review of guidance material on the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) in Vienna on 9-10 February; a workshop on overcrowding and torture organised by the Committee Against Torture (CAT) in Geneva on 7-8 August; and a seminar organised by the Office of the United Nations High Commissioner for Human Rights (OHCHR) in Geneva.

The CPT also participated in events organised by European Union institutions and agencies such as the Fundamental Rights Agency refresher course on fundamental rights for Schengen evaluation trainers in the field of return and readmission and border management on 15 September in Vienna and an exchange of views with a European Parliament sub-committee on the occasion of the International Day in Support of Victims of Torture on 22 June in Brussels. In addition, representatives of the CPT met the Executive Director of Frontex in Warsaw on 31 March and renewed contacts with other European Union institutions and agencies on 20 April in Brussels.
during a visit which also provided the CPT with an opportunity to raise public awareness about the CPT’s work. On 19 September, the CPT participated in the Annual Fundamental Rights Network meeting of the European Commission’s Directorate General for Neighbourhood and Enlargement Negotiations.

Furthermore, the CPT was once again represented at the annual OSCE Human Dimension Implementation Meeting (on 19 September) in Warsaw, where its President delivered a keynote speech.

25. In November, the CPT concluded an Exchange of Letters with the International Criminal Court (ICC) in The Hague to monitor the treatment of persons sentenced by the Court. Under the terms of the Exchange of Letters, the CPT will assist the ICC in the monitoring of persons sentenced by the ICC where the person concerned is imprisoned in a member state of the Council of Europe which has specifically indicated the CPT as the monitoring body.
Authorising the publication of documents related to visits is indicative of the strength of commitment to the implementation of CPT recommendations.
Publication highlights

Introduction

26. Sixteen CPT visit reports were published in 2017, confirming once again the well-established trend of states deciding to lift the veil of confidentiality and place the Committee’s findings in the public domain. As of 31 December 2017, 370 of the 411 reports drawn up so far have been published. A state-by-state table showing the current situation as regards publication of CPT visit reports is set out in Appendix 6.

27. The CPT welcomes the fact that the authorities of Azerbaijan decided in 2017 to publish two reports concerning their country. However, these were reports on visits that took place more than ten years ago. In 2013, the Russian Federation had agreed to the publication of the visit reports on the CPT’s 2011 ad hoc visit to the North Caucasian region, as well as on the 2012 periodic visit to the Russian Federation. However, 19 of the remaining 20 reports have not yet been published. The CPT hopes that the clear message given by the Committee of Ministers in February 2002, encouraging “all Parties to the Convention to authorise publication, at the earliest opportunity, of all CPT visit reports and of their responses”, will be heeded by the authorities of both Azerbaijan and the Russian Federation. The Committee is keen to pursue its work in these countries, through close co-operation with the authorities and informed dialogue with all other relevant interlocutors. Obviously, the publication of the CPT’s reports would greatly facilitate this process.

At the time this report went to press, of all the 45 Council of Europe member states that have an established practice of publishing CPT reports (i.e. excluding Azerbaijan and the Russian Federation), Turkey is the only state which still has one unpublished report dating back from before 2017. The CPT very much hopes that Turkey will shortly publish this CPT report as well as its response.2

28. Authorising the publication of documents related to visits is indicative of the strength of commitment to the implementation of the CPT’s recommendations. During 2017, however, no additional states informed the CPT of their decision to authorise in advance the publication of all future CPT visit reports and related government responses concerning their country, leaving the total number of states

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2. See also Resolution 2156 (2017) of the Parliamentary Assembly on “The functioning of democratic institutions in Turkey”.
having endorsed the “automatic publication procedure” at eight (Austria, Bulgaria, Finland, Luxembourg, the Republic of Moldova, Monaco, Sweden and Ukraine).

The CPT is pleased to note that both the Committee of Ministers and the Parliamentary Assembly of the Council of Europe have recently encouraged states which have not already done so to request the automatic publication of future CPT visit reports and related government responses.  

Selected publications

29. This section takes a closer look at some of the visit reports and government responses published in 2017.

Report on the periodic visit to France in November 2015 and response of the French authorities

(treatment of persons in police custody or in remand detention; overcrowding in remand prisons; regime for certain categories of sentenced prisoners, including “radicalised” prisoners; involuntary psychiatric patients and long-term care for the elderly)

30. Several allegations were received by the CPT’s visiting delegation, including from juveniles, of excessive use of force by law enforcement officials at the time of arrest or during interrogation. Verbal violence, including racist and homophobic remarks by law enforcement officials, also appeared to be an issue. Similarly, allegations were received of excessive use of force and verbal abuse at the remand prisons visited. At Fresnes remand prison a number of allegations were received of deliberate blows by certain custodial staff. In its report, the CPT recommends assertive action to prevent all forms of violence against detained persons.

31. The CPT’s report notes that the three remand prisons visited (Fresnes, Nîmes and Villepinte) were affected by severe overcrowding. In particular, in the CPT’s view, the conditions of detention (e.g. lack of living space per prisoner in cells, insufficient number of beds and lack of out-of-cell activities) could be considered inhuman and degrading. In their response to the CPT’s call for urgent action, the French authorities indicate their intention to give priority to remand establishments in the context of a new penitentiary building programme, aimed at improving the safety and work conditions of prison staff, and providing suitable detention conditions. The one-person-per-cell building programme envisages new prison establishments in several priority districts, with a view to countering overcrowding. So-called Respecto units are being developed in order to allow prisoners to benefit from greater autonomy (freer movement) in exchange for good behaviour and adherence to the rules applicable in the unit.

32. The CPT also notes in its report that poor detention conditions, prison overcrowding and insufficient staff-prisoner interaction may in fact increase the risk

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of radicalisation. For this reason the Committee recommends that the authorities review their treatment of prisoners considered at risk of being radicalised or of radicalising others. The French authorities’ response gives a detailed description of the strategy and measures deployed and envisaged to prevent or counter the effects of radicalisation in French prisons.

33. The Committee also raises its serious concern about the situation of inmates receiving treatment in hospital in unacceptable conditions, such as extensive resort to ankle-cuffs and the frequent presence of escorting custodial staff, including during surgery or childbirth. In response, the French authorities give a detailed account of the policy in place for the practical operation of prisoners’ hospital visits, and also refer to the setting-up of a working group bringing together penitentiary and public health officials which will carry out a study on the use of ankle- and hand-cuffs and the presence of custodial staff during medical or gynaecological consultations.

34. In its report the CPT also recommends action to prevent excessive use of force by prison staff in the hospital psychiatric ward designed for prisoners (UHSA - unité hospitalière spécialement aménagée) in Toulouse.

35. The CPT welcomes the establishment of treatment plans for each individual patient in psychiatric establishments, but it raises questions about the relatively high level of psychotropic medication delivered to some patients in Albi psychiatric ward for challenging patients (UMD – unité pour malades difficiles). In response, the French authorities acknowledge the difficulty of treating certain patients who have developed increased resistance to certain psychotropic drugs and present a high risk, and commit to pursuing their efforts to reduce the use of combined psychotropic drugs.

36. The frequency and length of mechanical restraint (without proper medical supervision) is also of concern in the psychiatric establishments visited by the CPT’s delegation. Welcoming the introduction of legislation on means of restraint, the Committee regrets, however, that the text makes no reference to chemical restraint.

37. The CPT visited for the first time in France a long-term care institution for the elderly, the Marcel Riser facility (Gérard Marchant hospital). One of the recommendations contained in the report concerns the improvement of living conditions for residents. In their response the French authorities describe the improved conditions to be afforded in the new facility, on which construction began in September 2016 and to which residents would be transferred as of March 2018.

Report and response published in April 2017
(CPT/Inf(2017)7 and CPT/Inf(2017)8)

Report on the periodic visit to Germany in November-December 2015 and response of the German authorities

(situation of persons in police custody, in prison and in civil or forensic psychiatric institutions in several Länder)

38. Overall the CPT’s report praises progress made to improve the treatment of persons deprived of their liberty, but also finds striking contrasts between
establishments visited in different Federal States (Länder). This significant difference from one Land to another is also reflected in the response of the German authorities.

39. The report notes that the CPT’s delegation heard no allegations of deliberate physical ill-treatment of detained persons by police officers whilst in police custody. However, some allegations – in particular from foreign nationals and persons with psycho-social and/or learning disabilities – were noted concerning the excessive use of force by police officers at the time of apprehension.

40. The CPT gained a positive impression regarding fundamental safeguards against police ill-treatment, especially with regard to the rights of notification of custody and access to a doctor. Nevertheless it calls on the German authorities to ensure that all detained persons benefit from access to a lawyer throughout their police custody, including during any police questioning. In response, the German authorities provide details about the planned amendment to the Federal Code of Criminal Procedure aimed at extending access to a lawyer so that this right is available during periods of questioning by law enforcement officials.

41. The CPT welcomes the fact that, since the 2010 visit, the use of mechanical restraint (Fixierung) in the context of police custody has been abandoned by the police authorities of several Länder. The Committee calls upon the police authorities of all other Länder concerned to put an end to this practice without further delay. According to the response from the German authorities, this is not possible in the view of the Länder authorities concerned, for which Fixierung might continue to be used in very specific, isolated cases.

42. Similarly, the CPT is pleased to observe that the downward trend regarding the use of Fixierung in the prison context continues. In most prisons visited, hardly any prisoner has been subjected to the practice in recent years. In its report the Committee encourages the relevant authorities of all Länder to abandon the resort to Fixierung in prisons.

43. The CPT’s report notes significant differences among establishments regarding the use of solitary confinement as a disciplinary measure. While used only rarely in recent years in some prisons, it was imposed more frequently in Kaisheim Prison, for up to the legal maximum period of four weeks, which the Committee finds excessive. The CPT also recommends that solitary confinement as a disciplinary sanction be abolished for juveniles.

44. The report also underscores the stark contrast regarding contact with the outside world in the different prisons visited by the CPT’s delegation. In several prisons, prisoners had access to the telephone inside their cells, whereas in the prison visited in Bavaria, neither remand nor sentenced prisoners were allowed to make any telephone calls.

45. Living conditions and psychiatric treatment in psychiatric establishments were generally of a high standard, but in Brandenburg Forensic Psychiatric Clinic, some patients who had committed sex offences and who had been or were receiving anti-androgen treatment (so-called “chemical castration”) claimed that a treating doctor put them under pressure to accept the treatment, which – the CPT recalls – should be given on a strictly voluntary basis. In their response the German authorities assert that this principle is indeed being respected.
46. In previous reports, the CPT expressed objections to surgical castration as a means of treatment of sex offenders, since it was a mutilating, irreversible intervention. In the present report, the Committee welcomes the fact that, according to official data, not one single surgical castration had been carried out on sex offenders during the period 2013 to 2015, and it encourages all federal and Länder authorities to put a definitive end to surgical castration for treatment of sex offenders. According to the German authorities’ response, voluntary surgical castration is used only very exceptionally. However, the authorities do not envisage a definitive end to the use of this measure.

47. Finally, the CPT’s report notes that the mental health legislation of several German Länder provides for the possibility to impose disciplinary sanctions on forensic psychiatric patients. As a matter of principle, the CPT has reservations about the use of disciplinary measures vis-à-vis psychiatric patients. Such measures aim to sanction patients’ behaviour, which is often likely to be related to a psychiatric disorder and should be approached from a therapeutic, rather than a punitive, standpoint. In their responses, the Bavarian authorities currently see no need to amend the relevant legal provisions on disciplinary sanctions, whereas the authorities of Saxony-Anhalt announce that the Committee’s recommendation would be discussed among the psychiatric establishments of this Land.

Report on the periodic visit to Italy in April 2016 and response of the Italian authorities

(prison reform measures to reduce overcrowding; reform of forensic psychiatry; deprivation of liberty by law enforcement authorities; involuntary placement in civil psychiatric institutions)

48. In its report the CPT raises concern over allegations of physical ill-treatment and excessive use of force by members of the State Police and Carabinieri, as well as by prison staff. Moreover, persons in police custody do not always benefit from the safeguards afforded them by law. Material conditions are also criticised in the report, both in police and prison establishments.

49. All prison establishments visited suffered from structural material deficiencies and extensive refurbishment should be undertaken. The report takes stock of the unprecedented penitentiary reform following the 2013 pilot judgment Torreggiani and Others v. Italy of the European Court of Human Rights, leading to a decrease in the prison population and an increase in the prison estate capacity. Nevertheless, the prison population had again increased in 2016 and prison overcrowding persisted. In their response the Italian authorities describe in detail the refurbishments and other efforts undertaken with a view to improving detention conditions and reducing prison overcrowding.

50. In the report, the CPT is critical of the use of medical seclusion rooms for the prolonged isolation of prisoners with self-harming and/or suicidal tendencies; notably as regards the degrading manner in which it is applied, the absence of appropriate
monitoring by health-care staff and the inadequate recording of such measures. The issue of solitary confinement imposed by judicial decision (“isolamento diurno”) on certain life-sentenced prisoners is also raised in the report. In the Committee’s view, the prolonged and punitive nature of the measure in respect of specific cases raised in the report could be considered as amounting to inhuman and degrading treatment.

51. In the context of ongoing reforms, leading to the closure of judicial psychiatric hospitals (OPGs), the CPT’s report examines the situation of forensic psychiatric patients. While welcoming a number of improvements in treatment and care in the new Residenze per l’esecuzione delle misure di sicurezza (REMS), the report notes several deficiencies at Castiglione delle Stiviere, a former OPG undergoing conversion into a REMS. The CPT sets out the basic principles regarding the use of restraint measures, and recommends that they be the subject of comprehensive protocols in all psychiatric establishments. In their response, the Italian authorities outline the ongoing debate surrounding the use of restraints in psychiatry, an issue which is somewhat complicated by the fact that psychiatric institutions come under the responsibility of the respective region in which they are located.


Report on the ad hoc visit to “the former Yugoslav Republic of Macedonia” in December 2016 and response of the authorities of “the former Yugoslav Republic of Macedonia”

(prison conditions for persons detained at Idrizovo, Štip and Skopje Prisons)

52. The report recalls that the CPT has repeatedly highlighted certain fundamental structural issues in the prison system, such as a lack of policy on how to manage complex institutions, an inadequate system of reporting and supervision, and the poor management and performance of staff, which calls for an end to the practice of political appointments, and the creation of a truly professional prison management career path. The findings from the December 2016 visit demonstrated that little progress has been made to address these issues across the prison system. Moreover, at Idrizovo Prison, which holds 60% of the country’s prisoners, the provision of health care remains totally inadequate, placing prisoners’ lives at risk; the absence of any appropriate regime means that prisoners have nothing constructive to do; and the conditions of detention in several parts of the prison could be considered as inhuman and degrading. The CPT was also critical of the conditions of detention in the remand section of Skopje Prison and in the closed section of Štip Prison (e.g. confinement in cells for up to 23 hours a day for periods of up to two years at Skopje and extreme overcrowding in certain cells at Štip Prison).

53. The CPT’s report also describes the rampant corruption within the prison system. At Idrizovo Prison in particular, prisoners may purchase their way, for example, to a place in a decent cell, home leave or medication. The CPT recommended that prison staff need to be sufficient in number and receive adequate training and support. In the CPT’s view, this would contribute to addressing a number of persistent problems
in the country’s prisons, including ill-treatment by staff and inter-prisoner violence, corruption and lack of activities.

54. The CPT concludes the report by stating that the time “has come for the rule of law and protection of human rights to be applied fully in the prison system and for “the former Yugoslav Republic of Macedonia” to abide by its international obligations to co-operate with the CPT”.

55. The response of the authorities points to the various programmes being developed to improve the situation; it states that each individual recommendation of the CPT would be taken into account and acted upon. After receiving the response, the CPT held high-level talks on 14 October 2017 with the Prime Minister and other senior ministers and officials regarding the importance of prison reform (see paragraph 18 above).


Report on the periodic visit to the Netherlands in May 2016 and response of the Dutch authorities

(situation in police custody, prisons, penitentiary psychiatric centres, and civil psychiatric establishments)

56. The CPT’s report welcomes the fact that, in principle, persons in police custody have the possibility to be assisted by a lawyer prior to questioning. In the light of observations during the visit, however, the CPT recommends that juveniles should not be questioned or made to sign any document concerning an offence they are suspected of committing without the presence of a lawyer and a trusted adult. The report also indicates problems, in practice, with exercising the right to have a third party notified of one’s arrest, and the right to see a doctor while in police custody.

57. The report welcomes the considerable decrease in the prison population in the course of the last decade. The CPT’s delegation received no allegations of ill-treatment by staff or of inter-prisoner violence in the prisons visited, and gained a very good impression of the Extra Care Provision unit (EZV), present in every Dutch prison, where vulnerable prisoners are provided with appropriate care.

58. However, as regards the “terrorist” unit in De Schie Prison, the report recommends that placement and risk assessment procedures should be reviewed and the applicable regime improved. In response, the Dutch authorities describe the development of a placement policy that separates “confirmed extremists” from those who are “rethinking” and are susceptible to influence. Further, the authorities agree to offer prisoners detained in so-called terrorist wings more activities aimed at reintegration, including out-of-cell activities.

59. The report’s assessment of penitentiary psychiatric centres (PPC) is globally positive. However, the CPT expresses concerns about the use of chemical restraint (and the associated risks) on the basis of pro re nata (PRN) prescriptions. The Dutch authorities’ response details the procedures which must be followed in the use of PRN prescriptions and asserts that these procedures are in line with the CPT’s
recommendations. Nevertheless, the authorities propose to remind all PPCs of the need to monitor compliance with these requirements in practice.

60. The CPT also expresses concern in the report about the frequent deployment of special intervention teams (IBT) in full protective gear in the context of the transfer of patients to seclusion in PPCs. In their response, the authorities acknowledge the benefits of efforts to de-escalate tense situations, while emphasising the need to ensure a safe living and working environment in detention.

61. Another matter of concern was that in civil psychiatric establishments, police officers (or private security guards) were at times called upon to intervene when very agitated patients could not be controlled by health-care staff. The Committee recommended that this practice be stopped and that appropriate training be provided to nursing staff. While expressing doubt, in their response, that hospital staff would ever be in a position to do away entirely with the need to call upon assistance from the police, the Dutch authorities nevertheless commit to discussing ways to improve the hospital staff’s ability to handle aggressive or violent behaviour.


Report on the periodic visit to the United Kingdom in March-April 2016 and response of the United Kingdom authorities

(police custody; immigration detention; prison conditions for adults and juveniles; medium and high secure forensic psychiatry establishments; treatment of psychiatric patients)

62. In the report, the CPT welcomes the United Kingdom authorities’ willingness to reform the prison system of England and Wales. However, it warns that unless concrete, determined and swift action is taken to reduce the prison population significantly, the regime improvements envisaged by the authorities’ reform agenda would remain unattainable.

63. The CPT was very concerned by the amount of severe generalised violence – particularly inter-prisoner violence – evident in each of the prisons visited. As a result of a combination of systemic failings, none of the prisons visited could be considered safe for prisoners or staff. The report recommends concrete measures to bring prisons back under the effective control of staff, reversing the trend of escalating violence; a far greater investment should be undertaken to prevent violence. In particular, this would require a swift reinforcement of staffing levels. In response, the United Kingdom authorities state that improving safety and decreasing violence is an urgent priority, which they plan to tackle – together with the reduction of reoffending rates – in their agenda to modernise the prison estate, improve education, and create more purposeful regimes. They describe specific measures aimed at reducing violence – both in prisons for adults and in the youth estate – including violence stemming from the widespread availability of psychoactive substances.

64. The CPT’s report underlines that many aspects of prison life were being negatively affected by overcrowding in the prison system. The regimes in all prisons
visited were inadequate, with a considerable number of prisoners spending up to 22 hours per day locked up in their cells. The situation was particularly bleak for juveniles placed on "separation" lists, who could spend up to 23.5 hours a day locked up alone in their cells, for extensive periods – even, occasionally, up to 80 days. The report recommends that juveniles should not be segregated in such conditions, even for the purposes of good order, and instead be placed in small staff-intensive units. In response the United Kingdom authorities state that their strategy to tackle prison overcrowding is based on a combination of early intervention upstream and on reducing reoffending after release for those who are sentenced to immediate custody. As regards the particular situation of juvenile offenders, they outline the rules and measures in place to prevent a situation akin to solitary confinement.

65. As regards the psychiatric institutions visited, the CPT’s report recognises the clear dedication of mental health professionals. However, it recommends some serious reflection and change, for example as regards strengthening the safeguards surrounding consent to treatment, the application of specific treatment measures and the use of means of restraint, as well as making appropriate arrangements for transfers to more secure hospitals. In the high secure hospitals, the CPT’s report is very critical of the way long-term seclusion is applied and expresses misgivings over the use of force deployed to control patients and it calls for a review of the night-time confinement policy. As regards current procedures on the use of restraints, the United Kingdom authorities mention in their response an action plan on reducing their use, as well as a new training module for all in-patient staff, developed after a review of the de-escalation training. On the issue of strengthening safeguards for persons placed in involuntary psychiatric care, the response states that the Government has commissioned an independent review of the Mental Health Act and associated practice.

66. The CPT’s report also points to the need for greater efforts to recruit and retain registered mental health nurses, whose numbers have decreased significantly while the numbers of detained patients have risen. In their response, the United Kingdom authorities provide details of the reforms under way, including plans to create 21,000 new mental health care posts by 2021.

67. The response also provides information on the action taken by the United Kingdom authorities to address the CPT’s recommendations concerning the treatment of persons detained by the police and the situation in immigration centres. The CPT held high-level talks in April 2017 with senior ministers and officials in particular to discuss the ongoing prison reform and issues surrounding involuntary psychiatric care (see paragraph 19 above).

Report published in April 2017 (CPT/Inf(2017)9),
response published in January 2018 (CPT/Inf(2018)1)
On a number of occasions, the CPT has found that complaints mechanisms were either non-existent or displayed major shortcomings.
Complaints mechanisms

For the purpose of this section, the term “complaints” refers to all formal complaints lodged by, or sometimes on behalf of, persons deprived of their liberty against decisions, actions or lack of official action on a variety of issues, in particular: staff misconduct, inadequate protection from other persons deprived of liberty who may cause them harm, poor material conditions, lack of activities or insufficient provision of health care. “Complaints” qualify as such irrespective of the seriousness of the issues complained of and whether or not they could amount to ill-treatment. As is the case in several countries, the term “complaints” may include actions aimed at challenging decisions taken by the relevant complaints bodies. The right to complain or to challenge these decisions is often referred to as an “appeal”. At the same time, legal action aimed at challenging decisions on deprivation of liberty/placement is not covered in this section.

Introduction

68. In the CPT's view, complaints mechanisms constitute a fundamental safeguard against torture and inhuman or degrading treatment of persons deprived of their liberty by a public authority, regardless of the place or situation concerned (police stations, prisons, penal institutions for juveniles, immigration detention centres, psychiatric hospitals, social care homes, military detention facilities, forced return flights, etc.). Such mechanisms can not only allay tensions between persons deprived of their liberty and staff but also, by ensuring that complaints are taken seriously, contribute to building positive relationships.

69. However, on a number of occasions, the CPT has found that complaints mechanisms were either non-existent or displayed major shortcomings. These concerned in particular an insufficient legal basis, lack of, or inadequate, provision of information about complaints bodies or procedures, undue delays in initiating the examination/investigation of complaints, lack of thoroughness in the examination/investigation of complaints, lack of independence or impartiality of the officials dealing with complaints, or insufficient protection against intimidation and reprisals.

During its visits, the Committee has encountered many persons deprived of their liberty who were unaware that they had the possibility to complain, who had found it very difficult to make complaints or who had refrained from making a complaint out of fear of reprisals. Others lacked trust that their complaints would be considered credible and/or be examined in a fair manner.
Type, capacity and nature of complaints mechanisms

70. It is crucially important that, in each place of deprivation of liberty, there is an effective internal complaints mechanism. This can help not only to identify and resolve problems as soon as they arise but can also assist the management and frontline staff to prevent abuses. Such a mechanism should be immediately accessible. Complaints may initially be made orally, and recorded by a member of staff on duty to whom the complaint is made, unless the complaint is about that member of staff (in which case it should be made confidentially to the senior member of staff on duty or the next available supervisor). Such a complaint should be responded to quickly, i.e. within a narrowly defined time span. If not resolved, the complaint should be formulated in writing by the complainant and taken to the next hierarchical level of staff who should also respond in writing. All decisions should indicate the subsequent steps to be taken if the complainant is not satisfied. More sensitive and/or serious complaints should be submitted, by a separate internal procedure, directly to the person in charge of the establishment. It is also important for managers to enter into direct contact with persons deprived of their liberty on a regular basis in order to provide them with opportunities to complain to them freely and confidentially. In the CPT’s view, it is also advisable that external complaints bodies maintain oversight on internal complaints mechanisms.

71. Naturally, complainants should be able to turn to external complaints bodies directly. There is a variety of models in Council of Europe member states, ranging from general complaints bodies (e.g. national ombudsman institutions, administrative courts) to specialised agencies (e.g. independent police complaints bodies, prosecutors or judges specialised in penitentiary matters, prisons ombudsman institutions, special complaints boards or commissions). Their powers may also vary considerably and their decisions may or may not be binding. In the context of its visits, the CPT has often found that complaints bodies which were not empowered to make binding decisions faced problems in having their recommendations or opinions followed up by the relevant authorities.

72. It should also be stressed that the capacity of complaints bodies to carry out their task depends largely on the allocation of adequate resources to their functioning, including human resources. Staff working for these bodies should receive appropriate training and be sufficient in number. Where necessary, they should be able to call on consultants or independent specialised support staff.

73. In the CPT’s experience, it is inadvisable for national preventive mechanisms or other similar monitoring bodies also to deal directly with formal complaints. Where the same institution is designated to handle complaints and to monitor places of deprivation of liberty, both functions should preferably be kept separate and performed by clearly distinct entities, each with its own staff.

74. Complaints bodies should also be conceived as offering supplementary protection. They should not be considered as a substitute for criminal and other legal remedies that should be available to persons deprived of their liberty.

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Basic principles

75. The proper handling of complaints made by persons deprived of their liberty, irrespective of the place or situation in which they are held and the legal framework applicable to their deprivation of liberty, requires the observance of certain basic principles: availability, accessibility, confidentiality/safety, effectiveness and traceability. The presentation of these principles is mainly based on views expressed by the CPT in its visit reports, in the light of its findings on the ground. It does not aim at establishing an exhaustive set of standards on all aspects of the operation of complaints mechanisms.5

1. Availability

76. It is widely recognised that every person deprived of his or her liberty should be legally entitled to lodge formal complaints with bodies designated for this purpose. It is crucial that both internal and external complaints mechanisms are genuinely available.

77. Other interested parties (such as close relatives and friends) should be able to act on behalf of the person concerned, as a rule with her or his consent and close co-operation.

78. Complaints which do not concern ill-treatment or other serious human rights violations may be dealt with through alternative dispute resolution mechanisms such as mediation, subject to the complainant’s agreement.

2. Accessibility

79. Persons deprived of their liberty should promptly receive information, both orally and in writing, about all avenues of complaint (including appeal procedures), both internal and external to the places in which they are being held. They should also have a clear understanding of the modalities for exercising their right to lodge a complaint. For this purpose, appropriate information tools should be developed (e.g. posters in communal areas, a section on complaints procedures in the establishment’s house rules, information leaflets issued by complaints bodies, information videos) and made available to them, in straightforward, user-friendly and non-legalistic formats.

80. All information provided about avenues of complaint – whether upon arrival in a place of deprivation of liberty or at a later stage – should also be available in a language which persons deprived of their liberty understand. In this context, written information on complaints bodies and procedures should be available in the languages most commonly spoken.

81. In order to facilitate access to external complaints mechanisms, it would be highly desirable that appropriate standard complaints forms be made available. Nevertheless, the fact that a complaint has been lodged on a non-standard form should not prevent it from being examined.

5. For more details about police complaints systems in particular, see also the Opinion of the Commissioner for Human Rights of the Council of Europe concerning independent and effective determination of complaints against the police (CommDH(2009)4).
82. As regards indigent persons, measures should be taken to provide them with writing material, envelopes and postage free of charge.

83. Specific regard should be had to the age, gender, state of health, any disability, or any circumstances which render certain persons deprived of their liberty particularly vulnerable.

This implies that special measures should be taken to make complaints mechanisms more accessible for persons with particular needs, such as juveniles, persons with psychosocial and/or learning disabilities, or persons having problems with understanding, speaking, reading or writing the official language(s) of the country concerned, including foreigners.

It should also be stressed that access to the complaints bodies should not be contingent on legal competence. For instance, the fact that a person benefits from legal representation should not affect his or her own right to make complaints. Like any other complainant, he or she should be heard in person. It is also important that, whenever necessary, appropriate support is provided. In particular, it is advisable that juveniles, persons with disabilities, including psychosocial and/or learning disabilities, or foreigners deprived of their liberty have the possibility of being assisted by a person or body that can help them understand and exercise their rights. In addition, it is important that the professionals concerned receive specialised training in the handling of such complaints.

3. Confidentiality / safety

84. Direct and confidential access to complaints bodies should be secured (e.g. by installing locked complaint boxes accessible to complainants in appropriate locations, to be opened only by persons specially designated to ensure the confidentiality of the complaints). Staff who have persons deprived of their liberty directly in their charge should not be in a position to filter complaints.

85. The necessary efforts should also be made to ensure that complainants remain free from intimidation and reprisals. In this connection, staff at all levels should receive the clear message that any kind of threats, attempts to prevent complaints from reaching the relevant complaints bodies, or intimidatory or retaliatory action will not be tolerated and will be the subject of appropriate sanctions.

4. Effectiveness

86. Effective complaints mechanisms should process complaints promptly, thoroughly and expeditiously. They should also contribute to preventing further rights violations and, where appropriate, may offer compensation.

Complaints that are upheld should lead to any rights violations identified being remedied, responsibility for any such violations being determined and, if necessary, a suitable sanction imposed upon those responsible. When required, legal

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6. See also paragraph 131 of the CPT’s 24th General Report and Recommendation CM/Rec (2008) 11 of the Committee of Ministers of the Council of Europe on the European Rules for juvenile offenders subject to sanctions or measures.

7. See, in this connection, paragraph 76 of the judgment of 19 February 2015 of the European Court of Human Rights in the case of M. S. v. Croatia (No. 2), which became final on 19 May 2015.
assistance should be provided to complainants. Complaints bodies should also be entitled to initiate ex officio proceedings (i.e. without a formal complaint being lodged) whenever there are indications of serious rights violations. In this context, the adequacy of the investigations into complaints (or any other information indicative) of torture and other forms of ill-treatment has been the subject of an extensive case-law of the European Court of Human Rights and has been dealt with at length in the CPT’s 14th General Report.

87. In the CPT’s experience, the perceived fairness of a complaints system is also crucial to its effectiveness in combating impunity and promoting a safe environment in the institutions concerned. The system should inspire public confidence and its operation should not dissuade the persons in question from making complaints. In this context, independent complaints bodies should be unconnected and separate from the agencies responsible for persons deprived of their liberty. It is essential that they are, and are seen to be, independent. In several countries, the CPT reached the conclusion that it was necessary to set up an independent agency specialising in the investigation of complaints against police or prison officers, which is demonstrably separate from the authorities having the complainants under their responsibility and from the prosecution services.

88. Whenever a complaint is considered inadmissible, complainants should be informed of the reasons by the competent complaints body and, where applicable, provided with further options for addressing their concerns.

89. Regardless of the outcome of the complaint, it is also important to ensure that complainants are not subjected to any financial or legal sanctions.

5. Traceability

90. Each establishment concerned should keep a record of complaints in a specific register, giving due consideration to the above-mentioned principles of confidentiality and safety. Such a register should include the names of the complainants, the type and the subject of complaints, the outcome of the complaints procedure and of any appeal procedure, follow-up action taken to remedy the situation complained of and any compensation provided to the complainants. These records should serve as a management tool; for instance, it may be the case that many of the complaints relate to the same members of staff, or that certain categories of persons deprived of their liberty hardly ever lodge formal complaints.

91. In each area of competence (police, prisons, immigration detention, psychiatric and social care, etc.), a national system for compiling statistics on complaints, relevant proceedings and outcomes should be established. If the data are correctly gathered and analysed, it becomes possible to identify trends and develop future policies aimed at improving the functioning of the complaints mechanisms and the accountability of the authorities entrusted with the supervision and care of persons deprived of their liberty. In this context, the absence of complaints should not be necessarily considered as positive. On the contrary, in the CPT’s experience, this is often indicative of an unsafe environment in the establishments concerned or of a lack of trust in the complaints system.
In an increasing number of countries, lists of candidates for vacant seats in the Committee are being drawn up in a manner that meets the requirements of the Resolution on improving selection procedures for CPT members.
Organisational matters

CPT membership

92. On 31 December 2017, the CPT comprised 45 members. The seats in respect of Bosnia and Herzegovina and Spain were vacant.

Twenty-six of the CPT’s members were men and 19 were women. Consequently, applying the “less-than-40%” criterion used by the Parliamentary Assembly in Resolution 1540 (2007),8 neither sex is currently under-represented in the Committee.

93. In the course of 2017, the composition of the CPT changed substantially, mainly as a result of the biennial renewal of its membership at the end of the year.

A total of nine new members were elected, namely Vincent Delbos (France), Thomas Feltes (Germany), Gergely Fliegauf (Hungary), Vincent Micallef (Malta), Alan Mitchell (United Kingdom), Vitalie Nagacevschi (Republic of Moldova), Slava Novak (Slovenia), Tinatin Uplisashvili (Georgia) and Chila van der Bas (Netherlands).

Further, fourteen members were re-elected: Djordje Alempijević (Serbia), Régis Bergonzi (Monaco), Mykola Gnatovskyy (Ukraine), Per Granström (Sweden), Nico Hirsch (Luxembourg), Georg Høyer (Norway), Julia Kozma (Austria), Esther Marogg (Liechtenstein), Alexander Minchev (Bulgaria), Ömer Müşluşanoğlu (Turkey), Therese Maria Rytter (Denmark), Davor Strinović (Croatia), Marika Väli (Estonia) and Hans Wolff (Switzerland).

Seven members left the CPT upon expiry of their term of office on 19 December 2017: Wolfgang Heinz (Germany), James McManus (United Kingdom), Anna Molnár (Hungary), Xavier Ronsin (France), George Tugushi (Georgia), Antonius Maria Van Kalmthout (Netherlands) and Victor Zaharia (Republic of Moldova). In addition, Anthony Abela Medici (Malta) resigned on 25 January 2017. The CPT wishes to warmly thank all the aforementioned members for their contribution to the Committee’s work.

A list of CPT members as at 31 December 2017 is set out in Appendix 4.

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8. See Resolution 1540 (2007), sub-paragraph 7.2 of the Council of Europe’s Parliamentary Assembly on improving selection procedures for CPT members: “[…] lists of candidates shall include at least one man and one woman, except when all candidates on the list are of the sex under-represented on the CPT (less than 40%) […]”. 
94. The next biennial renewal of the CPT’s membership is due to take place at the end of 2019, the terms of office of 23 members of the Committee expiring on 19 December of that year. In this respect, it should be noted that 12 of the 23 seats (i.e. more than 50%) are currently occupied by women, which means that the 2019 renewal of membership may pose a risk for the gender balance within the Committee.

The CPT trusts that all the national delegations concerned in the Parliamentary Assembly will put forward lists of candidates in good time, so as to enable the Bureau of the Assembly to transmit the lists to the Committee of Ministers by the end of June 2019 at the latest. If the election procedure for all the seats can be completed before the end of 2019, this will greatly facilitate the planning of the CPT’s activities for the following year.

95. On 26 April, the Parliamentary Assembly of the Council of Europe adopted Resolution 2160 (2017) on “25 years of the CPT: achievements and areas for improvement” in which it congratulated the Committee for its outstanding work and called on national delegations inter alia to ensure that candidates put forward as potential members of the CPT possess the requisite skills and qualities (including language skills) and to improve national selection procedures.

In an increasing number of countries, lists of candidates for vacant seats in the Committee are being drawn up in a manner that meets the requirements of this Resolution on improving selection procedures for CPT members. The Committee hopes that this will soon be the case in all countries. As the Parliamentary Assembly emphasised in its Resolution 1923 (2013) on reinforcing the selection processes for members of key Council of Europe human rights monitoring mechanisms, “at the national level, selection procedures must be transparent and open to competition, including through public calls for candidatures”. Indeed, this is the only way of ensuring that all persons placed on lists of candidates are capable of making an effective contribution to the CPT’s activities.

In its Resolution 2160 (2017), the Parliamentary Assembly also calls on national delegations to ensure that the “candidates have an excellent command of at least one of the official languages of the Council of Europe (English or French), and at least a passive knowledge of the second official language”; and “in order to ensure the independence and impartiality of the CPT, bear in mind that a candidate holding a decision-making position which implies defining and/or implementing policies at national level or otherwise holding functions which may give rise to a conflict of interest, should in principle not be selected”. The CPT supports these criteria for the selection of members.

**Bureau of the CPT**

96. Elections for the Bureau were held at the Committee’s March plenary meeting on the expiry of the previous Bureau’s two-year term of office. Mykola Gnatovskyy (Ukraine) was re-elected President, Marzena Ksel (Poland) was re-elected 1st Vice-President, and Mark Kelly (Ireland) was elected 2nd Vice-President. These three members of the CPT constitute the Committee’s Bureau.
97. During 2017, the numbers of staff in the Secretariat stabilised with all vacant positions having been filled. However, at the end of the year it became clear that two staff members would be on extended leave for a good part of 2018. Furthermore, the administrative practice of the Council of Europe in the area of human resources continues to pose significant risks for the stability and operational capacity of a small entity such as the CPT, with highly specific duties requiring specialised skills. In November 2017, the Committee of Ministers took note of the concerns expressed both by the Parliamentary Assembly and the CPT on this matter.9

Two significant developments which occurred in 2017 may produce effects in the course of 2018: the decision of the Russian Federation not to pay part of its contribution to the Council of Europe budget, and the announcement by the Turkish authorities that they would no longer be a “major contributor” to the Council of Europe budget, but would return to their statutory contribution. The CPT hopes that solutions can be found to enable it to continue to carry out its vital task of preventing torture and other forms of ill-treatment across the European continent.

In its Recommendation 2100 (2017) of 26 April on the CPT, the Parliamentary Assembly invited the Committee of Ministers to ensure that the CPT is supported by an adequate secretariat with relevant professional skills and composed of staff members employed on a permanent basis. The Committee of Ministers replied to this recommendation on 29 November, underlining the importance it attaches to the work of the CPT, also taking note of the concerns expressed by the Parliamentary Assembly and the CPT about the need for sufficient stability amongst the staff members in the CPT’s Secretariat.

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... unlimited access to any place where persons are deprived of their liberty ...
1. The CPT’s mandate and modus operandi

The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) was set up under the 1987 Council of Europe Convention of the same name (hereinafter “the Convention”). According to Article 1 of the Convention:

“There shall be established a European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment... The 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 in these states 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 stations to encompass, for example, psychiatric institutions, detention areas at military barracks, holding centres for asylum seekers or other categories of foreign nationals, and places in which young persons 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 – co-operation 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 to prevent 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 state concerned. The Committee’s visit report is, in principle, confidential; however, most of the reports are eventually published at the state’s request.10

10. As regards the “automatic publication procedure”, reference is made to paragraph 28.
2. Signatures and ratifications of the Convention establishing the CPT

The European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (ECPT) was opened for signature by the member states of the Council of Europe on 26 November 1987. Since 1 March 2002, the Committee of Ministers of the Council of Europe has been able to invite any non-member state of the Council of Europe to accede to the Convention.

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* 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.
3. The CPT’s field of operations

Note: This map is not an official representation of states bound by the Convention. For technical reasons it has not been possible to show the entire territory of certain of the states concerned.

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<td>Denmark</td>
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47 states; prison population: 1 527 060 prisoners

(Main source: Council of Europe Annual Penal Statistics (SPACE I – 2016.1); data as at 1 September 2016)

It should be noted that, as well as prisons, the CPT’s mandate covers all other categories of places where persons are deprived of their liberty: police establishments, detention centres for juveniles, military detention facilities, immigration holding centres, psychiatric hospitals, social care homes, etc.
### 4. CPT members

in order of precedence (as at 31 December 2017)

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<tr>
<th>Name</th>
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<tr>
<td>Mr Georg HØYER</td>
<td>Norway</td>
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<tr>
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<td>Mr Vytautas RAŠKAUSKAS</td>
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<td>Mr Davor STRINOVIĆ</td>
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<td>Mr Nico HIRSCH</td>
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<td>Mr Hans WOLFF</td>
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<tr>
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<td>Ms Dagmar BREZNOŠČÁKOVÁ</td>
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<tr>
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<td>Ms Olga NOYANOVA</td>
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<tr>
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<tr>
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<tr>
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<td>Mr Alan MITCHELL</td>
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On 31 December 2017, the seats in respect of Bosnia and Herzegovina and Spain were vacant.
5. CPT Secretariat

(as at 31 December 2017)

Mr Jeroen SCHOKKENBROEK, Executive Secretary
Secretariat: Ms Corinne GOBerville, Personal Assistant
Ms Antonella NASTASIE, Assistant to the Committee

<table>
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<tr>
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<tbody>
<tr>
<td>Mr Johan FRIESTEDT, Head of Division</td>
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<tr>
<td>Ms Caterina BOLOGNESE, Principal Administrative Officer</td>
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<tr>
<td>Mr Patrick MÜLLER, Research, information strategies and media contacts</td>
</tr>
<tr>
<td>Ms Claire ASKIN, Archives, publications and documentary research</td>
</tr>
<tr>
<td>Ms Morven TRAIN, Administrative and budgetary questions</td>
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## Divisions responsible for visits

### Division 1

Mr Michael NEURAUTER, Head of Division  
Mr Petr HNATIK  
Ms Aurélie PASQUIER  
Ms Almut SCHRÖDER  
Ms Yvonne HARTLAND, Administrative Assistant  
Secretariat: Ms Oana MOLDOVEAN

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### Division 2

Mr Borys WODZ, Head of Division  
Mr Elvin ALIYEV  
Ms Natacha DE ROECK  
Ms Dalia ŽUKAUSKIENĖ  
Secretariat: Ms Natia MAMISTVALOVA

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### Division 3

Mr Hugh CHETWYND, Head of Division  
Ms Janet FOYLE  
Ms Francesca GORDON  
Mr Cristian LODA  
Ms Françoise ZAHN, Administrative Assistant  
Secretariat: Ms Diane PENEAU

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11. All reference 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.
Visits carried out in pursuance of Article 7 of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment

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* 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 13 reports cover the 14 visits carried out.
(c) Two reports concerning visits to the Transnistrian region and one report concerning a visit to Prison No. 8 in Bender.
(d) 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.
(e) These 9 reports cover the 10 visits carried out.
(f) These 23 reports cover 26 visits carried out.
(g) Including one visit organised in September 2004 to Serbia and Montenegro.
(h) These 27 reports cover the 29 visits carried out.
(i) These 24 published reports cover 26 visits carried out.
(j) Including two separate reports covering the 2010 visit to Jersey and Guernsey.
(k) Report only recently transmitted to the authorities.
(l) One of which was only recently transmitted to the authorities.
Monitoring of the situation of persons convicted by international tribunals and serving their sentence in a state party to the Convention

Germany:

Two visits carried out in 2010 and 2013 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 between the ICTY and the Government of the Federal Republic of Germany.

Portugal:

One visit carried out in 2013 in pursuance of an Exchange of Letters dated 7 and 24 November 2000 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.

United Kingdom:


One visit carried out in 2014 in pursuance of an Exchange of Letters between the Residual Special Court for Sierra Leone and the CPT dated 20 January and 5 February 2014, and an Agreement between the Residual Special Court for Sierra Leone and the United Kingdom Government dated 10 July 2007.

Visits carried out on the basis of special arrangements

Kosovo: 12

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

Two visits carried out in 2010 and 2015 on the basis of the agreement signed in 2004 between the Council of Europe and UNMIK. The reports on both visits have been published (together with the responses provided by UNMIK).

12. All reference 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.
7. Countries and places of deprivation of liberty visited by CPT delegations

(January - December 2017)

Periodic visits

Belgium

27/03/2017 - 06/04/2017

Police establishments

- Bruges Police Headquarters
- Ghent Police Headquarters
- Liège Police Headquarters
- Tournai Police Headquarters
- Federal Railway Police Station at Liège-Guillemins train station

Prisons

- Bruges Prison Complex
- Lantin Prison
- Leuze-en-Hainaut Prison
- Saint-Gilles Prison

Specialised care institutions for psychiatric patients subjected to an “internment” measure

- Ghent Forensic Psychiatric Centre
- Pafve Social Defence Establishment

Court facilities

- Holding cells at the Court of Justice Building in Brussels

Bulgaria

25/09/2017 - 06/10/2017

Police establishments

- 5th District Police Directorate, Burgas
- Elhovo District Police Directorate
- Nova Zagora District Police Directorate
- Radnevo District Police Directorate
- Sliven District Police Directorate
- 3rd District Police Directorate, Sofia
- 5th District Police Directorate, Sofia
- 7th District Police Directorate, Sofia
- Sredets District Police Directorate
- 2nd District Police Directorate, Stara Zagora
Tvarditsa District Police Directorate
1st District Police Directorate, Varna
2nd District Police Directorate, Varna

**Prisons**
- Burgas Prison
- Debelt Prison Hostel
- Razdelna Prison Hostel
- Sofia Prison
- Varna Prison

**Investigation detention facilities at:**
- Burgas
- Sliven
- 42 Blvd. G.M. Dimitrov, Sofia

**Detention centres for foreign nationals**
- Special Home for Accommodation of Foreigners in Lyubimets

**Psychiatric establishments**
- Sevlievo State Psychiatric Hospital
- Radnevo State Psychiatric Hospital

**Social care establishments**
- Home for persons with learning disabilities in Batoshevo
- Home for persons with learning disabilities in Kachulka
- Home for persons with learning disabilities in Tvarditsa
- Home for persons with psychiatric disorders in Radovets
- Home for persons with psychiatric disorders in Tvarditsa

**Croatia**

14/03/2017 - 22/03/2017

**Police establishments**
- Osijek Police Station I
- Split Police Station I
- Split Police Station II
- Velika Gorica Police Station
- Vinkovci Police Station
- Vrbanja Police Station
- Zagreb Detention and Escort Unit (Oranice)
- Zagreb Police Station II (Črnomerec)
- Zagreb Police Station VI (Remetinec)
- Zagreb Police Station VIII (Trnje)
Prisons
► Osijek County Prison
► Split County Prison
► Zagreb County Prison
► Prison Hospital in Zagreb

Establishments for the detention of juveniles
► Juvenile Correctional Facility, Turopolje

Psychiatric establishments
► Vrapče Psychiatric Hospital, Zagreb
► Psychiatric Clinic of the Rebro Clinical Hospital Centre (KBC), Zagreb
► Zagreb Psychiatric Hospital for Children and Adolescents

Cyprus
02/02/2017 - 09/02/2017

Police establishments
► Aradippou Police Station
► Larnaca Central Police Station (targeted visit)
► Limassol Central Police Station
► Lakatamia Police Station
► Nicosia Central Police Station
► Pera Chorio Nisou Police Station
► Paphos Central Police Stations
► Polis Chrysochous Police Station

Prisons
► Nicosia Central Prisons

Detention centres for foreign nationals
► Holding facility for immigration detainees at Larnaca Airport
► Holding facility for immigration detainees at Paphos Airport
► Kokkinotrimithia Rescue Camp
► Menoyia Detention Centre for Illegal Immigrants

Psychiatric establishments
► Anosi Drug Rehabilitation Centre at the old Limassol General Hospital (targeted visit)
► Athalassa Psychiatric Hospital, Nicosia
► Psychiatric Clinic of Limassol General Hospital (targeted visit)
► Psychiatric Clinic of Nicosia General Hospital (targeted visit)

Social care establishments
► “Ayios Christophoros” Home, Nicosia (partial visit)
► “Ayios Georgios” Home, Larnaca
► “Ayios Ioannis” Home, Kolossi (Limassol) (targeted visit)
► “Ariadni” Home, Nicosia
► Institution for Unaccompanied Teenage Girls, Larnaca (targeted visit)
Estonia

27/09/2017 - 05/10/2017

Police establishments
- Haapsalu Detention House
- Tallinn Detention House
- Pärnu Detention House
- Tartu Detention House
- Valga Detention House
- Tallinn City Centre Police Station
- Tallinn East Police Station

Prisons
- Tallinn Prison
- Tartu Prison
- Viru Prison

Social care establishments
- Valgejõe Training Centre of Maarjamaa Education Institute

Montenegro

09/10/2017 - 16/10/2017

Police establishments
- Podgorica Security Centre (CB)
- Cetinje Security Department (OB)
- Danilovgrad Security Department (OB)
- Budva Security Centre (CB)
- Tivat Security Department (OB)
- Kotor Security Centre (CB)
- Ulcinj Security Department (OB)
- Bjelo Polije Security Centre (CB)
- Bar Security Centre (CB)

Prisons
- Bjelo Polije Prison
- Institution for Sentenced Prisoners (KPD), Podgorica
- Remand Prison, Podgorica

Psychiatric establishments
- Dobrota Special Psychiatric Hospital

Social care establishments
- Komanski Most Institution for People with Special Needs
- Ljubovic Centre for Juveniles
Poland

11/05/2017 - 22/05/2017

**Police establishments**
- City Police Command, Białystok
- Police establishment for children, Białystok
- City Police Command, Bytom
- City Police Command, Gliwice
- City Police Command, Grójec
- District Police Command, Gostynin
- City Police Command, Opole
- District Police Command, Strzelce Opolskie
- Metropolitan Police Command, Warsaw
- District Police Command, Warsaw IV, Warsaw
- District Police Command, Warsaw V, Warsaw
- District Police Command, Warsaw VI, Warsaw
- District Police Command, Warsaw VII, Warsaw
- City Police Command, Zabrze

**Border Guard establishments**
- Guarded Centre for Foreigners in Białystok
- Guarded Centre for Foreigners in Lesznowola

**Prisons**
- Białystok Remand Prison
- Gliwice Remand Prison
- Prison No. 2 in Strzelce Opolskie
- Warsaw-Białołęka Remand Prison
- Warsaw-Służewiec Remand Prison

**Establishments for the detention of juveniles**
- Juvenile Correctional Facility in Białystok

**Psychiatric establishments**
- Regional Centre for Forensic Psychiatry, Gostynin
- National Centre for Prevention of Dissocial Behaviour, Gostynin
- Toszek Psychiatric Hospital

Slovenia

28/03/2017 - 04/04/2017

**Police establishments**
- Koper Police Station
- Ljubljana Centre Police Station
- Ljubljana – Moste Police Detention Centre
- Maribor I. Police Station
- Piran Police Detention Centre
- Postojna Detention Centre for Foreigners
Prisons
- Ljubljana Prison
- Maribor Prison
- Koper Prison (targeted visit)

Psychiatric establishments
- Forensic Unit of the Psychiatric Department of Maribor University Hospital

Turkey

10/05/2017 - 23/05/2017

Police establishments
- Ankara Police Headquarters (Anti-Terror Department, including a sports hall used as an ad hoc detention facility)
- Ankara Police Headquarters (Law and Order Department)
- Batman Police Headquarters (Anti-Terror Department)
- Batman Central Gendarmerie Commandership
- Diyarbakır Police Headquarters (Anti-Terror Department)
- Istanbul Police Headquarters (Anti-Terror Department)
- Istanbul-Beyoğlu District Police Station
- Istanbul-Fatih District Police Station
- Istanbul-Şişli District Police Station
- Siirt Police Headquarters (Organised Crime Department)
- Siirt Police Headquarters (Law and Order Department)
- Siirt-Yeni Mahalle Police Station
- Trabzon Police Headquarters
- Trabzon-Çarşı Police Station
- Trabzon-Gülbahar Hatun Police Station

Detention centres for foreign nationals
- Istanbul-Binkılıç Removal Centre
- Holding facilities for passengers declared inadmissible and for asylum-seekers in the transit zone at Istanbul- Atatürk Airport
- İzmir-Harmandalı Removal Centre
- İzmir-İşikkent Removal Centre

Prisons
- Batman M-type Prison
- Diyarbakır D-type Prison
- Diyarbakır E-type Prison
- İstanbul-Bakırköy Prison for Women (targeted visit)
- İstanbul-Metris R-type Prison (for prisoners suffering from a mental disorder and prisoners in need of special care)
- Metris T-type Prison No. 1 (targeted visit)
- İzmir-Menemen R-type Prison (for prisoners in need of special care)
- Siirt E-type Prison
- Trabzon E-type Prison
Ukraine

08/12/2017 - 21/12/2017

Police establishments
- Chernivtsi Temporary Holding Facility (ITT)
- Dnipro ITT
- Dnipro District Police Division
- Kalush ITT
- Kremenchuk Police Unit
- Kyiv ITT
- Kyiv Shevchenkivskyi District Police Division
- Nadvirna ITT
- Poltava ITT
- Poltava Oktyabrskyi District Police Division
- Pustomyty ITT
- Zhovkva ITT

Border Guard establishments
- Chernivtsi Temporary Detention Place (TDP)
- Lviv TDP

Security Service of Ukraine (SSU) establishments
- SSU Temporary Detention Facility, Kyiv

Prisons
- Chernivtsi Penitentiary Institution No. 33
- Ivano-Frankivsk Penitentiary Institution No. 12
- Kremenchuk Educational Colony for Juveniles
- Kyiv Pre-Trial Detention Centre (SIZO)
- Lviv Penitentiary Institution No. 19
- Lychakivska Prison No. 30, Lviv

Psychiatric establishments
- Kyiv Municipal Psychiatric Hospital No. 3 (Hlevakha)
- Dnipro High-Security Psychiatric Hospital
- Poltava Regional Psychiatric Hospital

Social care establishments
- Kyiv Svyatoshinskyi Psychoneurological Institution (“Internat”)
Ad hoc visits

Albania

02/02/2017 - 09/02/2017

Police establishments
- Tirana Regional Police Directorate
- Police Station No. 1, Tirana
- Police Station No. 3, Tirana
- Durres Police Station
- Elbasan Police Station
- Gjirokastra Police Station
- Korca Police Station
- Saranda Police Station
- Vlora Police Station

Prison establishments
- Prison No. 302, Tirana
- Prison No. 313, Tirana
- Prison Hospital, Tirana
- Korca Prison
- Durres Pre-Trial Detention Facility
- Saranda Pre-Trial Detention Facility
- Zaharia Special Facility for Ill Inmates, Kruja

Azerbaijan

23/10/2017 - 30/10/2017

Police establishments
- Temporary Detention Centre of the Main Department for Combating Organised Crime, Baku
- Narimanov District Police Department and Temporary Detention Centre, Baku
- Nizami District Police Department and Temporary Detention Centre, Baku
- Surakhani District Police Department and Temporary Detention Centre, Baku
- Xezer District Police Department and Temporary Detention Centre, Baku
- Main City Police Department and Temporary Detention Centre of Ganja/Kapaz
- Sheki City Police Station and Temporary Detention Centre
- Nakhchivan Temporary Detention Centre, Böyük Düz

Prisons
- Sheki penitentiary establishment
- Nakhchivan mixed-regime prison
- Baku pre-trial detention facility, Zabrat
- Pre-trial detention facility No. 2, Ganja
- Pre-trial detention facility No. 3, Shuvalan

State Security Service establishments
- Investigative isolator and temporary detention facility, Baku
Hungary

20/10/2017 - 26/10/2017

**Police establishments**
- Csongrád County Border Police Division, Szeged (Moscow street)
- Police detention facility at the border post, Röszke

**Detention centres for foreign nationals**
- Transit zone, Röszke
- Transit zone, Tompa

Italy

07/06/2017 - 13/06/2017

**Detention centres for foreign nationals**
- “Hotspot” in Lampedusa
- “Hotspot” in Pozzallo
- “Hotspot” in Trapani (Milo)
- Mobile “hotspot” unit at Augusta port
- Closed removal centre in Caltanissetta
- Closed removal centre in Ponte Galeria (Rome)
- Closed removal centre in Turin
- Holding facilities at Rome Fiumicino Airport

Russian Federation (Chechen Republic)

28/11/2017 - 04/12/2017

**Law enforcement establishments**
- Temporary Detention Facility (IVS) of Argun City Internal Affairs Division (as well as the neighbouring building which formerly housed this Division)
- IVS of Police Division No. 1 in Grozny (Leninskiy district)
- Police Division No. 2 in Grozny (Zavodskoy district)
- Shali District Internal Affairs Division and its IVS
- Mesker-Yurt Police Station, Shali District
- Headquarters and barracks of Special-Purpose Patrol-Sentry Police Regiment named after A. Kadyrov of the Ministry of Internal Affairs of the Chechen Republic, Grozny

**Prisons**
- SIZO No. 1 in Grozny
Serbia

31/05/2017 - 07/06/2017

Police establishments

► Metropolitan Police Headquarters, 29 November Street, Belgrade
► Stari Grad Police Station, Belgrade
► Novi Beograd Police Station, Belgrade
► Leskovac Police Station (Sever)
► Niš District Police Station
► Novi Sad District Police Station
► Pančevo District Police Station
► Pirot Police Station

Prisons

(remand sections only)

► Belgrade District Prison
► Čuprija Penal Correctional Institution
► Leskovac District Prison
► Niš Penal Correctional Institution (including the detention unit in Pirot)
► Novi Sad District Prison
► Pančevo District Prison
► Prokuplje District Prison
► Vranje District Prison

United Kingdom (Sovereign Base Areas on Cyprus)

09/02/2017 - 11/02/2017

SBA Administration

► HMP Dhekelia
► Kolossi Police Station
► Dhekelia Police Station
► “16 Flight”, Dhekelia Garrison
► Transit Facility, Dhekelia

British Forces Cyprus

► Service Custody Facility, Salamanca Barracks, Episkopi Garrison
► Cyprus Joint Police Unit Headquarters, Episkopi Garrison
United Kingdom (Northern Ireland)

29/08/2017 - 06/09/2017

Police establishments

► Antrim Police Station
► Musgrave Police Station, Belfast
► Coleraine Police Station
► Strand Road Police Station, Derry/Londonderry

Prison establishments

► Ash House Women’s Prison in Hydebank Wood College
► Maghaberry Prison

Psychiatric institutions

► Shannon Medium Secure Psychiatric Clinic
8. Public statement concerning Belgium

*(made on 13 July 2017)*

**Introduction**

1. The CPT has carried out ten visits to Belgium since 1993. In many respects, the cooperation which the Committee has been shown by the Belgian authorities in the course of those visits and in the implementation of its recommendations gives genuine cause for satisfaction. The Committee would like to welcome the efforts made over the years to strengthen the protection of persons deprived of their liberty in the country. The most recent periodic visit, which took place from 27 March to 6 April 2017, provided the opportunity to see further progress, including in the prison sector, which will be reflected in the future CPT report on that visit.

2. However, for 12 years, the CPT has consistently expressed its deep concern regarding the serious consequences which can result from industrial action by prison staff in Belgium. These consequences have a direct impact (for prolonged periods) on the detention conditions, health and security of the persons placed under their responsibility. They entail, in particular, almost continuous confinement of inmates in cells in conditions already deemed intolerable, serious disruption in the distribution of their meals, a dramatic deterioration of their personal hygiene conditions and conditions in cells, frequent cancellation of daily outdoor exercise, serious restrictions on their access to health care and a virtual halt to their contacts with the outside world (including with lawyers).

   Such industrial action, which at times takes place without any prior notice and without any limit on the number of prison staff involved or the duration of the action, generally gives rise to a significant increase in tension in the establishments concerned. Further, the occurrence, during prison strikes, of several serious incidents, which in some cases have led to deaths, raises worrying questions about the ability of the authorities and those responsible for the industrial action to deal appropriately with the consequences.

   During its many visits to the 47 Council of Europe member states over the last 27 years, the Committee has never observed a similar phenomenon, in terms of both the extent of the phenomenon in question and the risks involved.

3. Persons subject to a psychiatric detention measure ("internement") are, on account of their particular needs, placed in an even more vulnerable situation during industrial action by prison staff. The CPT has also highlighted in its reports a number of general shortcomings in the care provided to these persons.\(^\text{13}\) These same shortcomings prompted the European Court of Human Rights to conclude that there

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13. See, for example, paragraph 95 of the CPT report on its periodic visit to Belgium in 2013 (in French only).
had been degrading treatment.\textsuperscript{14} The lack of effective control of industrial action in prisons has caused further suffering and worsened the already uncertain conditions in which these persons find themselves pending the provision of appropriate care.

\textbf{Guaranteed minimum service and basic rights of persons held in prison establishments: the subject of ever more intense dialogue between the CPT and the Belgian authorities}

4. The question of establishing a service guaranteeing the basic rights of persons held in prison establishments (“guaranteed minimum service”) was raised in the CPT’s reports on the 2005, 2009, 2012 and 2013 visits in order to address the challenges referred to above.\textsuperscript{15} The dialogue between the Committee and the Belgian authorities intensified still further with effect from March 2014 when, given the lack of any progress for many years, the CPT was obliged to initiate the procedure which could result in the exceptional measure of making a public statement, in accordance with Article 10, paragraph 2, of the Convention establishing the Committee.\textsuperscript{16} In October 2014, the Committee was pleased to note that the introduction of a guaranteed minimum service in prisons had been included in the Government Coalition Agreement.\textsuperscript{17}

5. However, the situation reached its peak almost two years later, between April and June 2016, when there was unusually severe strike action affecting most prisons in the French-speaking areas. For almost two months, prison, administrative and health-care staff were prevented from entering their workplace. The staff present in the establishments concerned were reduced in most cases to management staff assisted by a few health-care staff and prison officers. The police had to be mobilised once again and deal with the challenge facing them and others brought in to help out, of carrying out very specialised duties that they were not competent to perform. For the first time, the Belgian authorities were obliged to call on the armed forces to help the management and a handful of prison staff on the brink of exhaustion to ensure security in the prisons.

6. The CPT took prompt action by carrying out an ad hoc visit in May 2016. The Committee’s delegation visited the prisons of Huy, Ittre and Jamioulx, and the social defence establishment in Païfve, in each of which management staff were struggling to cope with the chaos caused by the strikes.

\textsuperscript{14} See the pilot judgment of the European Court of Human Rights of 6 September 2016 (which became final on 6 December 2016) in the \textit{W.D. v. Belgium} case (in French only). The reason why the Court considered that there had been degrading treatment lies in the fact that such persons were being held for a prolonged period of time in a prison environment without being given treatment appropriate to their state of health. The Court held that this problem was structural in nature and called on the authorities to take the necessary measures to address it within two years.

\textsuperscript{15} These visit reports and the corresponding government responses are available (in French only) on the CPT’s website: http://www.coe.int/en/web/cpt/belgium.

\textsuperscript{16} Article 10, paragraph 2, of the Convention 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.”

\textsuperscript{17} See Government Agreement of 9 October 2014, pages 122-123 (in Dutch and French only).
7. In June 2016, the President of the CPT went to Brussels for talks with Mr Koen Geens, Minister of Justice, attended by a representative of the Prime Minister. It emerged from these talks that action would be taken to ensure that the basic rights of prisoners were upheld in any future industrial action, in particular by means of a legislative initiative by the end of 2016.\(^{18}\)

8. At its 92nd plenary meeting in March 2017, the Committee took note of the Belgian authorities’ new commitment to embark upon a more comprehensive project with social partners. The 2017 periodic visit was an opportunity to review the situation with the Minister and a large number of stakeholders, including senior public servants, senior representatives of trade union organisations, representative associations of prison directors, judges and prosecutors, police officers, lawyers, representatives of independent national institutions, representatives of the Central Prison Monitoring Council and local monitoring committees, and members of NGOs and civil society. At times the views expressed were diametrically opposed, particularly as regards the introduction of a guaranteed minimum service in prisons and various matters relating to the status of prison staff.

In contrast, those with whom the delegation spoke were unanimous on one point: a “red line” had been crossed during the 2016 strikes. The general impression was that persons deprived of their liberty in the prisons concerned had, because of this action, been placed in conditions which could amount to inhuman or degrading treatment or lead to the aggravation of conditions already held to be incompatible with Article 3 of the European Convention on Human Rights.\(^{19}\)

The information gathered by the delegation during the 2017 visit also suggested that, despite their considerable efforts, prison management and the few other members of the staff who were at work during the 2016 strikes did not have the resources required to ensure the physical and psychological integrity of remand or sentenced prisoners, and even less so those subject to a psychiatric detention measure. The death of one psychiatric detainee on 17 May 2016, after being violently attacked by a co-detainee in the psychiatric wing of Lantin Prison, once again raises concerns for the CPT, in the light of the new information gathered on the spot, about the excessive risks that can be incurred during such industrial action.

9. On the ground, during the 2017 visit, the situation was beyond dispute: frustration, demoralisation and a sense of having been abandoned were the main feelings expressed by the many people with whom the delegation spoke, whether they were prisoners or those responsible for looking after them. The delegation was also able to note that these strikes had left serious after-effects on the members of the various categories of staff. The delegation discerned genuine unease among certain prison staff whom it met, who felt that the 2016 industrial action had quite simply tarnished the image of the profession and had jeopardised the principle of exemplary conduct. Further, many felt that absenteeism among prison staff had increased significantly during the strikes and the difficulty in dealing with this phenomenon continued to put a huge strain on the day-to-day organisation of work.

\(^{18}\) See also the CPT’s report on the 2016 visit to Belgium and the response of the Belgian government (in French only).

\(^{19}\) See the aforementioned pilot judgment of the European Court of Human Rights and, for example, the judgment of 16 May 2017 in the Sylla and Nollomont v. Belgium cases (in French only).
**Breaking the deadlock**

10. The CPT understands the distress experienced by some trade union representatives and prison staff when faced with working conditions which at times can be well below what is required to ensure decent standards for inmates in their charge. These concerns echo those which the Committee has been voicing for many years. As the CPT has regularly pointed out, prison staff carry out a fundamental and very specific public service role which should be recognised in terms of recruitment, training and working conditions that ensure that inmates are looked after appropriately. In any event, any solution should include the introduction of a service guaranteeing the basic rights of inmates. Establishing such a service flows directly from the responsibilities of the state towards persons whom it has deprived of their liberty and from the fundamental principle that a lack of available resources cannot justify detention conditions which infringe the rights of inmates.²⁰

11. Respect for the human dignity of all inmates should be the highest priority and should continue to guide the action being taken by the Belgian authorities. Greater attention should be focused on the vulnerable situation of persons held under psychiatric detention, awaiting care in appropriate facilities. It is imperative that, in future, in all circumstances:

- the security of all inmates, including those subject to a psychiatric detention measure, is guaranteed,
- inmates are at all times treated with humanity and respect,
- continuity of care is provided to those held under psychiatric detention, awaiting placement in an appropriate facility and to any other person suffering from psychiatric disorders in prison,
- inmates have unrestricted access to general and specialist medical care including, if absolutely necessary, in a hospital,
- meals (including one hot meal) are prepared and distributed at set times every day,
- access to an outdoor exercise area is granted for at least one hour per day,
- conditions for maintaining inmates’ personal hygiene are guaranteed, with access to showers at least twice a week, and cells are kept clean,
- inmates’ continuity of contacts with the outside world is maintained by telephone and post, and by means of weekly visits (in addition to any contacts with lawyers).

12. The CPT considers that failure to comply with these requirements may result in a large number of inmates being subjected to inhuman or degrading treatment, or the aggravation of situations already characterised as intolerable, endangering the health and life of inmates and compromising the security of the establishments concerned. The lack of concrete progress over many years in establishing a viable system for these rights to be upheld in all circumstances, in

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particular in the context of industrial action by prison staff, is a serious failure to co-operate with the Committee, about which successive Belgian governments have made their views known on numerous occasions. For these reasons, the CPT has had no choice but to make this public statement, pursuant to Article 10, paragraph 2, of the Convention establishing the Committee.

In issuing this statement, the CPT calls upon the Belgian authorities and all stakeholders, in particular the social partners, to assume their responsibilities once and for all and find quickly an appropriate solution to this exceptionally serious problem which should not arise in a Council of Europe member state. The fact that the relevant consultation processes are under way or about to start provides an excellent opportunity in this context.

In addition, the Committee strongly encourages the Belgian authorities to step up their efforts to transfer at the earliest opportunity those persons subject to a psychiatric detention measure to facilities where they can be given appropriate psychiatric care, especially as they are particularly vulnerable when industrial action is taken by prison staff.

Lastly, the CPT wishes to recall that the recommendations it has made in the past are above all a means of helping the government and everyone concerned, including at legislative and judicial level, to make the necessary changes. In furtherance of its mandate, the Committee is fully committed to continuing and intensifying its dialogue with the Belgian authorities.
The CPT carries out visits to places of detention, in order to assess how persons deprived of their liberty are treated. These places include prisons, juvenile detention centres, police stations, holding centres for immigration detainees, psychiatric hospitals, social care homes, etc.

After each visit, the CPT sends a detailed report to the state concerned. This report includes the CPT’s findings, and its recommendations, comments and requests for information. The CPT also requests a detailed response to the issues raised in its report. These reports and responses form part of the ongoing dialogue with the states concerned.

The CPT is required to draw up every year a general report on its activities, which is published. This 27th General Report, as well as previous general reports and other information about the work of the CPT, may be obtained from the Committee’s Secretariat or from its website (http://www.cpt.coe.int/).