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مفوضية
حقوق السجناء والمحتجزين
Prisoners & Detainees Rights Commission

PDRC Report No. (27)

**Unannounced Visit to
the Dry Dock Young Inmates Reformation and
Rehabilitation Center**

15 January 2025

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Introduction

In the exercise of its statutory mandate, and as part of its ongoing efforts to promote and strengthen respect for human rights in prisons, detention centers, and other places where persons may be deprived of their liberty, including hospitals and psychiatric institutions, the Prisoners and Detainees Rights Commission (PDRC) conducts inspections to verify the conditions of persons accommodated in such facilities and the treatment they receive.

Pursuant to its powers and competencies under Royal Decree No. (61) of 2013, the PDRC conducted an unannounced inspection visit to the Dry Dock Young Inmates' Reformation and Rehabilitation Center on Wednesday, 15 January 2025. This was the Commission's first comprehensive inspection of the Center. The PDRC had previously conducted several visits to the Dry Dock Detention Center and the Jau Reformation and Rehabilitation Center.

The purpose of the visit was to examine the condition of the facility, the treatment received by young inmates and detainees accommodated therein, their living conditions, the healthcare services provided to them, and the legal rights and guarantees afforded to them. The inspection was conducted in accordance with the principles, standards, and indicators adopted by the PDRC, following its established professional methodology for such visits. This includes documenting observations made during the inspection and issuing recommendations aimed at promoting and strengthening respect for human rights and ensuring compliance with applicable international principles and standards.

The visit was conducted in cooperation with the Ombudsman, which established a new administrative unit in December 2024 responsible for receiving complaints submitted by children between the ages of 15 and 18 who are accommodated in the Reformation and Rehabilitation Center, the Detention Center, or other places of detention. This unit operates within the powers conferred upon the Ombudsman under Royal Decree No. (27) of 2012, as amended by Royal Decree No. (35) of 2013.

Section One: Background and Methodology

The Prisoners and Detainees Rights Commission (PDRC) is mandated to conduct comprehensive inspection visits, whether announced or unannounced, to prisons, detention centers, and other care institutions. During these visits, the Commission examines the conditions of such facilities, the treatment of inmates and detainees, and listens to their statements, observations, and any complaints they may wish to raise. In carrying out these visits, **the PDRC follows an established professional methodology for collecting evidence and information, which includes the following:**

A. Interviews with Inmates and Detainees

PDRC members interviewed a random sample of young detainees accommodated at the Center. Their statements were recorded in accordance with established professional standards, together with the statements of other detainees who voluntarily approached PDRC members during the inspection to express their views or raise concerns.

All interviews were conducted independently in a private setting, without interference from the Center's administration, ensuring full privacy and confidentiality. At the outset of each interview, where the team introduced the PDRC, explained its mandate and the purpose of the interviews, and assured the interviewees that their discussions would remain confidential. The PDRC team listened carefully to all observations raised and recorded all responses and observations provided.

B. Meeting with the Center's Administration

The PDRC team met with the Center's administration, which provided an overview of the facility, the procedures and services provided, and key data, statistics, and information relating to those accommodated at the Center, together with details of the administrative staff responsible for supervising the facility.

The team was also briefed on the principal projects and programs that had been implemented or were under implementation. Meetings with the administration continued

throughout the visit, during which the members raised questions and sought clarification regarding observations made by interviewees, as well as issues identified during the direct inspection of the Center and its operational procedures.

C. Review of Documents and Records

The PDRC team examined documents and records relevant to the principles and standards upon which the inspection was based. These included admission records to verify the legality of detention, together with administrative records detailing the number of young inmates and detainees, the grounds for and duration of their detention, and their allocation within the Center.

The team also reviewed documentation relating to maintenance work, safety and security measures, food services, and healthcare services.

D. Direct Inspection

The direct inspection was conducted in accordance with a structured inspection plan that included the allocation of responsibilities among PDRC members and the identification of all principles, standards, and indicators to be assessed.

The inspection included an assessment of the physical condition of the Center, its facilities, and the interaction between staff members and young detainees, as well as the interaction of young detainees with staff.

All observations were recorded immediately during the inspection, carefully considered, and verified. These observations fell into two categories:

- (a)** Observations identified by the team through direct inspection.
- (b)** Observations based on statements provided by detainees, and members of the Center's staff.

In both cases, PDRC team verified these observations, where necessary, through follow-up meetings with the Center's administration and the detainees concerned.

Section Two: Basic Information and Statistics

I. Description of the Center and Its Administrative System

In 2015, a building within the Dry Dock Men's Detention Center was designated to accommodate young inmates in the 15–18 and 18–21 age groups, as well as young detainees aged between 15–18. This measure formed part of the policy pursued by the Kingdom of Bahrain, represented by the Ministry of Interior, to strengthen respect for human rights in reformation and rehabilitation centers and detention centers. It was intended to separate younger age groups from older inmates and to provide arrangements responsive to their differing needs.

The Ombudsman had made a recommendation to this effect in its report on its first visit to Jau Reformation and Rehabilitation Center in September 2013. The Ministry of Interior announced at the time that it had accepted and implemented the recommendation.

The team observed the following:

- The visit included an inspection of Building (17), which is designated for young people. At the time of the visit, 42 people (inmates and detainees) were accommodated in the building.
- The building consists of two floors. The ground floor accommodates detainees aged 15–18 years, while the first floor is designated for inmates aged 18–21 years.
- The building has a total designated capacity of 196 people.
- The building comprises a reception office, television room, library, communications room, dining hall, service area, prayer room, laundry area, clinic, and outdoor exercise yard.
- A healthcare clinic located in a separate building provides medical services to inmates and detainees.

Admission Procedures at the Center: The Center's administration stated that admission procedures include the following:

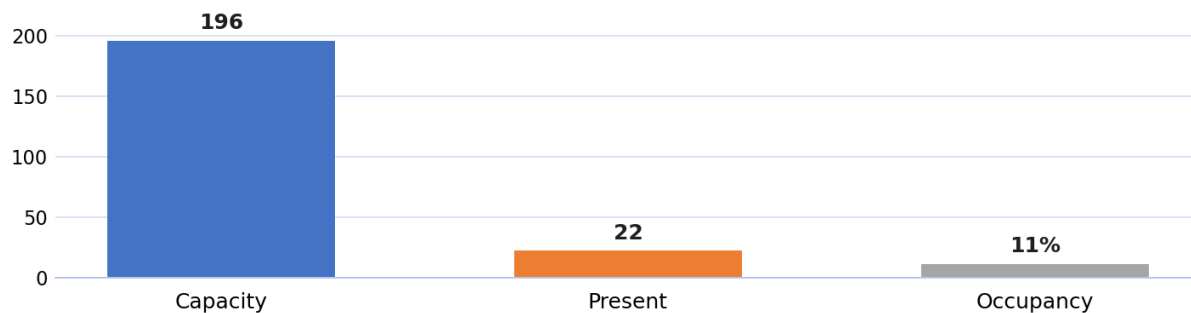
1. Before admission, each detainee undergoes a medical examination at the Public Security Clinic.
2. Provision of Personal Items: Each detainee is provided with a blanket, pillow, and one official uniform.
3. Classification and Allocation: Detainees are transferred and allocated within the building according to the applicable classification.
4. Detainees are permitted to purchase clothing from the Center's store.
5. Each detainee is permitted to contact his family by telephone.
6. Continuation of Education: Where a detainee is admitted at the beginning of the academic year, he is asked whether he wishes to continue his education. If he agrees, he is enrolled in the home-study system.
7. Outdoor Exercise: Detainees are provided with two hours of outdoor exercise in the morning and two hours in the evening.

II. Main Statistics (recorded on the date of the visit, 15 January 2025)

This section sets out the figures and statistics relating to the young persons' building at the Dry Dock Center, including only the actual number of detainees present, the occupancy rate, their distribution by nationality and age group, and the number of staff working at the Center, **as shown in the following tables:**

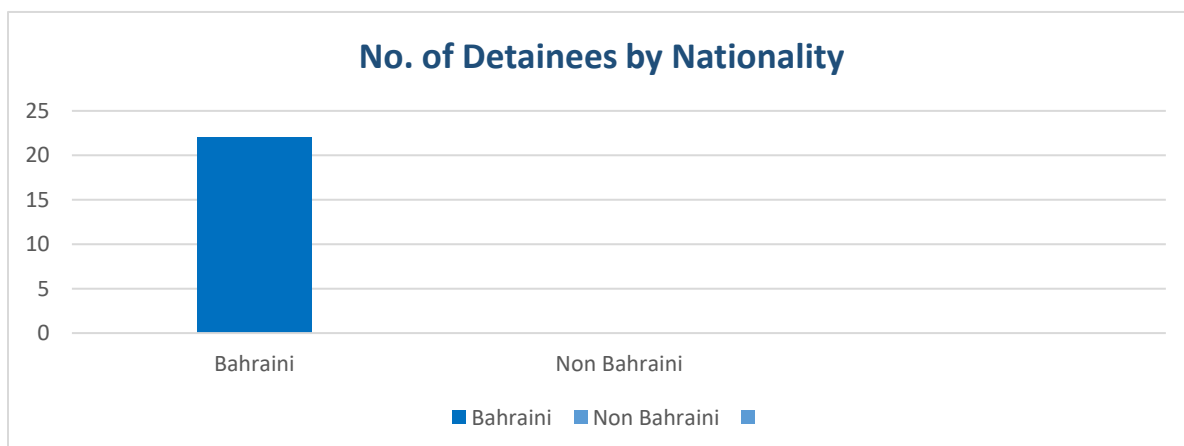
Capacity	Actual Number Present	Occupancy Rate
196	22	Approximately 11%

Capacity, Actual Number Present and Occupancy Rate

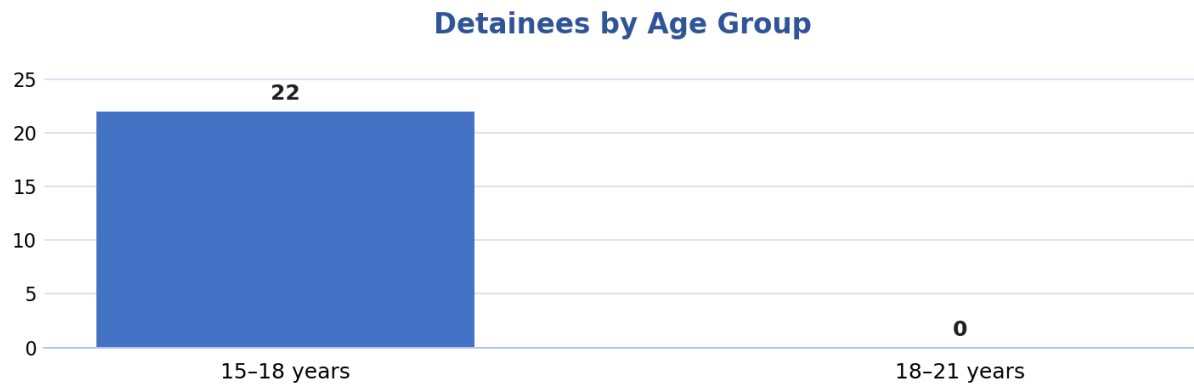


Detainees by Nationality	
Bahraini	Non-Bahraini
22	0

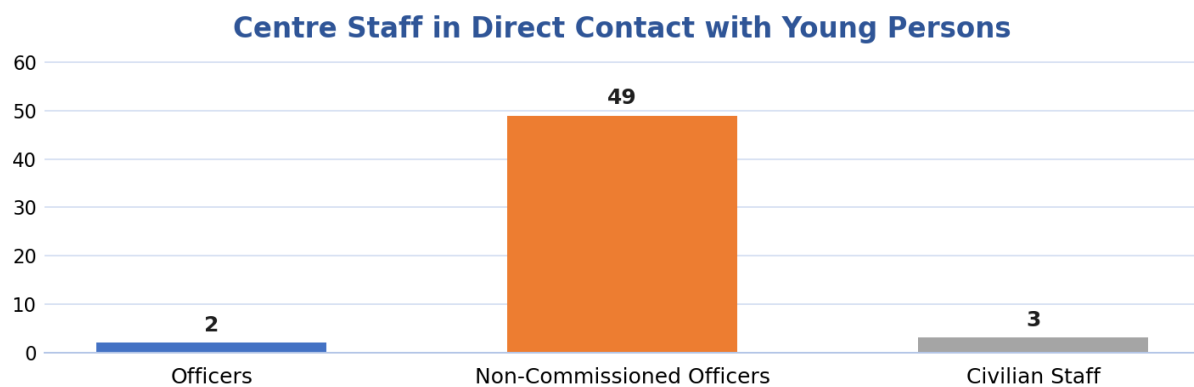
No. of Detainees by Nationality



Detainees by Age Group	
18–21 years	15–18 years
0	22



Center Staff in Direct Contact with Young Persons (*)		
Civilian Staff	Non-Commissioned Officers	Officers
3	49	2



(*) The figures include only staff members who deal directly with young persons and exclude personnel assigned to guarding and other support services.

Section Three: Humane Treatment and Assessment of Conditions at the Center

The PDRC team found that detainees were treated by Center staff with due respect for their dignity and that their placement was carried out in accordance with the approved regulations. It also found no discrimination on the grounds of race, colour, language, religion, or any other prohibited ground. Religious observance was respected, and detainees were able to meet periodically with preachers or other religious representatives. They were permitted to perform individual and congregational prayers and religious rites in accordance with the applicable legal and administrative rules and instructions. During the visit, the team observed copies of the Holy Qur'an and other religious books in the possession of some detainees.

With regard to the interaction between staff and detainees, some detainees stated that staff members treated them well. However, there is no social worker at the Center to meet with detainees immediately upon admission in order to build confidence, provide support, and assist them in addressing social and psychological issues. In addition, there is no mechanism in place to assess the extent to which detainees feel safe in the various buildings, facilities, and areas of the Center.

On the other hand, there is a mechanism for receiving, safeguarding, and returning the personal belongings of each detainee upon release or transfer to the Jau Reformation and Rehabilitation Center. With respect to the number of detainees and its compatibility with the Center's capacity, it was found that there was no overall overcrowding, as the occupancy rate on the day of the visit was approximately 11%. However, some rooms accommodated between seven and eight detainees per room, which was not proportionate to the size of those rooms and resulted in a degree of localised overcrowding. This was despite the existence of other rooms that were completely vacant and could have accommodated some of the detainees. The Commission's team also found that there were no detainees with disabilities present at the Center at the time of the visit.

With regard to the classification of detainees, it was found that they are not separated according to the type of offence with which they are charged. The administration justified this practice on the grounds that their stay at the Center is temporary. Instead, detainees are accommodated in the same rooms and dormitories according to similar age groups. The team also observed the presence of one detainee suffering from a chronic heart condition.

With regard to safety indicators and risk management, the Commission's team observed that the Center's staff demonstrate awareness and understanding of the particular needs of detainees, including their mental and physical health conditions. It was also found that the approved procedures ensure the safety and security of detainees, visitors, and staff members. However, there are no regular and continuous plans for risk assessment, risk management, and periodic monitoring. Conversely, measures designed to protect detainees from acts of self-harm are reviewed and updated as necessary.

In the same context, safety equipment and personal protective gear are available to staff members in situations requiring the use of lawful force. The Center's administration confirmed that the use of lawful force, in its various levels and graduated forms, in circumstances requiring such action, is carried out in accordance with the law and applicable regulations. Some staff members, though not all, receive theoretical and practical training on the use of force when necessary to avert risks. Medical examinations are conducted on detainees and staff members following any use of lawful force in order to verify the absence of injuries or health risks that may affect their safety. The use of lawful force is documented in the detainee's personal record whenever the detainee is involved in, or subject to, an incident that necessitates the use of force. Likewise, restraints are applied to detainees based on a risk assessment rather than on an arbitrary basis. The detainee's health condition is taken into consideration before restraints are applied, and restraints are used in a manner that does not pose a risk to life or safety. Restraint devices are neither degrading nor unnecessarily painful, and they are removed immediately once the risk has ceased. In all cases, metal restraints are not used for a period exceeding seven

days. Furthermore, staff members who are in direct contact with detainees do not carry firearms. No firearm is issued to any staff member unless he has received appropriate training in its use. The use of firearms requires authorisation from the Minister or a duly authorised delegate. In general, the Center maintains a register documenting all instances of the use of lawful force.

With regard to CCTV coverage, the PDRC team found that Building No. (17), which was the subject of the visit, was covered by surveillance cameras, although coverage was not comprehensive. Cameras were installed in the corridors and rooms and recorded video only, without audio. Certain administrative offices and the hall used for meetings and visits were not covered. Smoke detectors were installed in the dormitories and rooms, and three types of fire extinguisher were available in the Center's reception area. However, there were no call devices or alarm bells within detainees' reach for summoning staff in an emergency; detainees instead called staff verbally when assistance was required. Each dormitory had an emergency exit, but the exits were locked at the time of the visit. Staff explained that the keys were held by a designated officer and that the exits were not kept open at all times. Some detainees stated that they had not been trained in evacuation procedures or in how to respond in the event of a fire.

In examining compliance with safety requirements, it was found that the rooms were free from items that could be used for self-harm, and that the flooring throughout the facility was level and suitable. However, there are no accommodations or facilities designed to house detainees with disabilities or facilitate their movement within the Center. A first-aid kit was observed mounted on the wall in the building's reception area. The maintenance officer stated that periodic maintenance is carried out on all safety and security equipment and systems.

The PDRC team also inspected the condition of the facility. Building No. (17) consists of two floors, with one dormitory on each floor. Each dormitory contains twelve (12) rooms, and each room has eight (8) metal bunk beds. Detainees aged 15–18 are accommodated on the ground floor. The team found that cleanliness in the dormitories, corridors, rooms,

and toilet facilities was unsatisfactory. Detainees clean the facility themselves using cleaning and disinfecting materials provided by the Center's administration, and each room is supplied with a black waste-disposal bag.

Detainees wash their own clothing and bedding in the sanitary facilities, as the electric washing machine was out of service at the time of the visit. The team observed that only one washing machine was available on each floor. Detainees purchase laundry detergent from the Center's store, although the administration provides detergent to those who are unable to afford it. The team also observed that detainees dry their clothes inside their rooms. The Commission's team concluded that the design of the building and its rooms does not adequately take into account the physical and psychological comfort of detainees. The Center lacks adequate lighting, and illumination levels were found to be poor. Each room contains only a small window that allows a very limited amount of natural sunlight to enter during the day. During the evening, several light fixtures in certain rooms and toilet facilities were found to be non-functional. In addition, natural ventilation within the building was found to be inadequate. Detainees stated that room temperatures were unsuitable and excessively cold due to the centralised air-conditioning system. Some rooms were also observed to have windows without glass panes, allowing outdoor air to enter continuously and resulting in fluctuations in room temperature. The smell of cigarette smoke was also detected in a number of rooms.

The visiting team observed that each room contains an internal toilet facility consisting of a washbasin, a shower, and a floor-level toilet. Upon inspection, it was found that hot water was not available, some water taps were broken and leaking, flushing systems were damaged, and certain light fixtures were not functioning. More generally, the Commission's team found that there was an absence of regular maintenance procedures, particularly with respect to damaged equipment such as water coolers, washing machines, water taps, and water heaters in the toilet facilities. In response to these observations, the Center's maintenance officer stated that the water leakage and damage to taps in the

bathrooms and water coolers were caused deliberately by certain detainees. According to the maintenance officer, some detainees had vandalised toilet facilities and broken water taps. He further stated that some detainees had previously damaged recreational equipment, including a board game and a PlayStation console. The maintenance officer added that a request had been submitted for the provision of communal washing machines and that approval was still pending. He also noted that the drinking water tanks had been replaced three months earlier and that water filters are replaced on a weekly basis.

Upon admission to the Center, each detainee is issued a mattress, pillow, bedsheet, and one uniform as part of his personal inventory. During the inspection of detainees' rooms, it was found that some rooms contained television sets, while others did not. This differed from the rooms designated for inmates, where a television set was found in every room. In addition, a refrigerator for food storage is available on each floor.

The Commission's team also inspected the outdoor yard and found that it is monitored by security surveillance cameras. The yard does not contain unsafe items or objects that could pose a risk to detainees. A football field and a volleyball net are available within the yard. With regard to the indicators relating to the care of detainees, the Commission's team found that the daily program at the Center begins at 6:30 a.m., with breakfast being distributed to detainees at the start of the day. The morning recreational program then begins at 11:00 a.m. and is conducted in two separate sessions. The afternoon program operates from 2:00 p.m. until 5:00 p.m., also in two separate sessions. Some detainees stated that there is no structured recreational program at the Center and that they are merely allowed access to the outdoor yard in the morning and evening, in two periods totalling approximately two hours each. According to them, most of the activities available consist of individual exercises, and no equipment is provided to facilitate a variety of recreational activities in the yard. However, they are occasionally permitted to watch television. With regard to the food provided to detainees, they stated that breakfast is scheduled to be distributed at 7:00 a.m., although it is sometimes delivered later than that.

They further indicated that most meals are served cold and that the quality of the food is unsatisfactory. Some expressed a desire for greater variety in the meals provided. They also stated that special dietary meals are available upon request. On the other hand, the visiting team found that the meals provided contain a reasonable variety of nutritional value and that the overall quality of the food was satisfactory. With respect to drinking water, water coolers are available in each dormitory, although some require maintenance. Detainees are permitted to fill their water bottles for drinking purposes until 10:00 p.m. In a related observation, the Commission's team found that a number of detainees had commenced a hunger strike on 12 January 2025 in protest against the conduct of court proceedings through video-link technology. The hunger strike ended on 14 January 2025. When the Center's administration was asked about the procedures followed in such situations, it stated that the reasons for the hunger strike are first identified and efforts are made to address them as far as possible. If a detainee refuses to end the hunger strike despite receiving advice, guidance, and assistance, he is examined by the clinic doctor every two hours and continues to be permitted to make purchases from the store. If the hunger strike continues for more than twenty-four hours, the Public Prosecution is notified through an official report submitted by the Center.

The Commission's team also inspected the Center's store and found that all products are supplied through the Public Security Market, with pricing determined by that authority. A variety of products and essential items were available, including clothing, hygiene products, food, and beverages. The team observed that prices varied across products. The purchasing process involves bringing three detainees at a time to the store under police escort, with purchases being made through a payment card system. It was also found that certain products available to inmates are not permitted to be sold to detainees, including coffee, tea, cigarette packs, and milk. Some detainees stated that they are not permitted to receive clothing from outside the Center and are instead allowed to visit the store only once per week to purchase clothing and other necessities. However, they considered the prices of clothing sold in the store to be excessively high.

They also expressed dissatisfaction with the limited variety of clothing and other products available, which discourages many detainees from making purchases. As a result, some detainees stated that they are compelled to wear used clothing that had previously belonged to other detainees who had since been released.

With regard to visitation arrangements for detainees, the Commission's team found that detainees are only permitted to conduct video calls, without restrictions on the individuals with whom they wish to communicate. However, they are not permitted to receive in-person visits, due to the destruction of the visits building by fire and the absence of an alternative facility for receiving family members of detainees. The situation differs for inmates, who are permitted to receive visits in a small multi-purpose hall used for dining, lectures, examinations, and recreational programs. However, the hall is limited in size, incapable of accommodating large numbers of visitors, and is not equipped with security surveillance cameras. According to the Center's administration, this arrangement is temporary. Upon follow-up by the Commission regarding the reopening of the visits facility, it was confirmed that the shared visits building serving both the Pre-Trial Detention Center and the Dry Dock Young Inmates Center was officially opened on 2 February 2025. With regard to communications, it was found that a communications room is located on the first floor of the building and contains three separate telephone booths. Some detainees stated that they are allocated only forty (40) minutes of communication time per week, which they considered insufficient.

The Commission's team also reviewed the indicators relating to the escort and transfer of detainees. Some detainees stated that they are not properly informed of the destination to which they are being transferred. It was found, however, that detainees are permitted to contact their lawyers, where applicable, prior to transfer. Detainees are restrained during transport, and the transportation vehicles were found to be suitable and comfortable.

In another context, the Commission's team examined the standards relating to learning activities, skills development, and work-related programs. It was found that all detainees are permitted to request continuation of their education through the home-study system. A religious counsellor assigned to the building provides the necessary forms to those wishing to continue their studies at the beginning of each academic term. Detainees are provided with textbooks for self-study immediately upon receipt of the books from the Ministry of Education, and examination schedules are distributed once received from the Ministry. However, the Commission's team observed delays on the part of the Ministry of Education in providing textbooks and notifying young inmates of final examination dates. The visiting team further found that many detainees refrain from continuing their education for several reasons, including the challenges associated with self-study, the unavailability of their preferred field of study—namely the industrial education track—due to the inability to provide the required laboratories and equipment within the Center, and a reluctance to study through the home-study system because it may hinder their return to regular classroom education following release. The team also observed the absence of classrooms or suitable study facilities, a lack of stationery and educational supplies to support revision and study, and a library that was entirely devoid of books and educational materials. Young inmates are not permitted to bring books from outside the Center.

In response to these observations, Center officials stated that thirty-three (33) computers are currently being prepared for activation and that classrooms are expected to be equipped during the next phase. However, the Commission's team observed that the room designated for revision and examinations can accommodate only fifteen (15) persons and contains a single display screen and one whiteboard. The visiting team also found that no teachers are available during examination revision periods.

With regard to recreational activities and skills development opportunities, the Commission's team found that the Center does not provide meaningful opportunities for young inmates to develop their skills, largely due to the physical limitations of the facility. The team observed that electronic gaming equipment and television sets had been

damaged. Detainees stated that the available recreational facilities are inadequate. Although two halls containing display screens exist, they were not operational at the time of the visit. The library was found to be completely empty of books, educational resources, and recreational materials. In addition, the outdoor area was found to be unsuitable for meaningful recreational activities. The facility also lacked noticeboards, visual displays, or informational materials relating to available activities and programs.

Section Four: Rights and Guarantees

With regard to the standard relating to the legality of placement, the Commission's team found that judicial decisions and orders authorizing detention, whether issued by the Public Prosecution or the competent judge, are maintained through a dedicated system and register at the Center. Random samples of such records were reviewed during the visit. The personal record of each detainee is also reviewed periodically. These records indicate the period already served, the remaining period of detention, and the dates for preparing half-term reports in accordance with the provisions of the Restorative Justice Law. However, no written guide or handbook is available to provide detainees with sufficient information regarding the Center's regulations and procedures. Such information is conveyed verbally only, either by a police officer who is neither specialized nor specifically trained for this purpose, or through a selected detainee known as the "Beis," who is likewise neither sufficiently informed nor adequately qualified to perform this role. Furthermore, there are no written rules setting out the rights and obligations of detainees or the rules governing their treatment, whether in Arabic or in foreign languages. The walls of the building were also devoid of any informational or guidance notices relating to these matters. In addition, there is no mechanism enabling detainees to review documents relating to their legal cases, nor are they provided with copies of such documents, even when specifically requested.

With regard to legal rights, detainees are permitted to obtain legal representation and consult with a lawyer. However, such consultations do not take place in complete privacy, as the presence of a nearby police officer is required. Upon admission to the Center, detainees are permitted to contact their families by telephone to inform them of their whereabouts through a three-minute phone call. Foreign detainees are also allowed to contact their embassies or family members through video calls. Detainees are informed of the dates of investigation sessions and court hearings, and arrangements are made to escort them to such proceedings. They are also notified of judicial decisions and

judgments and are provided with objection and appeal forms, which are submitted to the competent court within the legally prescribed time limits.

With regard to disciplinary sanctions, the Commission's team found that more than one disciplinary sanction may be imposed on a detainee for certain violations, including deprivation of outdoor recreation periods and deprivation of communication privileges. The violation is first referred to the responsible officer, who examines the matter and determines the appropriate sanction. Thereafter, the violation and the proposed sanction are referred to the Center's legal researcher, who reviews both the violation and the corresponding disciplinary measure before implementation, in order to verify the proportionality of the sanction. In some cases, disputes and disciplinary violations are resolved amicably; however, there is no clear mechanism governing such settlements. The visiting team did not observe any instruments used to restrict liberty as a disciplinary measure. Restrictions on family communications are imposed only for a specified period not exceeding seven days. Solitary confinement is not imposed on detainees who suffer from health or psychological conditions where such a measure may pose a risk to their well-being. In such cases, alternative sanctions are applied, including deprivation of family communications, outdoor recreation periods, or recreational facilities, each for a specified period of time. The Center also adopts measures aimed at mitigating the impact of isolation by relying, in certain cases, on alternative disciplinary measures rather than solitary confinement, such as temporary deprivation of recreational activities, outdoor recreation periods, and family communications.

With regard to consideration of the social circumstances of detainees, they may be permitted to attend funeral condolences upon the death of a relative, subject to the submission of a request to the Center's Director and the provision of the necessary undertaking by both the detainee and the person responsible for receiving him.

The Commission's team also examined the standard relating to the provision of assistance to detainees who experience communication difficulties. It was found that no detainees

present at the time of the visit required special assistance, with the exception of one detainee who suffered from hearing impairment and for whom the Center's administration had arranged a hearing aid. In general, the Center's procedures provide for assistive devices to be made available to any detainee who requires and requests them.

However, at the collective facilities level, there are no call devices or alarm systems enabling young inmates with mobility impairments or communication difficulties to easily summon staff members. With regard to interpretation services for foreign detainees, no professional interpreters or interpretation services are available. Instead, interpretation relies on police officers who happen to speak the language of the foreign detainee concerned. This may affect the accuracy and quality of communication and may not always be sufficient to effectively convey information or requests to and from foreign detainees. Lawyers are permitted to bring interpreters with them if they deem it necessary. Finally, no information materials are available in Braille for visually impaired detainees.

With respect to complaints, the visiting team found that detainees are encouraged to resolve issues informally before submitting formal complaints. This is typically done through a selected detainee known as the "Beis," in cooperation with staff members where necessary. Where formal complaints are submitted, pre-prepared complaint and request forms are available through the Center's administration. However, interviews with a random sample of detainees revealed that many were unaware of the existence of these forms. Those interviewed also stated that they felt unable to ask questions or seek assistance in drafting complaints and that they do not receive copies of the complaints they submit. In practice, complaints and requests are communicated through the detainee designated as the "Beis," who conveys them verbally to the duty police officer. The officer records the complaint and submits it to the responsible officer. The team also found that detainees were generally unaware of the disciplinary sanctions applicable within the Center. Health-related complaints are submitted verbally to a staff member, who then

communicates them to the clinic for the necessary action. Complaints investigations are conducted by a responsible officer, and the resulting decisions are reviewed by the legal researcher. However, there are no clear standards demonstrating the qualifications or level of training required to conduct such investigations. Complaints against staff members are accepted, and staff who are the subject of complaints are prevented from interfering in the investigation process. Nevertheless, no examples of such cases were provided during the visit. Moreover, no specific mechanism exists to protect complainants from retaliation, ill-treatment by staff, or pressure from other detainees.

Although officers stated that complaints are handled promptly, no documentary evidence was provided to demonstrate these procedures, whether complaints were resolved immediately or through the provision of detailed explanations concerning future action to be taken. There is also no mechanism for classifying complaints according to urgency or priority. Furthermore, no evidence was found indicating that detainees may submit requests or complaints directly and confidentially to the Center's senior management, judicial authorities, or any other legally competent authority without first passing through a responsible officer, who ultimately determines whether the complaint will proceed. However, detainees are afforded an opportunity to submit complaints directly to the Prison Inspector during inspection visits and to communicate with him freely and confidentially. In all cases, there was no indication that complainants are subjected to pressure intended to compel them to withdraw their complaints.

The Commission's team found no mechanism for deciding complaints and issuing decisions within specified timeframes. Nor was there a mechanism for informing complainants of the outcome of complaint examinations, obtaining acknowledgement of receipt of such outcomes, or informing them of their right to appeal decisions within prescribed deadlines. No examples were provided demonstrating how detainees may communicate with the Ombudsman or other relevant oversight bodies. There are no complaint boxes belonging to the Ombudsman or any other independent redress institutions. Indeed, there

are no complaint boxes dedicated exclusively to complaints within the building. While other boxes may be used for submitting complaints, they are not suitable for that purpose. The Center's administration stated that these boxes are opened on a weekly basis and that complaints generally relate to maintenance issues, healthcare services, and food-related concerns. The administration further stated that it periodically informs judicial authorities and independent oversight bodies of any allegations involving torture, ill-treatment, cruel punishment, inhuman treatment, or degrading treatment, and that such allegations are treated as a priority under the law. However, the Commission's team found no clear mechanism governing this process. Instead, allegations of torture or ill-treatment are communicated to the families of inmates or detainees, who then contact the competent redress authorities themselves. Some inmates interviewed by the Commission's team stated that they were unaware of the available complaints and grievance mechanisms and that complaints previously submitted to the Center's administration had not been followed by notification of the measures taken or the outcomes reached.

Finally, the Commission's team reviewed a number of additional procedural indicators relating to the complaints system and found that there were no clear posters or awareness materials, whether in Arabic or foreign languages, explaining how complaints may be submitted and how they are processed and examined. Likewise, there is no clear and documented mechanism for evaluating and monitoring the handling of complaints, analyzing complaint-related data, categorizing complaints by type, or recording the actions taken in response to them. No complaints register was available documenting complaint categories, violations identified through complaint investigations, or the disciplinary measures resulting therefrom. Some detainees also stated that they are not provided with the necessary materials for submitting complaints, such as paper and pens.

Section Five: Healthcare

General Information

The healthcare services provided to detainees at the Center include access to a general practitioner, psychiatrist, dentist, and pharmacy services.

Clinics :Building No. (16) contains a treatment room designated for minor medical cases. This is a small room intended for the provision of basic medical care, including wound dressing, the dispensing of medication, and the administration of nutritional intravenous fluids.

- Clinic No. (1) serves both the Young Inmates Center and the Pre-Trial Detention buildings. The clinic includes a reception area, patient waiting room, front offices for patient registration, an examination room, a physician's office, a treatment room containing five beds, a dental clinic, and a pharmacy.

Healthcare Services

The Commission's team found that the clinic building is old and in need of upgrading. The road leading to the clinic is unpaved and not adapted for people with disabilities, which may hinder the transportation of emergency cases by wheelchair. Young inmates undergo a medical examination immediately upon admission to the Center. However, periodic routine medical examinations are not conducted on a regular basis, as medical assessments are generally limited to cases in which young inmates submit complaints or exhibit symptoms of illness. At the same time, particular attention is given to detainees who require specialized healthcare or who suffer from medical conditions that may affect their rehabilitation programs. In general, detainees receive the same level of healthcare services available to members of the community free of charge and without discrimination based on their legal status. Responsibility for providing medical treatment rests with the Directorate of Government Hospitals and the Directorate of Health and Social Affairs of the Ministry of Interior.

Medical examinations are conducted confidentially, and treatment rooms provide an appropriate level of privacy and dignity. The visiting team was informed that all medical

equipment available in the clinic, including resuscitation equipment, is operational and undergoes regular inspection and maintenance. Infection prevention and control procedures are also in place within the clinic facilities and among young inmates, with the aim of safeguarding their health and ensuring food safety. However, there is no dedicated isolation area within the clinic for infectious diseases. Such cases are transferred to healthcare facilities outside the Center. Coordination exists between the Center's administration and the relevant medical authorities in the Kingdom to ensure the continuation of treatment for young inmates suffering from serious, infectious, or chronic illnesses.

The Commission's team further found that healthcare personnel possess an understanding of the circumstances and diverse needs of detainees. Medical records are maintained in both electronic and hard-copy formats, with due regard for confidentiality and professional privacy requirements.

Care of Sick Young Persons

The Commission's team found that young inmates are able to access healthcare services and meet with medical personnel. However, some young inmates reported delays in attending clinic appointments due to the limited number of healthcare staff relative to the volume of requests submitted. All interactions between young inmates and healthcare professionals are documented. A medical file is maintained for each juvenile, containing health assessments and care plans prepared in accordance with applicable professional and medical standards. Daily movement records and records relating to chronic illnesses are also reviewed. Where necessary, young persons are transferred to public hospitals outside the Center or, in certain emergency cases, to private hospitals. Some young inmates stated that the time required to complete transfer procedures generally depends on the nature of the medical condition and the urgency of the required intervention. Young inmates who are ill may also be isolated when deemed medically necessary upon the instructions of the attending physician.

Provision of Prescribed Treatment

The Center's clinic maintains an adequate supply of essential medicines required for common medical conditions. Medications are prescribed according to the patient's health condition and presenting symptoms.

A mechanism exists to ensure that prescribed medication is dispensed at the designated times. However, some young inmates stated that the duty nurse occasionally hands medication to the dormitory representative (the "Beis"), who subsequently distributes the medication to young inmate patients. Young inmates who are medically diagnosed as requiring treatment for withdrawal symptoms resulting from drug or alcohol dependency are provided with the necessary medication. All medications are stored in the pharmacy in accordance with established procedures, and unused medications are disposed of safely. Nevertheless, some young inmates reported that certain prescribed medicines and treatments are not always available in the Center's pharmacy and must be obtained from the Ministry of Interior Clinic at the Fort. This may occasionally result in delays in patients receiving the prescribed treatment.

Mental Health

The Commission's team found that the clinic's medical staff possess a degree of awareness and understanding of mental health issues. Young inmates experiencing psychological difficulties are able to access the healthcare services available within the Center or may be referred to specialized external providers where necessary. The cases of young inmates suffering from mental disorders or life-threatening illnesses are reviewed regularly. Young inmates diagnosed with mental disorders are referred to the competent judicial authorities for consideration of placement in an appropriate therapeutic institution until their condition improves.

On the other hand, although arrangements are in place for referring cases requiring specialized psychiatric treatment, the Center's administration sometimes encounters difficulties in securing prompt transfers to the Psychiatric Hospital due to the limited

availability of beds. The Commission's team also found that there is an insufficient number of social workers and psychologists to monitor and supervise young inmates in a manner that contributes to behavioural reform and rehabilitation. With regard to addiction recovery programs, it was found that young inmates experiencing substance dependency do not receive comprehensive rehabilitation and support programs. At present, treatment is largely limited to the provision of medication, without the support of specialized and ongoing rehabilitation programs.

Section Six: Recommendations

1. Prepare a comprehensive handbook containing the laws and regulations governing the Reform and Rehabilitation Institution, as well as the rules regulating the daily life of detainees at the Center and explaining their rights and obligations. A copy should be provided to each detainee upon admission to the Center in a language that he understands.
2. Provide social workers and psychologists to monitor detainees, support them, and assist in their adjustment, particularly during the initial days following admission to the Center.
3. Coordinate with the Ministry of Education to provide educational services to young inmates and detainees in accordance with the Ministry's applicable regulations and establish a clear mechanism to ensure the enrolment of those wishing to continue their education. This should include the timely provision of textbooks, notification of detainees and their families of examination schedules and results, allowing detainees to receive supplementary study materials from their families after appropriate inspection, and inviting universities to present information regarding higher education opportunities, admission requirements, and procedures to detainees wishing to pursue university studies at their own expense.
4. Install CCTV cameras throughout the entire facility, including administrative offices, halls, dormitories, corridors, cells, areas outside sanitary facilities, and outdoor yards, ensuring continuous coverage of the movements of inmates and detainees. The operation, recording, and monitoring of these systems should be maintained on a twenty-four-hour basis.
5. Undertake urgent maintenance of facilities and equipment requiring repair, including certain toilet facilities, water coolers, and washing machines. Attention should also be given to public health requirements and cleanliness standards, as well as the refurbishment of prayer areas and the entertainment (television) room. Air-conditioning systems should be upgraded, temperatures maintained at levels appropriate for ordinary

living conditions, and improved natural ventilation provided. In addition, the Center and its facilities should be adapted to accommodate detainees with disabilities and provide the necessary arrangements to facilitate their daily lives.

6. Conduct regular training courses for staff members on risk management and provide periodic practical training for detainees on emergency evacuation procedures and appropriate responses to incidents such as fires.
7. Diversify the products available in the Center's store, increase the range of goods offered at varying quality levels, and ensure that prices are reasonable and responsive to the needs of detainees. A clear mechanism should also be established to regulate the receipt of additional clothing from outside the Center and the replacement of old clothing with new items provided by family members.
8. Expand educational, recreational, cultural, and sports programs by establishing a public library within the Young Inmates Center, creating indoor facilities for sports and cultural activities and television viewing, and increasing access to outdoor recreation periods as an incentive for good behaviour.
9. Develop the complaints mechanism by establishing an electronic complaints management system and ensuring that detainees are informed of all stages of the process. An effective monitoring mechanism should also be established to analyse complaint data, identify trends, causes, and patterns, and improve institutional practices accordingly. In addition, complaint boxes should be provided for independent oversight bodies such as the Ombudsman and the National Institution for Human Rights.
10. Establish a joint mechanism between the Center's medical clinic and the Psychiatric Hospital to ensure the prompt transfer of detainees suffering from mental health conditions requiring specialized treatment, together with regular follow-up of their progress.
11. Organize specialized training programs for Center staff on child psychology and the appropriate management of different cases.

12. Strengthen the role of public hospitals in providing healthcare services to young inmates and implement an annual comprehensive medical examination program for all young inmates, together with ongoing therapeutic, rehabilitation, and social support programs.
13. Construct a new clinic building within the Center and increase both the number and diversity of medical specializations available, in accordance with applicable standards and with due consideration to lighting and ventilation requirements.
14. Improve the medication distribution process by ensuring that prescribed medicines are dispensed directly by the duty nurse and verifying that young inmates take their medication at the time of distribution in order to prevent accumulation and misuse of medicines.

Section Seven: Annexes

Annex (1): References

- Constitution of the Kingdom of Bahrain.
- National Action Charter.
- Penal Code and its amendments.
- Code of Criminal Procedure and its amendments.
- Public Security Forces Law and its amendments.
- Reform and Rehabilitation Institution Law and its Implementing Regulations.
- Law No. (4) of 2021 on Restorative Justice for Children and Protection from Ill-Treatment.
- Law No. (18) of 2017 on Alternative Sanctions and Measures, and its amendments.
- Decree No. (61) Establishing the Prisoners and Detainees Rights Commission and Defining its Mandate.
- Universal Declaration of Human Rights.
- International Covenant on Civil and Political Rights.
- Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, taking into account the principles of the Optional Protocol thereto.
- International Convention on the Elimination of All Forms of Racial Discrimination.
- Convention on the Elimination of All Forms of Discrimination against Women.
- United Nations Convention on the Rights of the Child.
- Convention on the Rights of Persons with Disabilities.
- Charter of the United Nations.
- Arab Charter on Human Rights.
- United Nations Standard Minimum Rules for the Treatment of Prisoners (1955) (Geneva Rules).
- Principles and Standards of the Ombudsman for Visits to Prisons and Pre-Trial Detention Facilities.
- Standards of His Majesty's Inspectorate of Prisons in the United Kingdom.
- United Nations Standard Minimum Rules for the Administration of Juvenile Justice (Beijing Rules).
- United Nations Guidelines for the Prevention of Juvenile Delinquency (Riyadh Guidelines).

Annex (2): Principles and Standards

Principle One: Humane Treatment and Assessment of Conditions at the Center

This principle includes the following standards:

- Respect.
- Safety.
- Condition of the Facility.
- Care of Inmates.
- Provision of Adequate Food and Drink.
- Other Needs (Outdoor Exercise, Access to Reading Materials, and the Ability to Receive Visits and Make Communications).
- Escort and Transfer of Inmates.
- Rehabilitation.

Principle Two: Rights and Guarantees

This principle includes the following standards:

- Legality of Placement.
- Provision of Assistance to Inmates with Communication Difficulties.
- Complaints.

Principle Three: Healthcare

This principle includes the following standards:

- Healthcare Services.
- Care of Sick Inmates.
- Provision of Prescribed Treatment to Sick Inmates.
- Mental Health.

Annex (3): Response of the Dry Dock Young Inmates Center

Following the unannounced inspection visit conducted by the Prisoners and Detainees Rights Commission (PDRC) to the Young Inmates' Reformation and Rehabilitation Centre on 15 January 2025, and with reference to the letter of the Chairperson of the PDRC dated 1 July 2025, the Ministry of Interior submitted the following response to the observations and recommendations contained in the Commission's report.

- 1) Prepare a comprehensive handbook setting out the laws and regulations governing the Reform and Rehabilitation Institution, including the rules regulating the daily life of young detainees at the Centre and clearly explaining their rights and responsibilities. A copy should be provided to each detainee upon admission in a language that he understands.

Response

Each detainee is provided, upon admission, with a document setting out the principal rights and responsibilities established under the applicable laws and regulations. The contents of the document are explained to the detainee and presented in a language that he understands to ensure that he fully comprehends its provisions. The detainee signs the document to acknowledge that he has read and understood its contents, and a signed copy is retained in his individual file for future reference.

- 2) Provide qualified social workers and psychologists to monitor the behavior of young detainees and support their adjustment, particularly during the initial period following their admission to the Centre.

Response

A request has been submitted by the Centre's administration to the competent authorities, and the necessary procedures are currently underway to provide qualified social workers and psychologists to support detainees, particularly during the initial period following their admission.

- 3) Coordinate with the Ministry of Education to ensure the provision of educational services for young inmates and young detainees by establishing a clear mechanism for registering those wishing to continue their education, providing textbooks in a timely manner, informing families of examination schedules and results, allowing detainees to receive supplementary study materials from their families following inspection, and inviting universities to introduce their academic programmes and admission requirements to detainees wishing to pursue higher education at their own expense.

Response

The Centre coordinates with the Ministry of Education to facilitate the registration of detainees wishing to continue their education. This includes arranging examination schedules, distributing textbooks, and coordinating academic timetables.

- 4) Install CCTV cameras throughout the building, including administrative offices, halls, dormitories, corridors, accommodation rooms, and the external areas adjacent to the toilets. The system should ensure continuous monitoring of detainees' movements and operate on a twenty-four-hour basis with recording and monitoring capabilities.

Response

The building is equipped with security surveillance cameras covering the principal operational areas. The system operates twenty-four hours a day, and recordings are reviewed whenever necessary. Further measures will be taken to ensure that all essential areas of the building are appropriately covered by the surveillance system.

- 5) Carry out urgent maintenance of facilities and equipment requiring repair, including certain toilets, ablution areas, drinking water coolers, and washing machines. Ensure compliance with public health and hygiene standards, refurbish the prayer area and television room, upgrade the air-conditioning system, and adapt the Centre and its facilities to accommodate young detainees with disabilities and facilitate their daily living.

Response

Although the existing buildings are relatively old, maintenance work is carried out continuously on a twenty-four-hour basis by the Centre's maintenance teams.

In addition, a maintenance contract has been concluded with a specialized company responsible for servicing the air-conditioning systems to ensure their efficient operation, and all maintenance requests are addressed promptly.

The Ministry also confirmed that a new facility dedicated to young detainees has been allocated in Isa Town. The new Centre will be equipped with modern facilities, including a swimming pool, football and basketball courts, accommodation and prayer areas, landscape gardens, classrooms, and computer facilities. Preparations for the project are currently underway, and the PDRC will be invited to visit the facility upon completion of the construction and final preparations.

- 6) Provide regular specialized training for Centre staff on risk management and conduct practical periodic exercises on emergency evacuation procedures and appropriate responses to emergency situations, such as fires.

Response

The Centre provides regular training programmes for its staff, covering first aid, interaction with the public, and other essential areas of professional practice. In addition, an emergency evacuation plan has been developed and is implemented in coordination with the Civil Defense Directorate.

- 7) Increase the variety of goods available in the Centre's store, ensure that they are offered at reasonable prices to meet the needs of young detainees, establish a clear procedure permitting detainees to receive additional clothing from outside the Centre, and allow worn clothing to be replaced with new clothing provided by their families.

Response

The range of products available in the Centre's store is regularly expanded and diversified to meet the needs of this age group, while maintaining reasonable prices. The store is continually supplied with additional items, and ongoing coordination is undertaken to introduce further products whenever required.

- 8) Expand educational, recreational, cultural, and sporting programmes by establishing a library within the Young Inmates' Reformation and Rehabilitation Centre, providing

indoor facilities for cultural and sporting activities and television viewing and increasing access to outdoor recreation as an incentive for good behavior.

Response

Implementation of this recommendation will commence upon completion of the new facility designated for young detainees in Isa Town. The new facility will include a swimming pool, sports grounds, television rooms, classrooms, and a range of facilities designed to support educational, cultural, and recreational activities.

- 9) Enhance the Centre's complaints mechanism by introducing an electronic complaints system, ensuring that young detainees are fully informed of every stage of the complaints process, establishing an effective mechanism for monitoring and analyzing complaints to identify trends and recurring issues, and providing complaints boxes for independent oversight bodies, including the Ombudsman and the National Institution for Human Rights.

Response

Complaints boxes for independent oversight bodies are available within the Centre and are administered directly by those bodies. In addition, the unified Najm reporting and case management system has been activated to enable young detainees to submit complaints and reports electronically.

- 10) Establish a coordinated mechanism between the Centre's medical clinic and the Psychiatric Hospital to ensure the prompt transfer of young detainees requiring specialist psychiatric care and the regular monitoring of their condition.

Response

The provision of medical and mental healthcare services falls within the responsibility of Government Hospitals. The Centre's role is limited to coordinating with the competent medical authorities to facilitate the provision of the necessary healthcare services.

- 11)** Enhance the role of Government Hospitals in providing healthcare services to young detainees, implement an annual medical screening program for all young detainees, and provide continuous medical, rehabilitative, and social care programmes.

Response

This recommendation falls outside the jurisdiction of the Ministry of Interior. The provision of healthcare services and the implementation of periodic medical screening programmes fall within the responsibility of the Government Hospitals, as previously indicated. The Centre's role is limited to coordinating with the competent healthcare authorities to ensure that detainees receive the necessary medical care.

- 12)** Construct a new healthcare clinic within the Centre and expand the range of medical specialties available, taking into account the applicable standards relating to lighting, ventilation, and the provision of appropriate healthcare facilities.

Response

This recommendation also falls outside the jurisdiction of the Ministry of Interior, as responsibility for healthcare services and medical specialties rests with the Government Hospitals, as previously stated.

With regard to the construction of a new healthcare clinic, the Ministry confirmed that a new facility has been allocated in Isa Town for young detainees. The new Centre will include a fully equipped healthcare clinic fitted with the necessary medical equipment and supplies. Preparations for the project are currently underway and are expected to be completed upon completion of the remaining construction works.

- 13)** Improve the procedures governing the administration of medication by ensuring that prescribed medication is dispensed by the duty nurse and that young detainees take their medication at the time of dispensing, thereby preventing the accumulation or misuse of medication.

Response

The dispensing and administration of prescribed medication fall within the responsibility of the Government Hospitals and the nursing staff. The Centre's role is limited to coordinating with the competent healthcare authorities and providing an

appropriate environment to ensure that medication reaches detainees requiring treatment.

Conclusion of the Ministry of Interior's Response

In conclusion, the Ministry of Interior reaffirms its firm commitment to protecting the rights of inmates and detainees accommodated at the Young Inmates' Reformation and Rehabilitation Centre, in a manner that ensures full respect for the rights guaranteed under the Constitution of the Kingdom of Bahrain, relevant international treaties and conventions, and national legislation.

The Ministry places the enhancement of the justice system and the strengthening of the rule of law among its highest priorities by continuously developing policies and procedures that promote the highest standards of integrity and transparency.

The Ministry is also committed to ensuring that all inmates and detainees receive comprehensive healthcare services and are able to maintain contact with their families in accordance with the applicable procedures, without discrimination on the grounds of sex, origin, language, religion, or belief, thereby reflecting the Ministry's commitment to the principles of human rights, equality, and justice.

Upon completion of the new facility for young detainees in Isa Town, the Prisoners and Detainees Rights Commission will be invited to visit the Centre and inspect its facilities, which are being developed in accordance with the latest standards and requirements to ensure that this age group enjoys all of its rights in a manner consistent with human rights principles.

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