Report No. 1

The Prisoners and Detainees Rights Commission (PDRC)

Unannounced visit to the Dry Dock Detention Centre (DDDC)

April 21-24, 2014
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Introduction:

Royal Decree 61 /2013 was issued to form the PDRC and its prerogatives. It was a landmark addition to the existing legal and social legislations in the Kingdom of Bahrain and a milestone in the commitment, respect and protection of human rights. It also consolidated the pledges stipulated in the National Action Charter and the Constitution to guaranteeing individual freedoms, avoiding detention or imprisonment in places that are not adequate or that are not provided with health or social care. In addition, it should not expose anyone to ill treatment, physical or mental torture, seduction or humiliating behavior.

This Decree is in accordance with the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, ratified by the Kingdom of Bahrain in 1998. The decree also has taken into account the principles of the Optional Protocol of the Convention. It also complements the recommendations of the Bahrain Independent Commission of Inquiry (BICI).

The establishment of the Commission is an achievement in the field of human rights in the kingdom of Bahrain. PDRC was entrusted with the inspection of prisons, detention, juvenile centers and other places where it is possible to detain individuals such as hospitals and psychiatric facilities. Royal Decree 61 /2013 enables the PDRC to inspect the detainees’ conditions and the treatment they receive to ensure they are not subjected to torture or cruel, inhuman or degrading treatment.

All PDRC members attended overseas training and observed actual inspections. The assistance of experts in the field of prison inspections was also sought to obtain experience and knowledge on the best practices of inspection procedures and to develop the necessary frameworks and guidelines to promote the rights of prisoners and detainees in Bahrain.

In accordance with Royal Decree, PDRC’s first assignment was an unannounced visit to the Dry Dock Detention Centre (DDDC). The duration of the inspection was four days including one evening visit from 21-24 April 2014. During the assignment, the commissioners inspected all buildings in the facility including wings, cells and conducted unmonitored interviews and had free interactions with the detainees in order to gather firsthand information on any issues, concerns or difficulties encountering them at DDDC.

PDRC, on this first assignment used the Bahrain Ombudsman’s Standards for Visiting Prisons and Places of Detention.
Section I

Background
1. Procedures:

**Date:** 21 – 24 April 2014  
**Venue:** Dry Dock Detention Centre (DDDC)  
**Type of visit:** Unannounced

**Legal References:**

- The Constitution of the Kingdom of Bahrain.  
- Royal Decree 61 /2013.  
- The Ombudsman’s standards for visiting prisons and places of detention.  
- The Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.

**Visiting Team:** PDRC commissioners.

**Work Mechanism:**

**A. Evidence Gathering:** Evidence is derived from the DDDC staff, through access to documents and records in all sections, and from a review of the administrative system in DDDC.

**B. Interviewing Detainees:** Detainees were interviewed using a random sample that provided information on detainees’ names, nationalities and age. Bearing in mind that detainees are not classified according to nature of their charges.

**C. Observation:** This was carried out through the observation the conditions of the facility to assess suitability and that it is well equipped to ensure its compliance with international standards.
2. General Observations:

- **Number of detainees**: 991
- **DDDC Capacity**: 1020 detainees
- **Number of detainees**: (15-18 years old) 108 out of 991

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<th>Number of Detainees</th>
<th>Capacity</th>
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<td>991</td>
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- **Pie Chart**:
  - **No. of Detainees**: 991
  - **15 - 18 years**: 108
Bahraini / Non-Bahraini detainees in custody

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<th>Bahraini</th>
<th>Non-Bahraini</th>
<th>Total</th>
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<td></td>
<td>765</td>
<td>226</td>
<td>991</td>
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- Number of officers per shift: 1
- Number of guards per shift: 22

The number is limited to those who directly deal with detainees. It does not include supporting services staff.

- Number of facilities at the center: 11

(Administration building, wings, reception, clinic, visitation hall, shop, mosque and sport fields).

PDRC inspectors observed that other new buildings were under construction. They were informed they were part of a plan by the Reform and Rehabilitation Directorate to replace the older buildings.
Section II
Assessment of Principles and Standards
Principle 1: Treatment and Conditions

Respect:
- Detainees are separated based on the age group (15 to 18 years old).
- Detention center staff are not fully aware of the diverse needs of those held in detention, including elderly, detainees and those with special needs and foreigners.
- Sufficient training programs for DDDC to develop their skills to deal with and meet the diverse needs of the detainees, particularly those in the 18-15 age group do not exist.
- There is lack of written procedures governing the process and method of searching detainees.
- There is no waiting hall for visitors.
- There is a shortage of staff at the DDDC.

Safety:
- Some staff have limited knowledge of their responsibilities in assessing and managing risk resulting from dealing with the detainees or from the way the detainees deal with one another.
- The staff do not receive a periodic adequate training on managing risks.
- Staff has knowledge about self-harm, but lack training on how to deal with such cases.
- There are no plans to assess and manage risks.
- There are surveillance cameras, but they do not cover all areas of DDDC.

Legal use of Force:
- There is a ministerial resolution on the fundamental principles of the legal use of force, but there are no written procedures for its use at DDDC.
There is no theoretical and practical training on how to use force when necessary to prevent risks and maintain order.

Medical examinations are performed on DDDC staff and detainees following the use of force to verify if there are subsequent injuries or health risks.

There is no special record for the use of force and its degrees.

Conditions of the Place:

- Some of the cells are not clean.
- Detainees can call staff in case of emergency.
- There is a clear lack of maintenance in the facilities.
- The cells are free of elements that lead to self-harm.
- There is a slow implementation of procedures to improve the conditions of the cells.
- There are difficulties to evacuate some places by the staff in case of emergency.
- Inconsistency in the appropriate temperatures of the cells is observed.
- There is inadequate natural lighting and ventilation in some places.

Care for Detainees:

- The standard of cleanliness in the cells and wings is relative, which affects the comfort of detainees.
- The basic requirements for sleeping (mattresses, pillows and blankets) are available, but there are some delays in delivery.
- There is a lack of specific and clear measures on how to change mattresses, pillows and blankets, either after a specific period of time or if they are damaged.
- Items of personal hygiene are available.
The system used in the provision of clothing from outside does not guarantee the hygiene due to the length of time to change clothes. Specific procedures do not exist.

There are no suitable lockers for every detainee to keep personal belongings.

**Sufficient Food and Drinks:**

- Detainees are offered food and drink at mealtimes.
- The amount of food is appropriate with adequate nutritional value.
- There is a suitable variety of food and drink.

**Other Needs (External Exercise, Reading Materials and the Opportunity to Have Visits and Calls):**

- Detainees have access to the sports field for external exercise for a specific period.
- Some daily newspapers are provided.
- Procedures for bringing in books are not clear.
- Visits are allowed within the provisions of the law.
- There is no special treatment regarding visits to detainees aged between 15 and 18.
- There is insufficient number of telephone booths.
- Detainees are able to contact family and lawyers.

**Escorting and Transferring Detainees:**

- Detainees are transferred in safe, clean and comfortable vehicles. However, they lack emergency requirements and they are not suitable for the transportation of detainees with special needs.
- Detainees are transferred from the center to courts or to the public prosecutor’s office as quickly as possible. However, sometimes they are kept for a long time inside the vehicles until the end of the court proceedings.
hearings of other detainees. Within the Public Prosecution building, they are kept in especially allocated rooms.

- There is willingness by DDDC to avoid making the detainees wait in vehicles for a long time.
- Detainees are allowed to carry cash only. However, detainees do not carry with them the necessary official documents and personal possessions when transferred.
- During the transfer from and to DDDC, the detainees’ are cuffeD, in some cases behind their backs, based on the seriousness of charges.
- The detainee is not notified in court or the prosecution office of the location of his detention.
- There are no rules or procedures to ensure that detainees can make phone calls to their lawyers and their families when they are transferred.

**Rehabilitation:**

- There are no plans or programs for the rehabilitation of all categories of detainees.
- Detainees have the opportunity to continue their education at various levels according to home schooling or affiliation systems.
- There are no special programs to the reintegration of the detainees.
- There is a coordination between the management of the DDDC and the concerned medical authorities in the Kingdom to complete the treatment of the patients suffering from contagious and chronic diseases.
- Detainees with addiction problems do not get the appropriate support for the continuation of treatment after their release.
- Detainees are able to communicate with the outside world within the provisions of the laws and regulations.
- There are limited attempts to assist detainees to make an evident positive change in their lifestyle, thinking and behavior.
- There are no adequate rehabilitation programs for detainees who were victims of abuse, rape, or domestic violence.
Learning, Work and Skill Activity:

- There are no plans to ensure the effective use of personal information of detainees and data for the development of objectives from the educational, skill acquisition and employment opportunity programs.
- There is no space provided for learning, work and skill activities.

Principle 2: Rights and Safeguards

Legal Procedures:

- Detainee has a personal dossier that include all the detention documents, which guarantee the legality of the custody as issued by the Public Prosecution or court.

Providing Assistance for Detainees in Communication:

- A phone booth is located in every wing to enable each detainee to use it weekly on his own expense.
- The DDDC lacks translation services.
- Information and guidance relating to the rights and duties of the detainees are available in both Arabic and English.

Legal Rights for Detainees:

- Detainees have the right to consult their lawyers. Detainees have the right to contact their lawyers within allocated weekly time via telephone.
- There is a dedicated place for meetings between detainees and lawyers. However, there is no privacy due to the presence of guards during the meetings.
Procedures allow detainees to inform their families about their detention place, sometimes such information is delayed for more than one day.

Legal rights posters are displayed on the notice board of each wing in both Arabic and English, however, copies of these posters are not distributed to the detainees.

Complaints:

- No procedure to encourage detainees to solve problems amicably before submitting a formal complaint is available.
- A procedure exists that allows detainees to submit complaints through forms and a complaint box. The forms are collected weekly. Urgent complaints are delivered to a guard who acknowledges receiving them. However, the procedures do not guarantee privacy because the complaints are submitted in unsealed envelopes and placed in the box by the guard.
- Positive responses to some complaints are acknowledged; however, no existing records indicate how they have been dealt with.
- A specially designed complaint form does not exist, so complaints are filed via ordinary request application forms.
- A follow up mechanism and outcomes of complaints, records and clear procedures for tracking their outcome does not exist. Furthermore, no classification, or procedure to monitor the complaints or analyze the data is available.
- No posters or leaflets explaining the right of detainees to submit complaints are available.
- No clear procedure to enable the detainees to communicate with the relevant authorities to submit their complaints is in existence.
- No pressure is exerted on detainees to withdraw their complaints.
- No measures are taken to protect the detainees from staff or other detainees in the event of recriminations and complaints.
- There is no procedure to submit grievances over the decisions regarding the complaints.
UNOFFICIAL TRANSLATION BY THE PRISONERS & DETAINEE RIGHTS COMMISSION

- Procedure for detainees on submitting complaints about health issues is not in practice.

**Principle 3: Healthcare**

**Healthcare Services:**

- Detainees have access to physical health care through the health center or transfer to public hospitals whenever is needed. Detainees often have timely access to some of the psychiatric and addiction treatment services. There are no dental care services and the waiting period for appointments is long. There are no other psychosocial services such as, psychologists, social workers, counselors, and occupational therapists.

- Continuous follow-up by nurses for the detainees medical conditions is in place. The patients are identified and their needs assessed. A wing has been allocated for patients with chronic diseases close to the health center which allows close monitoring. However, without follow-up from the doctors or filling out the medical screening forms of chronic diseases.

- There is a lack of both a proper management and a responsible medical and administrative supervision of medical services. There are no obvious training workshops for the staff of the DDDC on the health of detainees and ways to deal with their diseases.

- The medical examination is conducted in a private room, but there is no privacy. However, confidentiality and privacy are considered when providing treatment.

- There are procedures for infection control in the facilities of the health center and among the detainees. However, there are deficiencies in the follow-up of the implementation of these procedures, especially in detainees wings.

- Medical devices and equipment are checked regularly and the necessary measures are taken to maintain them.
Patients Care:

- Detainees face difficulties accessing health care workers and professionals.
- There is a medical record for each detainee.
- Medical information about each detainee is recorded on the day of arrival following an examination at the Qalaat Clinic and is stored electronically. The information is confidential and a health employee has the right to access only the data that concerns him and according to his medical privileges.
- Medications commonly needed by the patients are available; however, some of the medications are ordered when they are needed and they are provided only after a long time.

Detained Patients Receive Prescribed Medication:

- Procedures ensure the process of storing and disposing of medications safely if not consumed.
- The pharmacy is managed properly and safely and medications are prescribed to detainees according to their health conditions.
- Medications that help to recover from drug and alcohol addictions are provided and delivered safely and properly at specific times.

Mental Health:

- Patients are referred to psychiatric services whenever needed through the health center doctors or upon a request from the detainees. They are transferred to psychiatry hospital when required.
- The medical staff are aware and knowledgeable about mental health cases, but there are limitations in dealing with these cases, especially that there is only one psychiatric consultant with no team to assist him.
Section III

Recommendations

Special Humane Treatment and Conditions Recommendations:
• Urgent action is required to ensure the cleanliness of the wings and periodic overall maintenance.
• The number of administrative staff with expertise in dealing with detainees should be increased. Special measures for detainees aged between 15 and 18 is a necessity for visits, communication, activities and motivating them to complete their studies.
• Training for DDDC staff on dealing with elderly, those with special needs, foreigners or those aged between 15 and 18 should be in place. Staff should also be trained in managing and assessing risks.
• A suitable waiting area for visitors should be provided.
• Measures should be taken to ensure detainees can contact their families upon arrival to DDDC.
• Procedures to ensure detainees can inform their lawyers and families when they are transferred should be established. Risks should be assessed during transfer.
• Waiting areas should be provided for detainees at courts.
• Urgent action should be taken to install surveillance cameras to cover all the facilities of DDDC.
• Written procedures and measures for the delivery and exchange of personal necessities of detainees should be put in place.
• Educational, cultural plans and programs for all detainees should be developed. Detainees should be also motivated and encouraged to participate in such programs.
• Well trained and qualified staff to oversee the learning and skill acquisition programs should be provided with the provision of suitable places.
• Procedures for the legal use of force in DDDC should be established with the provision of proper training for the staff.
• A library should be provided as well as proper procedures to guarantee the delivery of reading materials.
Specific Recommendation for Rights and Safeguards:

- Publications covering the rights and duties of DDDC in several languages and in Braille (for the blind) should be given to detainees upon arrival.
- Written procedures for complaints and grievances and for the protection of complainants in order to ensure privacy and follow-up should be available.

Special Healthcare Recommendations:

- Increase the number of medical professionals, provide a dental clinic and a trained mental health team.
- Establish programs for health promotion and awareness among the detainees and the DDDC staff.
- Take the necessary measures to raise the level of awareness among staff and detainees on ways to deal with patients and explain the concept of medical isolation.
- Increase the number of administrative staff at the health center, provide an infection control team and activate the administrative supervision over the clinic and its staff.
- Develop measures to ensure the provision of translation services for detainees during their visit to the health center.
- Develop a mechanism to guarantee the provision of special diets for detained patients.
## Appendix: Principles and Standards of the Visit

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<td>Other needs (External exercise, reading materials, visits and calls)</td>
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