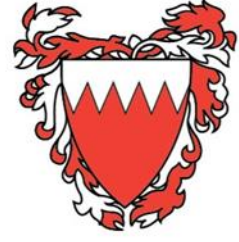


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Prisoners & Detainees Rights Commission



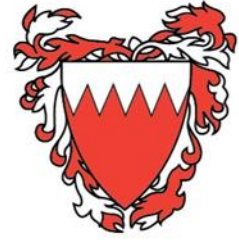
UNOFFICIAL TRANSLATION BY THE PRISONERS & DETAINEES RIGHTS COMMISSION

Report No. 8

The Prisoners and Detainees Rights Commission (PDRC)

Unannounced visit to the Women's Reformation and Rehabilitation Center (WRRC)

January 18-20, 2015

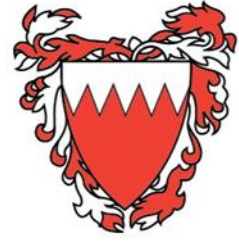


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Prisoners & Detainees Rights Commission

UNOFFICIAL TRANSLATION BY THE PRISONERS & DETAINEES RIGHTS COMMISSION

Contents

Introduction	2
Section I	
Background	4
Section II	
Assessment of Principles and Standards	9
Section III	
Recommendations	14



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Introduction:

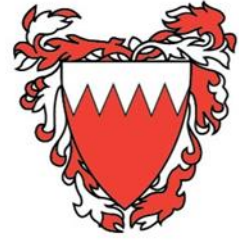
The Prisoners and Detainees Rights Commission (PDRC) conducted an unannounced inspection to the Women's Reformation and Rehabilitation Center (WRRC) in Isa Town. The inspection was carried out in accordance with the principles, criteria and indicators adopted by the Commission.

The procedures included documenting observations made during the visit to the facility and issuing recommendations to raise the standards to be in par with international human rights guidelines and criteria as related to women.

The reference points are as stipulated in :

1. National Action Charter.
2. Constitution of the Kingdom of Bahrain.
3. Penal Code, as amended.
4. Code of Criminal Procedures, as amended.
5. Law of Prisons 1964.
6. Law of Public Security Forces, as amended.
7. Prison Systems 1964.
8. Decree 61 / 2013 in regards to establishing Prisoners and Detainees Rights Commission.
9. Universal Declaration of Human Rights.
10. International Covenant on Civil and Political Rights.
11. Convention against Torture and Other Cruel, Inhuman or cruel, inhuman or degrading treatment.
12. International Convention on the Elimination of All Forms of Racial Discrimination.
13. Convention on the Elimination of All Forms of Discrimination against Women.
14. United Nations Convention on the Rights of the Child.
15. Conventions on the Rights of Persons with Disabilities.
16. Charter of the United Nations.
17. Arab Charter of Human Rights.
18. United Nations Standard Minimum Rules for the Treatment of Prisoners 1955 (Geneva).
19. United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules).
20. Standards of Her Majesty's Inspectorate of Prisons in the United Kingdom.

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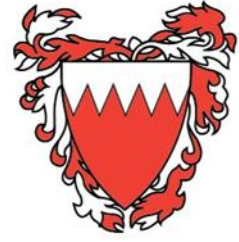


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Prisoners & Detainees Rights Commission

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Section I

Background



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Procedures:

Date of visit: 18 – 20 January 2015

Location: Women's Reformation and Rehabilitation center – Isa Town

Type of Visit: Unannounced.

Inspection Team: PDRC Commissioners and staff.

Work Mechanism: According to approved standards and guidelines which include:

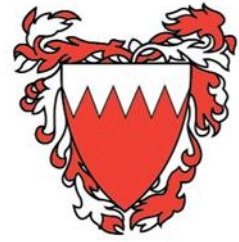
- A. **Evidence Gathering:** Evidence was gathered on location from staff according to specialty as well as analyzing available records and documents in various departments. The administrative system was examined and prisoners were involved throughout the process.
- B. **Prisoners Interviews:** A random selection of prisoners were interviewed based on records available at the time of the visit. The sample was diversified to guarantee proper coverage.
- C. **Direct Observation:** was through monitoring conditions of the place to ensure facilities are suitable for prisoners and is in accordance with local and international laws and guidelines.

General Observation:

- **The Center was opened in 2014**
- **Total Capacity:** 168
- **Number of the prisoners at time of visit:**

115, Mother and Child: 4, release: 6, total: 119

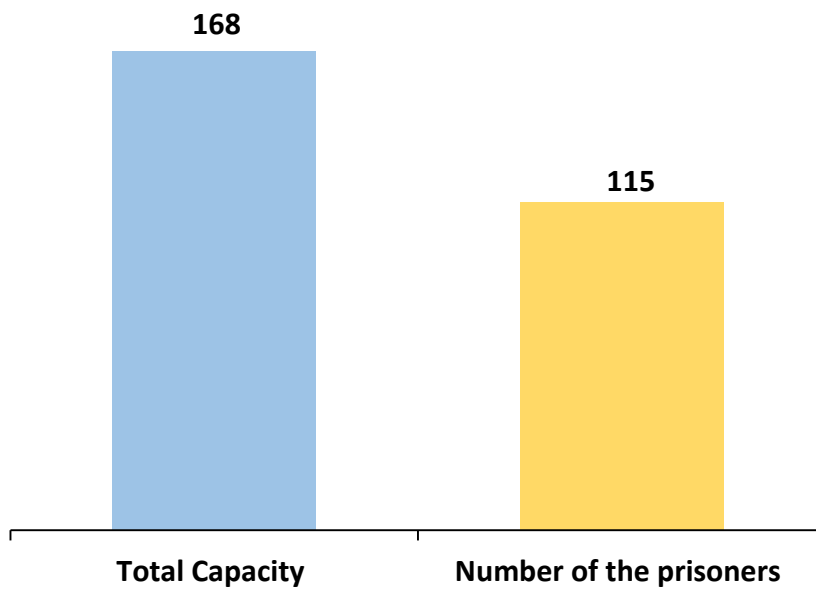
including: hypnotic prisoner at psychiatric hospital, and one in process at Salmaniya hospital.



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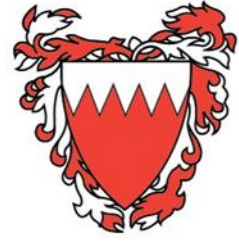
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- **Total Capacity:**



- **The number of prisoners in terms of nationality:**

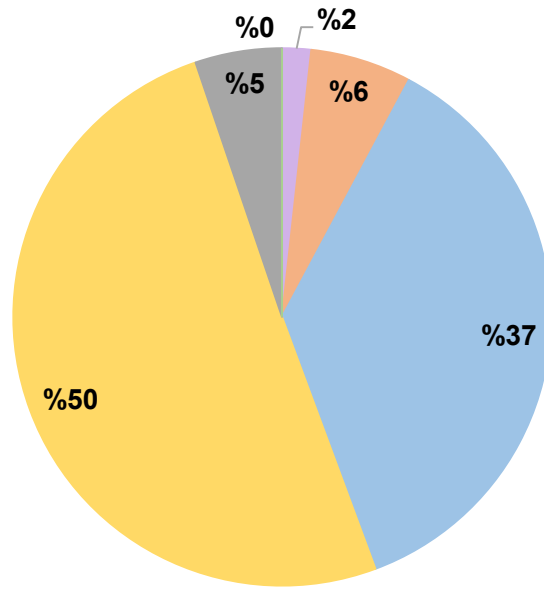




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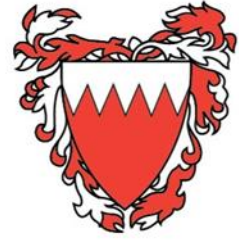
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- Number of prisoners based on age groups:



■ 55 and above ■ 55-45 ■ 45-35 ■ 35-25 ■ 25-18 ■ 18-15

Age category	Number
15-18	None
18-25	6
25-35	58
35-45	42
45-55	7
55 and above	2
Total	115



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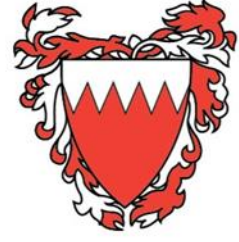
- **Crime Category:**



Crime	Number
Murder	6
Robbery/Theft	13
Public disorder	3
Prostitution	29
Illegal residence	24
Narcotics	12
Financial cases	28
Total	115

- Number of officers: (5) police members: (79). The numbers are limited to those who directly deal with prisoners excluding those working as security guards and other support staff.

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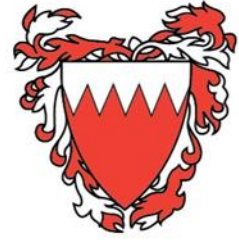


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Prisoners & Detainees Rights Commission

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Section II

Assessment of Principles and Standards



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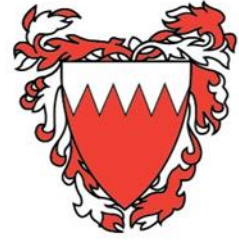
Treatment and Conditions:

The team inspected the place and observed there are procedures that separates prisoners in the age group of 15-18 years old. Moreover, Mother and Child are allocated special cells, with clean beds and bedding, and take into consideration the environment and requirements of the child. and Staff are aware of the various needs of prisoners; there are developmental training courses that enhance staff dealings with prisoners and various needs. A waiting room is available for visitors and there are written procedures that organize prisoners search methods. Prisoners are transferred from and to the Center in clean and safe vehicles. Staff receive prisoners immediately to avoid long delays in vehicles. Prisoners are not handcuffed during their transfer and are allowed to carry cash only. However, they are prohibited from carrying official documents and personal belongings. The Centre Administration organizes visits of various religious clergy to meet prisoners. The inspection team saw a visit that occurred during the inspection.

With respect to existing safety standards in the place, the presence of surveillance cameras in hallways and common areas for prisoners was noted as well as in some staff offices but the entire place is not covered. Employees are have limited awareness of and understand the concept of self-harm but do not undergo training on the management of risk, and therefore unaware of the risk some prisoners might pose on themselves or others. Some female staff have limited knowledge on their responsibility towards assessing and managing the risks arising from dealing with prisoners. In general, there are no plans to assess and manage risk. In a related context, the team checked the use of force procedures –in case such a need should arise- taking into account that there is a administrative decision regarding the basic principles of the use of force inside the Center and concluded that there is no training on the matter.

In case a prisoner is involved in an incident which led to the use of force, there is no special record for the use of force and its degrees. Procedures included medical examinations on prisoners and employees in case legal force was used.

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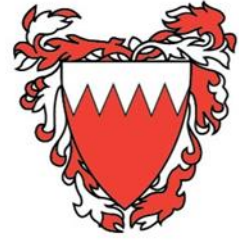
Cells are new, clean and free of any objects that may lead to self-harm. The temperature and lighting are appropriate and prisoners can call staff if needed. Training is available on evacuation plans in case of an emergency. Bed sheets, blankets, and pillows are clean and there are clear procedures in replacing and changing linens. Lockers are available to store personal hygiene kits and there are procedures that allow prisoners the right to receive clothing from outside the Center. Food and drink is varied, sufficient, nutritious and available in regular timings. Special food is provided for Mother and Child and inmates who are nursing that is suitable to their needs.

Prisoners have easy access to external areas and can exercise for limited periods. Visits are available to prisoners at legal regular timings and can contact parents and lawyers, but phone booths are not sufficient. Books and newspapers are available and varied with login procedures. Rehabilitation programs are available and prisoners have an opportunity to continue their studies in various educational levels based on homeschooling or distance learning. However, limited support is given to prisoners to improve their lifestyle, thoughts and behavior positively. There are no programs on rehabilitation for prisoners who suffer from mistreatment, sexual assault or domestic violence. Prisoners can freely communicate with the outside world in accordance with rules and regulations. There are classes to participate in various activities such as education, skills, and work. Prisoner's available data and information is not effectively used to achieve desired objectives for skills and the provision of employment.

Rights and guarantees:

It was established that each prisoner has a personal file and record that includes documents to verify legal imprisonment. Leaflets and posters that show prisoner's legal rights are available in every wing in Arabic and English. There are procedures that guarantee access to legal assistance and a room is available for prisoners to meet lawyers.

Prisoners have easy access to submit complaints; by filling out forms and there is a box for collection. There are procedures that encourage prisoners to solve their complaints amicably before filing one. However, there are no written guidelines to manage complaints and no specific procedures are available on health complaints.



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Health care:

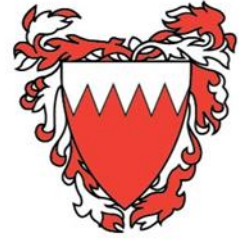
There is a common healthcare that serves WRRC, Juvenile Care Center, and Women's Detention Center.

1. A healthcare center serves the three above-mentioned centers and is open 24 hours. In the morning it is covered by a female doctor and a nurse. The rest of the day, weekends and official holidays only one nurse is in attendance. Pharmaceutical services are not available in the Center.
2. Dental and psychological care services are transferred to the main health center in the Police Fort in the Ministry of Interior.
3. Other medical services, examinations and children vaccination are covered in close by government hospitals and health centers.
4. Psychological and social support services are provided by a specialized team.
5. An ambulance is requested when needed from government hospitals.

Comments on medical services

Prisoners have access to medical care through the health center or by transfer to hospitals when needed. Psychological and addiction care is offered in a timely manner. Medical care is provided by professionals and follow up is done by health supervisors (members of the women police force). Examinations and children vaccination are covered in close by government hospitals and health centers. Patients are accounted for and cases are documented at the nursing station. There is lack of supervision regarding services and administrative procedures on location. As it was noticed that all administration was handled at the Police Fort. The doctor and the nursing staff in the center, organizationally report to the medical center in the Police Fort. There is no specialized training for staff on prisoners' health or the diseases they might be suffering from. Medical examination is done in private and it guarantees confidentiality. There is only one specialist in the Ministry of Interior that covers infectious diseases. There is a long waiting period for accessing dental services at government health clinics. There is an evaluation form, which can be submitted by management, but there is no proper follow-up. No awareness procedures were found on counting contagious diseases. Medical equipment are examined regularly, while medical staff do not have proper knowledge on operating the resuscitation devices.

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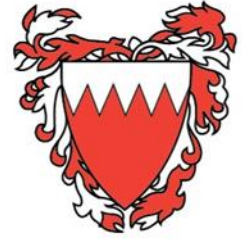


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There is a clear procedure on how to access medical care. Medical information is documented by women's police force in the prisoner's record from day one after they are medically examined in the Police Fort. The information is electronically saved which ensures confidentiality as access is available only to those concerned. Confidentiality and privacy are preserved when it comes to psychological and social care. There is no pharmacy in the health center so general medicines are not available for common diseases but are requested from outside health centers and provided on the same day. Medicines are stored in policewomen's offices in an unsafe manner and are not dispensed appropriately, the distribution and record of medicines including controlled medicines is done by the women's police force and not by nursing or pharmaceutical staff. Storage and distribution procedures that are followed in the Kingdom of Bahrain are not observed. After examination by a psychiatrist, prisoners with drug and alcohol addictions are provided with medication to treat withdrawal symptoms.

Regarding psychiatric health, prisoners are transferred to the psychiatric hospital through the health center doctor or upon their own request. There is limited awareness on psychological health and care by the medical team due to shortages in staff. All prisoners are evaluated by the social and psychological support specialists and a plan is put in place on how to deal with various psychological symptoms and in preparation to transfer to psychiatric hospital when needed.

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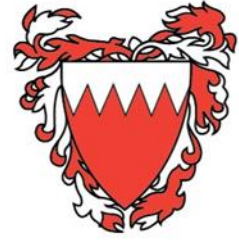


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Prisoners & Detainees Rights Commission

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Section III

Recommendations



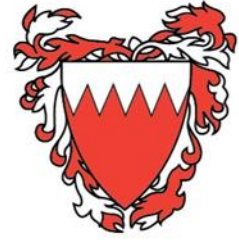
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Recommendations

1. Ministry of Health to coordinate with the Ministry of Interior for the provision of healthcare services.
2. The Ministry of Education should be responsible for the provision of education to inmates in coordination with the Ministry of Interior.
3. Train staff on modes of dealing with 15-18 age group prisoners and those with special needs. Training on management and assessment of risk should be provided, including pregnant inmates and mothers accompanied by their child.
4. Install surveillance cameras in all the facilities, wings and hallways according to approved international standards.
5. Provide additional educational, learning programs, reading materials and try to motivate prisoners to participate in these activities.
6. Increase staff that supervise activities that improve learning skills, and provide areas for such activities.
7. Train staff on the use the legal use of force and risk management in the Center.
8. Written procedures that define the process of filing complaints that guarantees confidentiality and follow up should be put in place.
9. Increase the number of phone booths.
10. Increase medical staff to inclusively provide for all prisoners health needs, especially dental and psychological care.
11. Establish a department that specializes in administrative supervision, medical follow-up and submitted complaints.
12. Set up developmental and training plans for health workers according to written procedures to coordinate and evaluate work.
13. Develop a mechanism to transfer patients to general government dental services to reduce the waiting period.
14. Develop educational and health awareness programs given that maintaining a healthy life style is very important.
15. Establish a pharmacy in the Health Center administrated by a pharmacist to distribute and dispense medicine as needed.
16. Train medical staff on operating the resuscitation device in the Health Center.

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Kingdom of Bahrain



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Prisoners & Detainees Rights Commission

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