

Current issues and good practices in prison management

Thematic report of the Special Rapporteur on Torture

(i) Pre-trial Detention, The Role of the National Preventive Mechanism Division and Women in Prison.

Mauritius acceded to the Optional Protocol to the Convention against Torture (OPCAT) on 21 June 2005. Subsequently, the National Human Rights Commission (NHRC) acted as the National Preventive Mechanism (NPM) for the State of Mauritius. In 2014, by virtue of an Act of Parliament namely the National Preventive Mechanism Act 2012, the National Preventive Mechanism Division was set up as a division of the National Human Rights Commission.

Pursuant to its mandate under Section 4 of the NPM Act, the NPMD seeks to ensure that detainees in places of detention, such as police detention centres and prisons are not ill-treated, tortured or exposed to any other inhuman treatment. The NPMD regularly visits places of detention on its own initiative or following complaints made by detainees directly or through third parties. After thorough investigation, the NPMD makes appropriate recommendations to the Commissioner of Police, Commissioner of Prisons and other stakeholders as required. Follow-up visits are made in order to ascertain whether the recommendations have been implemented.

Remand detainees in prisons consist mainly of men and women of 20-30 age groups. A majority of them are charged with relatively minor offences. The status quo is no longer tenable. All relevant stakeholders need to find alternatives to pre-trial detention. While some are detained because they have not been granted bail by the Court(s), others are remanded to jail because they are unable to fulfil all the conditions of bail imposed by the Court. There is a need to reform the process and set a timeframe for police enquiries to be completed. On a true and proper construction of Section 3 and Section 4 of the Bail Act, bail is the general rule and jail is the exception.

In Mauritius, remand and convicted inmates are not detained in the same cells, dormitories or yards. This is for security purposes, especially for the young offenders not to have contact and/or communication with high profile detainees. In fact, Grand River North West Remand Prison is reserved for remand detainees only.

Whilst in detention, remand detainees are allowed to work, provided that same is available as it largely depends on the size of the prison population at a given time and the number of convicted detainees. As a general rule, convicted detainees are given priority. Remand detainees electing to work are placed on an Earning Scheme and as such are given the opportunity to work on a rotation basis, thus ensuring that every remand detainee has a fair chance to earn some money.

Training programmes in handicraft, pastry and garment making are offered by the Mauritius Institute of Training and Development (MITD) and approved by the Mauritius Qualifications

Authority (MQA). Such initiatives enable detainees to develop new skills, which can be largely helpful upon their release from the prison. Indeed, a number of ex-detainees have been able to open their own enterprises, owing to the skills acquired and courses followed in prisons. In fact, the NPMD has recommended that pre-release prisons such as Petit Verger Prison and Richelieu Open Prison offer more vocational and training courses to detainees. This is essential for effective rehabilitation of detainees so that after their release they are equipped with skills that enable them to find employment and thereby facilitating their reintegration in society.

Pre-trial detainees are given medical and dental treatment in all prisons. Remand detainees have access to in-house dispensaries in all prisons which provide basic medical care. In-house dental care centres are situated at Central Prison Beau-Bassin, Women's Prison Beau-Bassin and Eastern High Security Prison Melrose. The women's prison consists of a Mother Care Unit and currently there are 3 babies with their mothers. The gynaecologist(s) and paediatrician(s) visit the Women's Prison once per month. Moreover, with the assistance of the Ministry of Finance, Economic Planning and Development, an Electronic Inventory Management System has been introduced in the prisons to improve the stocktaking of pharmaceutical products and distribution of medicines to detainees. The NPMD has recommended that more psychologists be recruited by the prison authority as there are currently one prison psychologist on a full-time basis and 2 trainee psychologists. The NPMD regularly visits the medical complexes in the prisons to ensure that appropriate standards and norms are respected and implemented. Furthermore, the NPMD often meets with medical staff at the prison headquarters so as to keep updated as regards to the new projects in prisons and inform the medical staff of any complaint(s) at our level, which may require their immediate intervention(s).

In the same line, the NPMD engages through meaningful dialogue with the stakeholders in prisons concerning the prevention of torture and ill-treatment. The NPMD establishes continuous communication with the medical staff, the psychologist(s), prison officers and principally with the welfare officers. The NPMD acknowledges the fact that welfare officers play a remarkable role in creating a proper environment for the detainees in general so as to encourage them for rehabilitation. The NPMD continuously emphasises on the roles of prison officers and welfare officers in providing moral support especially to women and their children at the Women's Prison. The NPMD acknowledges that women detainees ought to be given psychological support during their detention and therefore continuously support the Mauritius Prison Service to implement same in the prison. Recreational activities such as Thai Chi, Yoga, meditation and peer support counselling are conducted at the Women's Prison. During the visits, the NPMD has observed that such rehabilitation allowed the women detainees to adapt and to adjust themselves with new inmates.

During a visit at Women's Prison in March 2022, the NPMD made recommendations to improve the conditions of detention thereat; including urgent renovation(s) in the kitchen, the provision of more refrigerators to store vegetables, fruits and other perishable food stuff, to repair the windows in the kitchen, the provision of appropriate cleaning materials to the detainees, the provision of transparent waterproof tarpaulin sheets around the remand kiosk and metal sheets

along its pathway to the kiosk. In mid-2022, the NPMD conducted a follow-up visit and observed the implementation of the above recommendations.

The NPMD regularly organises sensitisation campaigns, talks and lectures with prison officers and officers working at the Rehabilitation Youth Centres and Correctional Youth Centres. The curriculum includes relevant legislations and conventions on human rights, the United Nations Standard Minimum Rules for the Treatment of Prisoners (The Nelson Mandela Rules), the Convention against Torture (CAT), the Optional Protocol to the Convention against Torture (OPCAT) and about the mandate and functions of the NPMD.

(ii) Right to health in prison

Rule 24 of the UN Standard Minimum Rules for the Treatment of Detainees (Nelson Mandela's Rules) lays stress on the importance of healthcare in prison to be comparable to that available in the community. It puts emphasis on the continuity of treatment and care, without discrimination on the grounds of the legal status of detainees.

The recent partnership project between three NGOs, the Mauritius Prison Service (MPS), the Ministry of Health, the National AIDS Secretariat and the National Preventive Mechanism Division (NPMD) called "La santé d'abord" (literally health first), is a typical example of how joint efforts can contribute to uphold the standard of healthcare in prison at least concerning HIV, Hepatitis C, (Hep C) and Sexually Transmissible Infection (STI), from 2021 to 2023. The objectives of this project are to:

- Help to fight stigmatisation and discrimination of vulnerable communities inside and outside prison concerning HIV, STI and Hep C
- Ensure a continuum of healthcare from within the community through confined settings and back in the community
- Take opportunity of confined settings to administer treatment and follow up particularly in addictology
- Keep trace of patients who go through incarceration to maintain healthcare

To achieve these objectives, the complementary roles of NGOs have been put together, AILES (Aide, Info, Liberte, Espoirs et Solidarite) which accompanies drug users based within the community to reach for treatment or social assistance, refers convicted ones to Kinouete which is the NGO assisting detainees for drug rehabilitation in prisons. AILES then traces back the detainees upon release to the community, with the collaboration of the MPS, for continued healthcare. PILS (Prevention, Information, Lutte contre SIDA), which is a member of Coalition Plus with a long expertise in accompanying people injecting drugs, is the technical partner in providing training for NGOs in this field and its coordination.

Four workshops have been organised, regrouping PILS, Kinouete, AILES, Prison Health Officers and the NPMD. The role of the NPMD as a watchdog within places of detention was explained. As an independent body, the NPMD advocates to bring awareness on human rights in prison and bridge the gap of stigmatisation and discrimination against people injecting drugs. It

ensures, during its thematic visits, that proper healthcare is provided, and personal health data are systemically gathered upon admission, in all privacy and are kept available upon transfer of the detainee to other prisons, for the respective health officer to be able to do a follow-up. The NPM Act 2012 Section 5(2) (b) gives the power to the division to have “*access to all information referring to the treatment of those persons as well as their conditions of detention*”.

There have been several meetings between the NPMD and the Chief Medical Officer and his staff in the prison’s office. Two health officers who had previously worked in prison had been recruited on contract basis exclusively for the project. They were regularly met by the NPMD not only during its preventive visits but also upon reactive visits following complaints received from detainees, in respect of HIV or Methadone Substitution Therapy (MST). This was a unique opportunity to align health services inside and outside prison in the field of HIV, Hep C and MST. It was also useful in removing any kind of bias. Members of NGOS and civil society were able to learn how protocols are created and adhered to in prisons, which result in a more systematic healthcare provision. Following discussion, it was concluded that the treatment given within prison settings was more effective because the “patients” were more assiduous; better follow up was possible while in the community self-neglect, stigmatisation and exclusion tend to eject the patient out of the healthcare system.

A residential workshop was also organised from 3-5 November, gathering all the stakeholders, for the evaluation and reflexion on the way forward. A Prison Health Committee has been set-up and will continue the process with the help of peer supports. The NPMD will continue to play an important role therein.

