



CPT/Inf (2007) 24

**Report to the Hungarian Government
on the visit to Hungary
carried out by the European Committee
for the Prevention of Torture and Inhuman
or Degrading Treatment or Punishment (CPT)**

from 30 January to 1 February 2007

The Hungarian Government has agreed to the publication of this report and of its response. The Government's response is set out in document CPT/Inf (2007) 25.

Strasbourg, 28 June 2007

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Copy of the letter transmitting the CPT's report

Strasbourg, 19 March 2007

Dear Mr Vókó,

In pursuance of Article 10, paragraph 1, of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment, I enclose herewith the report to the Government of Hungary drawn up by the European Committee for the prevention of torture and inhuman or degrading treatment or punishment (CPT) following its visit to Hungary from 30 January to 1 February 2007. The report was adopted by the CPT at its 62nd meeting, held from 5 to 9 March 2007.

The recommendations, comments and requests for information made by the CPT are set out in bold type in paragraphs 11, 14, 18, 20, 22, 23, 25 to 30, 32 and 33 of the report. The CPT requests the Hungarian authorities to provide within three months a response containing an account of action taken by them to implement the Committee's recommendations and setting out their reactions and replies to its comments and requests for information.

The CPT would ask, in the event of the response being forwarded in Hungarian, that it be accompanied by an English or French translation. It would also be most helpful if the Hungarian authorities could provide a copy of the response in electronic form.

I am at your entire disposal if you have any questions concerning either the CPT's report or the future procedure.

Yours sincerely,

Mauro PALMA
President of the European Committee for the
prevention of torture and inhuman
or degrading treatment or punishment

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I. INTRODUCTION

1. In pursuance of Article 7 of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment (hereinafter referred to as "the Convention"), a delegation of the CPT visited Hungary from 30 January to 1 February 2007. The visit was one which appeared to the Committee "to be required in the circumstances" (see Article 7, paragraph 1, of the Convention). This was the CPT's fifth visit to Hungary.

2. The visit was carried out by the following members of the CPT:

- Ms Renate KICKER, Head of delegation
- Mr Vladimir ORTAKOV.

They were supported by Mr Johan FRIESTEDT of the CPT's Secretariat, and assisted by:

- Mr James McMANUS, Professor of Criminal Justice at Glasgow Caledonian University, United Kingdom (expert)
- Mr József BENDIK (interpreter)
- Mr Gábor KARAKAI (interpreter)
- Mr Zoltan KÖRÖSPATAKI (interpreter).

3. The main purpose of the visit was to examine the situation at Szeged Prison's Special Regime Unit for prisoners serving lengthy sentences ("HSR Unit"). In the report on its third periodic visit to Hungary in 2005¹, the CPT made a number of recommendations and comments with respect to plans to open a special unit at Szeged Prison for "actual lifers" (i.e. prisoners sentenced to life imprisonment who cannot be released except on compassionate grounds on pardon). The Committee stressed in particular that it could see no justification for keeping "actual lifers" apart from other prisoners serving lengthy sentences. In their response, the Hungarian authorities informed the CPT of the setting-up of the HSR Unit. The Committee returned to Szeged Prison to assess how this new Unit functioned in practice.

4. As had been the case during the CPT's previous visits to Hungary, the co-operation provided to the Committee's delegation was of a very high standard. The CPT is grateful for the time devoted to its delegation by József PETRÉTEI, Minister of Justice and Law Enforcement, Ferenc KONDOROSI, Secretary of State at the Ministry of Justice and Law Enforcement, and László CSERE, Director General of the Prison Service.

¹ The third periodic visit took place in March/April 2005. The CPT's report on that visit, as well as the response of the Hungarian authorities, have been made public at the request of the Hungarian authorities (see documents CPT/Inf (2006) 20 and CPT/Inf (2006) 21).

The CPT also wishes to express its appreciation for the assistance provided to its delegation by the Liaison Officer designated by the national authorities, György VÓKÓ, General Director at the Prosecutor General's Office, and by Magdolna HAJDÚ, Public Prosecutor at the Prosecutor General's Office.

5. Arrangements to secure interviews in private with prisoners and access to the documents required were very satisfactory at Szeged Prison.

However, the delegation initially received information which did not reflect reality, in particular as to the application of means of restraint to prisoners held in and outside the HSR Unit. The CPT trusts that steps will be taken to ensure that such a situation is not encountered during future visits.

II. SPECIAL REGIME UNIT FOR PRISONERS SERVING LENGTHY SENTENCES (HSR UNIT) AT SZEGED PRISON

A. Preliminary remarks

6. Szeged Prison's HSR Unit entered into operation in November 2005, namely some seven months after the CPT's third periodic visit to Hungary². The Committee is pleased to note that the Hungarian authorities took action to review their plans to create a separate unit for "actual lifers". The new philosophy behind the setting-up of the HSR Unit consisted primarily of providing special care to very long-term prisoners.

When setting up the HSR Unit, the intention was to pay particular attention to the necessity to mix "actual lifers" with other long-term prisoners and to examine possibilities for "actual lifers" to be held outside the HSR Unit.

7. The Unit is located on the top floor of wing 2 of the "Csillag" building³, and is separated from other detention areas. For an official capacity of 20, it was accommodating 10 inmates at the time of the 2007 visit: five "actual lifers" and five other prisoners sentenced to long-term sentences. All in all, 16 prisoners had been held in this Unit since it was created and its occupancy level had never exceeded 12 inmates. It is also noteworthy that at the time of the visit, three "actual lifers" were being accommodated in other detention areas (two of them had been held in the Unit and were transferred to another detention area at their own request, and one was under compulsory treatment for alcoholism)⁴.

8. A multi-disciplinary team (including Szeged Prison's deputy director, the head of security, the head of the Unit, an educator and a psychologist) is responsible for the placement of prisoners in the HSR Unit and the quarterly review of this placement, in consultation with the inmates concerned. This team also has to decide on the conditions under which each prisoner is to be held (with another inmate or alone), on individual activity plans and on which restraints, if any, should be applied to each individual when out of cell.

9. Although prisoners placed under this new special regime (hereafter "HSR prisoners") were all classified as Grade 4⁵, the ambition – as had been indicated to the delegation – was to create the exact opposite of a Special Security Unit (KBK Unit)⁶ or, as the State Secretary put it at the end of the 2007 visit, a "home within the prison".

² For more detailed information about the 2005 visit to Szeged Prison, see document CPT/Inf (2006) 20.

³ The "Csillag" building provides high-security accommodation for male prisoners sentenced for serious offences.

⁴ Three other "actual lifers" were also held at Sopronkőhida and Sátoraljaújhely Prisons.

⁵ Prisoners placed under a special security regime on account of their perceived "dangerousness".

⁶ In accordance with Article 47 of Decree 6/1996 (III. 6.) of the Minister of Justice, Grade 4 prisoners may be segregated in a "special security cell or unit". At the time of the 2007 visit to Hungary, there were such units at Sopronkőhida and Sátoraljaújhely Prisons.

10. One of the biggest challenges faced by the Hungarian authorities was first and foremost to stick to the original project of the HSR Unit. There were no specific legal provisions or regulations on the setting-up of such a Unit and its functioning. In their present form, the operating rules do not set a clear objective for the Unit. Officials met by the delegation highlighted in this connection the very specific situation of Szeged Prison, which holds the highest number of long-term (including actual life) sentenced prisoners in the country; they emphasised the need to leave the necessary margin of flexibility to the prison management. It was also indicated to the delegation that the HSR Unit should be seen as a unique solution or experiment to respond to the specific needs of a certain category of inmates, i.e. those who would spend a particularly long period in prison. Following on from the last periodic visit to Hungary, the aim of the 2007 visit was to take stock of this experiment since its inception.

B. Ill-treatment

11. The CPT's delegation found no indication of any form of ill-treatment of inmates by staff working in Szeged Prison's HSR Unit. On the contrary, prisoners being held or who had been held in this Unit spoke highly of staff. They generally indicated that they were treated humanely and that the attitude of staff in this Unit sharply contrasted with that of prison officers working in other detention areas or in the establishment's rapid reaction team.

In spite of this positive assessment, it should be noted that prison staff in the HSR Unit were openly carrying handcuffs, body-belts and truncheons, the last-mentioned often in their hands. This is intimidating and hence not conducive to developing positive relations between staff and prisoners. **If it is considered necessary for prison officers assigned to the HSR Unit to carry truncheons and handcuffs, the CPT recommends that steps be taken to ensure that they are hidden from view. Further, body-belts should not be carried as a matter a routine.**

12. No signs of inter-prisoner violence or intimidation were observed during the 2007 visit. Prisoners met by the delegation felt particularly safe and secure from this standpoint.

C. Conditions of detention

1. Material conditions

13. It is clear from the delegation's findings that a significant investment had been made by the Hungarian authorities to create good material conditions in the cells of the HSR Unit, in particular when compared to the situation prevailing in cells of other detention areas of the "Csillag" building⁷. The HSR Unit comprised eight cells, each measuring some 15.5 m², which could accommodate one or two inmates. They were divided into two rooms: a sitting room (with a 2 m² barred area at the entrance) and a bedroom. The sitting room was equipped with a table, one or two stools fixed to the floor and one or two lockable cupboards. The bedroom had a bed or bunk-bed, washbasin and a toilet partitioned with a one-meter-high curtain. In-cell lighting (access to natural light and artificial lighting), ventilation and heating were of a good standard and the premises were clean. Further, all cells were equipped with an intercom system. TV and radio were provided by the prison administration.

⁷ The situation as regards overcrowding and material conditions in those areas appeared relatively similar to that described in the report on the third periodic visit (see, in particular, paragraphs 67 and 92 of CPT/Inf (2006) 20).

The Unit also possessed two 7.5 m² single-occupancy “crisis” cells, which in principle served as observation cells for inmates presenting suicide risks or disciplinary cells for prisoners who had committed serious disciplinary offences and who could not be segregated in their own cell. They were adequately equipped for those purposes (bed, washbasin and toilet, as well as CCTV system)⁸.

14. However, the delegation was informed by the prison management that two of the eight ordinary cells may be used to accommodate three inmates. It was also indicated that the two “crisis” cells may be used, if need be, as normal prisoner accommodation.

The CPT recommends that steps be taken to ensure that the two-room cells never accommodate more than two inmates and the two “crisis” cells never be used as normal prisoner accommodation. The official capacity of the HSR Unit should be reviewed accordingly.

It should also be noted that the current curtain partitioning of the toilets in the Unit’s cells is far from satisfactory when they are used for double-occupancy.

15. All HSR inmates had adequate access to personal hygiene products. Further, they had access to the Unit’s shower room every weekday.

16. The delegation did not receive any complaints about food. Prisoners had meals in their cells and the prisoners met by the delegation generally indicated that their religious requirements and dietary needs were taken into account.

2. Programme of activities

17. In 2005, the CPT’s delegation was extremely concerned by the planned design of the exercise area of the future unit, which did not allow outdoor exercise in the true sense of the word. Located on the roof of the “Csillag” building and measuring some 23 m², it would have had a pitched cover, with one half made of plexi-glass and the other half tiled. At the end of the visit, the delegation requested the Hungarian authorities to revise the existing plans for the exercise area, and the CPT was subsequently informed that the yard had been redesigned so as to make it “truly open”.

18. The delegation’s observations made during the 2007 visit confirmed the action taken by the Hungarian authorities. The HSR Unit’s yard was open to the sky. However, it remained oppressive in design, had neither means of rest nor any shelter from inclement weather and was even smaller (measuring some 16 m²) than in the plans seen by the CPT’s delegation in 2005. Naturally, this did not allow prisoners to exert themselves physically, and access to proper outdoor sports facilities had only been secured a few times in the summer of 2006. Further, those HSR prisoners who did not share a cell with another inmate were obliged to take their one-hour daily outdoor exercise alone.

⁸ They had hardly been used for such purposes since the opening of the Unit.

The CPT recommends that measures be taken to:

- **equip the exercise yard with a shelter and means of rest;**
- **secure HSR prisoners regular and frequent access to proper outdoor sports facilities;**
- **ensure that all HSR prisoners are allowed to take outdoor exercise with other inmates held in the Unit.**

19. The CPT would like to recall that long-term imprisonment can have a number of desocialising effects upon inmates. In addition to becoming institutionalised, such prisoners may experience a range of psychological problems (including loss of self-esteem and impairment of social skills). Such risks are even higher with respect to “actual lifers” as they are expected to spend all their life in prison. In the Committee’s view, the programmes of activities which are offered to HSR prisoners should therefore seek to compensate for these effects in a positive and proactive way. The inmates concerned should have access to a wide range of purposeful activities of a varied nature (work, preferably with vocational value; education; sport; recreation/association).

20. The HSR Unit had the potential to offer many activities to inmates on the basis of individualised plans. The multi-disciplinary team was in charge of drawing up such plans, in consultation with the prisoners. According to the Unit’s operating rules, inmates were entitled to work in their cells or in the prison’s workshops (on condition, *inter alia*, that they did not enter into contact with inmates from other detention areas). A large number of recreational activities were made available in a communal facility when the HSR Unit was opened: table tennis, table football, fitness, board games, cooking, handicraft. Such activities were carried out with one or two other HSR inmates of their own choosing. HSR prisoners could also have access to a computer within the detention area. Further, they were offered possibilities to practise their religion.

Nevertheless, the delegation’s findings revealed that the Unit’s potential had not been realised. By way of illustration, two “actual lifers” who were allowed to work in the furniture workshop before being accommodated in the HSR Unit were no longer entitled to have such work once transferred to it. Both of them finally requested to leave the Unit and were subsequently moved to another detention area. All HSR prisoners were offered paid work in their cells, but of a mundane nature (e.g. packing bandages and toothpicks or assembling matchboxes). The communal facility clearly remained underused: for instance, HSR prisoners had access to it for on average 3 and a half hours in December 2006. It should be noted that the use of this facility had decreased somewhat since October 2006 (cf. also paragraph 24)⁹. Further, no education programmes were offered to inmates.

The CPT recommends that the Hungarian authorities take measures to return to the original concept of providing a broad range of activities to HSR prisoners on the basis of individualised activity plans. A major investment should be made in structured activities of a long-term nature (in particular work, with a vocational value, and education). Further, the objective should be to move away from the current policy of having HSR prisoners locked up for most of the time in their cells.

⁹ By comparison, HSR prisoners had access to the communal facility for on average more than eight hours during the month of July 2006.

D. Medical and psychological care

21. The CPT's delegation's findings in the course of the 2007 visit indicate that medical care provided to HSR prisoners was generally adequate. The inmates concerned had access to a doctor, psychiatrist and other specialists when required and the relevant medical records examined during the visit were well-kept and up-to-date.

22. As regards medical confidentiality, the CPT made specific recommendations in its 2005 visit report aimed at preventing the presence of custodial staff during medical examinations. In their response, the Hungarian authorities informed the Committee that it was not common for prison officers to be present during medical examinations, except when so required by law, in particular in respect of Grade 4 prisoners¹⁰. Accordingly, all medical examinations of HSR prisoners in the doctor's office were apparently carried out in the presence of prison officers, although the delegation initially received information that this was no longer the case.

In this context, particular reference should be made to the Recommendation R (98) 7 of the Council of Europe's Committee of Ministers to member States concerning the ethical and organisational aspects of health care in prison, according to which medical confidentiality should be guaranteed and respected with the same rigour as in the population as a whole¹¹. The CPT would like to stress that respect for confidentiality is essential to the atmosphere of trust which is a necessary part of the doctor/patient relationship; it should be the doctor's duty to preserve that relationship and to decide on the manner in which the rules of confidentiality are observed in a given case. **The Committee reiterates its previous recommendation that steps be taken to ensure that medical examinations of prisoners (including HSR inmates) are conducted out of the hearing and – unless the doctor concerned expressly requests otherwise in a given case – out of the sight of non-medical staff. If necessary, the relevant legal provisions should be amended.**

The issue of the use of restraints during medical examinations is addressed in paragraphs 24 and 25 below.

23. The fact that HSR prisoners had been deprived of psychological support for some two months is another cause for concern to the CPT. Such a situation may have negative repercussions, not only for prisoners, but also for staff. The female psychologist previously assigned to the HSR Unit, who was specialised in clinical psychology and trained in psychotherapy, had been withdrawn from the Unit's team; according to the explanations given by the prison management, she had failed to prevent disruptive behaviour. It was indicated to the delegation that there was a need for a male psychologist in the HSR Unit and that action would be taken to this end.

¹⁰ According to Section 14 of the Act XLVII of 1997 on Handling and Protecting Health and Related Personal Data, the presence of prison officers may be required to ensure the protection of health-care staff or if there is a risk of escape.

¹¹ See paragraph 13 of the Appendix to Recommendation No. R (98) 7.

The CPT is not of the opinion that any difficulties encountered with the psychologist are related to gender. It transpires from the Unit's operating rules that a heavy burden is placed on the psychologist. He or she needs to be trusted by prisoners in order to effectively carry out the assigned tasks of providing psychotherapy, detecting suicide risks and/or any changes of behaviour and addressing them; this implies, *inter alia*, that the content of private interviews with prisoners should not be revealed to other staff members. At the same time, he or she needs to be trusted by staff, given that the role involves participation in and briefing of the multi-disciplinary team once a week, assistance to staff, etc. **The CPT would like to receive the comments of the Hungarian authorities on the potential conflict of interest between the psychologist's therapeutic activities and various other tasks.**

E. Other issues

1. Means of restraint

24. The information gathered during the 2007 visit revealed that the use of handcuffs and body-belts was grossly excessive in the HSR Unit. The delegation initially received accounts that special security arrangements applied to HSR prisoners only involved them in being handcuffed during movements within the "Csillag" building. However, it subsequently transpired that all 10 HSR prisoners were both handcuffed and body-belted when taking outdoor exercise in the secure exercise yard on the roof and when receiving visits (which usually took place under closed conditions and in the presence of custodial staff), as well as during consultations in the doctor's office. Further, they were even routinely handcuffed and body-belted during all out-of-cell movements within the Unit itself. In addition, inmates remained handcuffed during telephone calls in the Unit and some HSR prisoners alleged that last year they had also been handcuffed when taking showers¹².

The delegation was informed that most of these measures were introduced in response to the preparation of an escape attempt in October 2006, which resulted in instructions being issued by the Director General of the Prison Service to impose more restrictions upon HSR inmates. In the CPT's opinion, the application of such measures could well be considered as a form of "collective punishment".

25. The CPT must reiterate that the application of restraints while a prisoner is taking outdoor exercise in an already secure environment is totally unacceptable. As regards the handcuffing/body-belted of prisoners during medical consultations, such a practice infringes upon the dignity of the prisoners concerned and prohibits the development of a proper doctor-patient relationship (and is possibly detrimental to the establishment of an objective medical finding). Likewise, to be handcuffed/body-belted when receiving a visit could certainly be considered as degrading for both the prisoner concerned and his visitor. Further, there can be no justification for routinely applying handcuffs and/or body-belts to HSR prisoners when outside their cells. **The CPT calls upon the Hungarian authorities to review without delay their current policy with regard to the application of means of restraint to HSR prisoners (and other Grade 4 prisoners at Szeged Prison), in the light of the above remarks.**

¹² It was also established that other Grade 4 prisoners held outside the HSR Unit were subjected to similar special security arrangements.

2. Staffing issues

26. The HSR Unit was reasonably staffed. Eleven prison officers worked on a permanent basis in the Unit on an eight-hour shift¹³. However, the delegation was informed that there were no longer any female custodial staff (the one existing female prison officer was to be replaced by a male officer). The CPT considers that the presence of both male and female staff would have a beneficial effect in terms of both the custodial ethos and in fostering a degree of normality in the HSR Unit. **The Committee recommends that the above remarks be taken into account when recruiting future staff to be assigned to the HSR Unit.**

27. Prison officers met by the delegation all volunteered for and had received special training to work in this Unit: they benefited from initial and monthly in-service training programmes comprising various components (e.g. case studies, psychology, pedagogy, hygiene, security). Staff were initially well motivated and keen on carrying out their new functions. However, that enthusiasm appeared to be waning. Not only had the wage increase promised to them failed to materialise, their skills had also not been used to the extent they had anticipated. They had expected to work in a “living prison” as they called it, but the reality is that they felt that they were now running a lockdown regime. Staff complained that they were not even given the reasons why some of the prisoners had been placed in this Unit. The explanation given to them was an uninformative statement invoking “prison needs” and referring to intelligence information which the head of security considered inappropriate to reveal to staff. **In order to maximise their contribution to prisoner management, the CPT recommends that custodial staff working in the HSR Unit have access to relevant information relating to inmates for whom they have responsibility.**

3. Contact with the outside world

28. Special efforts should be made to prevent the breakdown of family ties of prisoners serving life or lengthy sentences. In particular, visits and phone calls should be allowed with the maximum possible frequency and duration.

It appeared from the delegation’s findings during the 2007 visit that virtually no such efforts had been made with respect to HSR prisoners. They had the same entitlements as any other prisoner: they were allowed a one-hour visit per month (generally with a glass partition and in the presence of custodial staff), which had already been considered insufficient by the CPT in its 2005 visit report¹⁴, and 6 minutes of telephone calls every week¹⁵. **The Committee calls upon the Hungarian authorities to substantially increase visiting and phone call entitlements (both in terms of frequency and duration) with respect to HSR prisoners. In addition, open visits should be the rule and visits with glass partitions the exception.**

¹³ Three prison officers were present in the Unit during the day, two in the evening and one at night.

¹⁴ See paragraph 112 of CPT/Inf (2006) 20.

¹⁵ As regards the conditions under which visits and telephone calls took place, see also paragraph 24.

29. During the 2007 visit, the delegation received some complaints from HSR prisoners that phone conversations with their lawyer were systematically listened to by prison officers. Given the privileged nature of consultations between lawyers and their clients, telephone conversations between prisoners and their lawyers should remain confidential. **If confirmed, such a practice should be discontinued.**

4. Inspections

30. The CPT is pleased to note that prosecutors regularly visited the HSR Unit (at least every two weeks) and spoke in private to the prisoners concerned. The delegation gained the impression that inmates felt free to talk to them. Prosecutors' reports were addressed to the prison management, who informed them of any steps taken.

That being said, the CPT is concerned by the lack of appropriate follow-up action in a number of cases. By way of example, some HSR prisoners complained to prosecutors during their inspections that they were routinely handcuffed and body-belted when taken out of their cell or handcuffed during phone calls in the Unit. The prison management's usual response to such allegations was that this situation was in compliance with the prisoners' individual special security arrangements. However, no assessment was apparently made by prosecutors as to whether the measures complained of were proportionate. **The CPT would like to receive the comments of the Hungarian authorities on this issue.**

III. FINAL REMARKS

31. From the delegation's findings, it would appear that the HSR Unit has not functioned in accordance with the original plan which emerged after the CPT's 2005 periodic visit. While the Unit started life with a relatively open regime for the prisoners concerned, it quickly became a unit for the placement of prisoners considered to be difficult and dangerous. As one prisoner met by the delegation put it, "the difference between Szeged Prison's HSR Unit and a KBK Unit is disappearing". Many very long-term prisoners are neither difficult nor dangerous in prison, but once the two categories are mixed in a single unit, there is a tendency to increase the level of protective security for all to the degree required by the difficult and dangerous inmates. After an incident in October 2006, when staff discovered the preparation for an escape attempt, many more restrictions were imposed on all HSR prisoners. A considerable number of those restrictions were still in force during the 2007 visit.

32. The delegation was informed of plans to create a high-security unit for difficult and dangerous prisoners on the floor below the HSR Unit, due to open by the end of March 2007. New staff were being trained for this unit. The removal of this group of prisoners from the HSR Unit should allow that Unit to return to its original function and provide the opportunity to restart the HSR experiment on a healthy basis. Assuming that the initial ambition to create a "home within the prison" for very long-term prisoners remains, particular care should be taken to ensure that the HSR Unit never becomes a "prison within the prison". The fact that two "actual lifers" were able to leave the HSR Unit is reassuring in this context.

In the light of the above remarks, **the CPT recommends that the Hungarian authorities take appropriate measures, including of a legal nature if necessary, to:**

- **ensure that the main objective of the HSR Unit is to prepare the prisoners concerned to live in prison for a particularly long period and to integrate them at some point into the mainstream prison population. Appropriate steps should be taken to lend meaning to their long period of imprisonment; in this respect, the provision of individualised custody plans and appropriate psychological and social support are important elements in assisting such prisoners to come to terms with their period of incarceration;**
- **define clear criteria for the selection of suitable inmates to be placed in the HSR Unit. Prisoners considered to be difficult and dangerous should not be accommodated in this Unit;**
- **ensure that only the minimum restrictions necessary for safe and orderly confinement are imposed on prisoners.**

The CPT would also like to receive up-to-date information about the opening of the new high-security unit for prisoners considered to be difficult and dangerous at Szeged Prison and to obtain more details about the legal provisions and regulations under which it should operate, the procedure for placement of prisoners and review of their placement, regime plans and the staffing situation.

33. More generally, as regards “actual lifers”, the CPT has serious reservations about the very concept according to which such prisoners, once they are sentenced, are considered once and for all to be a permanent threat to the community and are deprived of any hope of being granted conditional release. In this regard, the Committee would like to refer to the Committee of Ministers’ Recommendation Rec (2006) 2 on the European Prison Rules of 11 January 2006¹⁶ as well as to paragraph 4.a of its Recommendation Rec (2003) 22 on conditional release (parole) of 24 September 2003, which clearly indicates that the law should make conditional release available to all sentenced prisoners, including life-sentenced prisoners. The explanatory memorandum to the latter recommendation emphasised that life-sentenced prisoners should not be deprived of the hope of being granted release. Firstly, no one can reasonably argue that all lifers will always remain dangerous to society. Secondly, the detention of persons who have no hope of release poses severe management problems in terms of creating incentives to co-operate and address disruptive behaviour, the delivery of personal development programmes, the organisation of sentence plans and security.

In the light of the above, the CPT invites the Hungarian authorities to introduce a regular review of the threat to society posed by “actual lifers”, on the basis of an individual risk assessment, with a view to establishing whether they can serve the remainder of their sentence in the community and under what conditions and supervision measures.

¹⁶ See in particular Rule 6, according to which all detention shall be managed so as to facilitate the reintegration into free society of persons who have been deprived of their liberty.