

HONORARY CHAIRMAN
Yuri Orlov

EXECUTIVE DIRECTOR
Aaron Rhodes

DEPUTY EXECUTIVE DIRECTOR
Brigitte Dufour

ADVISORY BOARD (CHAIR)
Karl von Schwarzenberg

EXECUTIVE COMMITTEE
Sonja Biserko
Holly Cartner
Bjørn Engesland
Krassimir Kanev
Andrzej Rzeplinski

PRESIDENT
Ludmilla Alexeyeva

VICE PRESIDENT
Ulrich Fischer

TREASURER
Stein-Ivar Aarsæther

Wickenburggasse 14/7, A-1080 Vienna, Austria; Tel +43-1-408 88 22; Fax 408 88 22-50
e-mail: office@ihf-hr.org – internet: <http://www.ihf-hr.org>
Bank account: Bank Austria Creditanstalt 0221-00283/00, BLZ 12 000

PLACES OF DETENTION IN BULGARIA

*Report from the visit of the delegation of human rights NGOs to places of detention in
Bulgaria on 27 and 28 September 2004*

Published by:

Bulgarian Helsinki Committee
Moscow Helsinki Group
Hungarian Helsinki Group
Helsinki Foundation for Human Rights in Poland
Helsinki Committee for Human Rights in Serbia
Helsinki Committee for Human Rights in the
Republic of Macedonia
Greek Helsinki Monitor
International Helsinki Federation for Human
Rights
Association for the Prevention of Torture

Sofia, Vienna, April 2005

The IHF has consultative status with the United Nations and the Council of Europe.

MEMBER AND COOPERATING* COMMITTEES IN:

Albania – Austria – Azerbaijan- Belarus – Bosnia-Herzegovina – Bulgaria – Canada – Croatia – Czech Republic – Denmark – Finland – France – Georgia*
Germany – Greece – Hungary – Italy – Kazakhstan – Kosovo – Kyrgyzstan – Latvia – Lithuania – Macedonia – Moldova – Montenegro – The Netherlands
Norway – Poland – Romania – Russia – Serbia – Slovakia – Slovenia – Sweden – Switzerland – Ukraine* – United Kingdom – United States – Uzbekistan*

COOPERATING ORGANIZATIONS:

The European Roma Rights Center – Human Rights Without Frontiers – Mental Disability Advocacy Center



Note: This document has been produced with the financial assistance of the European Community. The views expressed herein are those of the publishers, and can therefore in no way be taken to reflect the official opinion of the European Commission.

The International Helsinki Federation for Human Rights (IHF) is a non-governmental organization that seeks to promote compliance with the human rights provisions of the Helsinki Final Act and its follow-up documents. In addition to supporting and providing liaison among 44 Helsinki committees and cooperating organizations, the IHF has direct links with human rights activists in countries where no Helsinki committees exist. It has consultative status with the United Nations and the Council of Europe.

The IHF represents member and cooperating committees in Albania, Armenia, Austria, Azerbaijan, Belarus, Bosnia and Herzegovina, Bulgaria, Canada, Croatia, Czech Republic, Denmark, Finland, France, Georgia, Germany, Greece, Hungary, Italy, Kazakhstan, Kosovo, Kyrgyzstan, Latvia, Lithuania, Macedonia, Moldova, Montenegro, Netherlands, Norway, Poland, Romania, Russia, Serbia, Slovakia, Slovenia, Sweden, Switzerland, Ukraine, United Kingdom, United States and Uzbekistan. Other cooperating organizations include the European Roma Rights Centre (Budapest), Human Rights without Frontiers (Brussels) and the Mental Disabilities Advocacy Center (Budapest).

President:	Ulrich Fischer
Vice President:	Srdjan Dizdarević
Executive Director:	Aaron Rhodes
Deputy Executive Director/Legal Counsel:	Brigitte Dufour
Chief Editor:	Paula Tscherne-Lempiäinen

International Helsinki Federation for Human Rights
Wickenburggasse 14/7, A-1080 Vienna, Austria
Tel: (+43-1) 408 88 22 Fax: (+43-1) 408 88 22-50
Email: office@ihf-hr.org
Internet: www.ihf-hr.org
Bank account: Bank Austria Creditanstalt, 0221-00283/00 BLZ 11 000

©2005 by the International Helsinki Federation for Human Rights and IHF Research Foundation.
All rights reserved.

Executive Summary

On 27 and 28 September 2004 representatives of the International Helsinki Federation for Human Rights (IHF) conducted a mission on monitoring places of detention in the Republic of Bulgaria. The mission was the third under the project “Preventing Torture in the Closed Institutions of Central and Eastern Europe”, financed by the European Commission. The delegation included representatives from the following organizations (in alphabetical order): Association for the Prevention of Torture; Bulgarian Helsinki Committee; Greek Helsinki Monitor; Helsinki Committee for Human Rights in Serbia; Helsinki Committee for Human Rights in the Republic of Macedonia; Helsinki Foundation for Human Rights in Poland; Hungarian Helsinki Committee; International Helsinki Federation for Human Rights (IHF); Moscow Helsinki Group

In Bulgaria the delegation visited four types of institutions:

- Institutions for confinement of persons sentenced for criminal offences or detained on suspicion for having committed an offence under the authority of the Ministry of Justice;
- Institutions for involuntary psychiatric hospitalisation for the purposes of active treatment of mentally ill individuals under the authority of the Ministry of Health;
- Institutions for involuntary placement of delinquent children for the purposes of “compulsory education” under the authority of the Ministry of Education and Science;
- Institutions for involuntary placement of persons with developmental disabilities for the purposes of social care under the authority of the Ministry of Labour and Social Policy.

The IHF delegation received some cooperation from the Bulgarian authorities, which allowed it to conduct a meaningful mission and to formulate a number of recommendations on all types of facilities visited. This cooperation, however, was insufficient. The delegation always insists on conducting private interviews with inmates. Unfortunately, the delegation members were not able to do this in all of the facilities it visited. Bulgarian legislation still preserves some outdated principles that do not allow contacts of remand prisoners with private individuals and groups, even for the purposes of human rights monitoring. In some establishments the directors and other staff members tried to control the team’s visit and prevent private conversations with inmates, especially when members of the delegations took interest in abuses of the authorities. An additional obstacle to the delegation’s mission was the incompetence of some of the staff members, who failed to answer delegation’s questions and to produce the necessary data.

In the **Ministry of Justice facilities**, the IHF delegation found that the Bulgarian government still struggles with the heritage of the previous outdated system of custody, which is incompatible with international standards for the treatment of prisoners. This system does not allow for more diversified forms of custody, including a possibility for placement of detainees in individual and small-group cells and dormitories. The delegation found that the conditions of detention were inhuman in several facilities it visited, but especially at the pre-trial detention facilities of Plovdiv and Nova Zagora. It recommended complete withdrawal of service of the Nova Zagora pre-trial detention facility and serious improvement of the material conditions of the Plovdiv pre-trial detention facility. It also recommended improvements of the conditions of custody in several prisons, especially in the wards where life-sentenced prisoners and prisoners undergoing disciplinary sanctions were held.

The Bulgarian system does not deal adequately with the complaints of ill treatment and with inter-prisoner violence. Medical care in the prisons is not integrated with the national health care system and is of a poor quality. The IHF delegation was particularly appalled by the practice it observed in some prisons to charge inmates for the medicines they take in the prison. It observed serious flaws in the ensuring of contacts with the outside world, including routine censorship of the correspondence in violation of international standards. In several facilities delegation members found that prisoners were not offered any activities. The situation with the prisoners sentenced to life imprisonment was particularly serious in that regard. In some facilities even the one-hour outdoor exercise, envisaged as a minimum by both the Bulgarian law and the international standards for treatment of prisoners, was not ensured. Although the legislative framework regulating disciplinary proceedings underwent some positive changes recently, it still allows for arbitrary exercise of disciplinary powers and lacks sufficient due process guarantees.

In the **Ministry of Health facilities**, the IHF delegation observed that at the time of the visit the Bulgarian system of civil commitment for involuntary psychiatric treatment allowed for arbitrary placement in psychiatric hospitals in violation of international standards. It also made possible the treatment of involuntary patients without asking for their consent. The delegation noted with satisfaction the changes of the law that took effect since January 1, 2005. During its visit to the Karlukovo Psychiatric Hospital the delegation observed poor material conditions in some wards. The food was apparently insufficient, despite some improvements. The methods of treatment were not sufficiently diversified and the patients were not offered meaningful activities during the day. Several patients complained of physical abuse from other patients. long-term isolation, as well as restraint of patients in front of other patients appeared to be routine practices in the hospital.

In the **Ministry of Education and Science facilities**, the IHF delegation found that the procedure for the placement in the schools for delinquent children is still arbitrary and requires further reform. In the Special Educational Boarding School in Gabrovtsi the delegation observed that the material conditions were inhuman and that the children were not protected from physical abuse. The educational process was seriously flawed and the students were not offered a meaningful program of activities. The delegation urged the Bulgarian government to seriously reconsider the future of the schools for delinquent children as they deprive the students from a family environment and hardly serve the purposes of rehabilitation of the juvenile delinquents.

In the **Ministry of Labour and Social Welfare facilities**, the IHF observed that the living conditions and the quality of care in the two homes for people with mental disabilities it visited were substandard, and that in the social care home in Batoshevo they were inhuman. The procedure for placement in these institutions was arbitrary. The delegation observed practices of prolonged and unjustified seclusion and serious flaws in ensuring the personal security of the residents. Medical care was inadequate and meaningful programs for rehabilitation were lacking. The delegation recommended substantial improvement of the material conditions and the quality of care in the Batoshevo home or its withdrawal from service.

Table of Contents

Introduction: Context and Purpose of the Visit	7
1. Ministry of Justice facilities	9
1.1. Background to the law and custody policy of the Ministry of Justice facilities	9
1.2. Visit to the Lovech Prison	14
1.3. Visit to the Pazardzhik Prison	25
1.4. Visit to the Plovdiv Investigation Detention Facility	31
1.5. Visit to the Belene Prison	34
1.6. Visit to the Sliven Prison	45
1.7. Visit to the Nova Zagora Investigation Detention Facility	52
1.8. Recommendations on the Ministry of Justice facilities	56
2. Ministry of Health facilities	58
2.1. <i>Background to the procedure under the Public Health Act and under the Criminal Procedure Code</i>	58
2.2. <i>Visit to the Karlukovo Psychiatric Hospital</i>	59
2.3. <i>Recommendations on the facilities for involuntary placement of mentally ill and mentally disabled persons</i>	67
3. Ministry of Education and Science facilities	68
3.1. <i>Background to the facilities for involuntary placement of delinquent children under the Ministry of Education</i>	68
3.2. <i>Visit to the Gabrovtsi Correctional School for Children</i>	69
3.3. <i>Recommendations on the Ministry of Education facilities</i>	73
4. Ministry of Labour and Social Policy facilities	74
4.1. <i>Background to the procedure of placement in social care homes for people with intellectual and mental disabilities</i>	74
4.2. <i>Visit to the Batoshevo Social Care Home</i>	76
4.3. <i>Visit to the Radovtsi Social Care Home</i>	80
4.4. <i>Recommendations on the Ministry of Labour facilities</i>	85
Summary of recommendations	87
Annex: List of delegation members	92

Introduction: Context and purpose of the visit

On 27 and 28 September 2004 representatives of the International Helsinki Federation for Human Rights (IHF) conducted a mission on monitoring places of detention in the Republic of Bulgaria. The mission was the third under the project “Preventing Torture in the Closed Institutions of Central and Eastern Europe”, financed by the European Commission. The project has eight partner organisations from Eastern and Western European countries. The leading partner in this project is the Bulgarian Helsinki Committee. The organisations include (in alphabetical order):

- Bulgarian Helsinki Committee (BHC)
- Greek Helsinki Monitor
- Helsinki Committee for Human Rights in Serbia
- Helsinki Committee for Human Rights in the Republic of Macedonia
- Helsinki Foundation for Human Rights in Poland
- Hungarian Helsinki Committee
- International Helsinki Federation for Human Rights (IHF)
- Moscow Helsinki Group

During the mission in Bulgaria a representative from the Association for the Prevention of Torture, a human rights organisation based in Geneva, Switzerland, took part in the visits. The list of delegation members is enclosed in the annex.

Six of the partner organisations work on monitoring places of detention in their own countries on a daily basis. Representatives of all organisations take part in monitoring the observance of human rights standards in the detention facilities in the countries of Eastern Europe.

The initial purpose of the mission was to monitor the respect for the human rights of the persons placed involuntarily in state institutions. The delegation based its monitoring on the international standards for the treatment of persons deprived of their liberty. In Bulgaria the mission was focused on four types of institutions:

- Institutions for confinement of persons sentenced for criminal offences or detained on suspicion for having committed an offence under the authority of the Ministry of Justice;
- Institutions for involuntary psychiatric hospitalisation for the purposes of active treatment of mentally ill under the authority of the Ministry of Health;
- Institutions for involuntary placement of delinquent children for the purposes of “compulsory education” under the authority of the Ministry of Education and Science;
- Institutions for involuntary placement of persons with developmental disabilities for the purposes of social care under the authority of the Ministry of Labour and Social Policy.

One of the major assumptions of the project partners is that openness of the detention facilities to domestic and international scrutiny by human rights NGOs and other civil society groups is a basic safeguard against ill treatment and other human rights violations. A number of international organisations recently came up with recommendations encouraging countries to allow visits by human

rights NGOs to places of detention.¹ Article 6 of the UN *Declaration on the Right and Responsibility of Individuals, Groups and Organs of Society to Promote and Protect Universally Recognized Human Rights and Fundamental Freedoms* provides that “Everyone has the right, individually and in association with others: ... [t]o know, seek, obtain, receive and hold information about all human rights and fundamental freedoms, including having access to information as to how those rights and freedoms are given effect in domestic legislative, judicial or administrative systems”.²

Bulgarian legislation does not provide explicitly for the possibility of human rights NGOs to carry out monitoring missions in places of detention. Meanwhile, the Bulgarian Helsinki Committee monitors all Bulgarian prisons regularly on the basis of an agreement with the Ministry of Justice. The IHF delegation visited the most typical closed institutions proposed by the BHC.

During the mission, the IHF delegation put together three monitoring teams comprising of 4-7 persons each. These teams visited up to two facilities a day. The level of support provided by the relevant authorities was different, ranging from supportive in some facilities to inadequate and hindering the delegation’s efforts to monitor in others. Almost one half of the IHF delegation members had sufficient knowledge of the Bulgarian language to establish communication with the authorities and the inmates. The other members were assisted with interpreters provided by the Bulgarian Helsinki Committee.

The IHF delegation always insists on conducting private interviews with inmates. Unfortunately, the delegation members were not able to do this in all the facilities it visited. Bulgarian legislation still preserves some outdated principles that do not allow contacts of remand prisoners with private individuals and groups, even for the purposes of human rights monitoring. In some establishments the directors and other staff members tried to control the team’s visit and prevent private conversations with inmates, especially when members of the delegations took interest in abuses of the authorities. An additional obstacle to the delegation’s mission was the incompetence of some of the staff members, who failed to answer delegation’s questions and to produce the necessary data.

In spite of all these difficulties, the IHF delegation was able to conduct meaningful research and to come up with important recommendations on both individual facilities and on the system as a whole. It will certainly appreciate the comments of the Bulgarian government and of other institutions and individuals on its findings and recommendations and is ready to follow up on them.

¹ Among them are the OSCE (Cf. *Supplementary Human Dimension Meeting on Prison Reform*, Vienna, 8-9 July 2002) and the African Commission on Human and Peoples’ Rights (Cf. *The Robben Island Guidelines*, October 2002).

² General Assembly resolution 53/144.

1. Ministry of Justice facilities

1.1. Background to the law and custody policy of the Ministry of Justice facilities

The legal status of remand and sentenced prisoners in Bulgaria is regulated by the *Law on the Execution of Penalties (LEP)*,³ the regulations for its application and the internal orders of the Ministry of Justice's Chief Directorate on the Execution of Penalties. While the LEP is an act that was passed in the late 1960s and, despite its numerous amendments, is based on an outdated philosophy, the *Regulations for the Implementation of the Law on the Execution of Penalties (RILEP)*⁴ are relatively new and to a certain extent (although by no means fully) compensate for some of the law's faults. In 2003 the Chief Directorate adopted an order⁵ that regulates the status of the remand prisoners in the investigation detention facilities.

The *Law on the Execution of Penalties* provides that execution of penalties cannot aim at causing physical suffering or humiliating the human dignity of the sentenced persons (Article 2, para. 2). It also envisages that the correctional effect of the sentence should be achieved in appropriate conditions ensuring the physical and mental health and respecting the human dignity of the prisoners (Article 8, para. 2.1).

The LEP defines the places for serving a sentence "deprivation of liberty" as prisons (for adults) and correctional facilities (for juveniles). Within prisons, prisons hostels of an open, transitional and closed type can be established to confine prisoners sentenced to different terms of imprisonment or prisoners who have served part of their sentence and have not been punished while in prison. Once confined in a certain type of correctional institution, the prisoner may be transferred to a different type of institution only by a decision of the Chief Directorate on the Execution of Penalties. According to the LEP, the accused persons who had been detained following the procedure provided by the *Code of Criminal Procedure* are to be placed in investigation detention facilities. But they can also be placed in prisons, correctional facilities and prison hostels (Article 10).

Up to 24 hours the persons who have been arrested by the police and still not accused can be detained either in the cells of the police stations or in the pre-trial detention facilities. If they are accused after that the prosecutor may detain them for up to 72 hours before they are brought to court, which imposes the security measure intended to guarantee their appearance at the trial. Under certain circumstances the court may impose "pre-trial detention". The latter normally lasts up to two months, but may be prolonged to six or nine months for investigation with a special permission of the District or the Chief Prosecutor.

The law, its regulations and the order for the internal rules in investigation detention facilities provide for the regime, segregation, disciplinary measures, the use of force and firearms, as well as the rights

³ *Law on the Execution of Penalties*, promulgated *State Gazette*, issue 30/15 April 1969, last amended *State Gazette*, issue 70/10 August 2004.

⁴ *Regulations on the Implementation of the Law on the Execution of Penalties*, prom. *State Gazette*, issue 97/4 December 1990, last amended *State Gazette*, issue 25/8 March 2002.

⁵ *Order No. L-8195 for the internal order in the pre-trial detention facilities*, issued on 28 November 2003 by the Chief Directorate for the Execution of Penalties at the Ministry of Justice.

and obligations of the remand prisoners. The rights of the detainees include, among others:

- The unrestricted right to see and communicate with their defence lawyers without the hearing, but within sight of the security personnel;
- To receive visits from relatives and other people with the permission of the body, conducting the investigation up to two times a month. The visits can last up to 45 minutes;
- To correspond in writing with persons and institutions;
- To have at least one of hour outdoor exercise (two hours for juveniles and pregnant women) a day;
- To receive two food parcels (up to five kg each) a month and parcels with personal belongings without limits;
- To be examined at least once a week by a physician;
- To wear their own clothes and shoes;
- To watch TV, to listen to the radio, to receive newspapers and magazines;
- To make two phone calls weekly of up to five minutes each;
- To practice their religion.

The law, however, envisages some unreasonable restrictions on the correspondence. It provides that all correspondence of the detainees, including the one with their lawyers, should be subject to routine censorship.

The *Order for the internal order in the investigation detention facilities* (Article 8) provides that all injuries on the body of a newly admitted detainee should be certified by a medical professional at the place of detention or by a general practitioner or a physician from the local emergency unit. The medical doctor should report in details about the character, the spot, the size and the specific characteristics of each injury, the statements of abuse given by the detainee and the medical conclusion. The prosecutor's office should be informed about these findings.

The law does not specifically provide for disciplinary measures for detainees placed in investigation detention facilities. The law only provides that, if not especially addressed in the law, all issues regarding detainees are regulated in the same way they are regulated regarding prisoners. Therefore, the detainees could be punished with the same punishments as prisoners, although this does not happen in practice. The only disciplinary measure mentioned specifically for the remand, but not for the sentenced persons in the prisons and investigation detention facilities is disciplinary solitary confinement cell under Article 130d of the LEP. This article provides that in prisons remand prisoners (but not sentenced prisoners) are kept in permanently locked premises with no right to participate in common events when:

1. There is a respective ruling by the prosecutor or the court, or
2. They flagrantly or systematically violate the established order, with which they threaten the security in the prison.

This isolation shall be implemented with a written order by the prison director and a copy of the order shall be sent to the prosecutor exercising supervision for legality.

The ruling of the prosecutor and the written order of the director of the prison can be appealed every month by the respective person before the district court.

The disciplinary punishments for sentenced prisoners imposed for breach of the established order and discipline or for non-fulfilment of labour and other obligations envisaged by law are:

- note with warning;
- extra cleaning duty – for a period of seven days;
- deprivation of the right to watch films or TV programmes or to participate in sports events – for a period of one month;
- reduction of the due sums envisaged by the regime for personal expenses up to 50% – for a term of one month;
- isolation in a punishment cell with the right to work – for a period of 14 days;
- isolation in a punishment cell without the right to work – for a period of 14 days;
- deprivation of the right to a home leave under Article 74, para. 2 for a period of one month;
- repealing of an award, which has not been used.⁶

Two isolations in a punishment cell of one and the same prisoner shall not be executed without an interruption of at least three days unless the sum of the two or more punishments is up to 20 days. (*Regulations*, Article 106). The law and the other regulations do not establish any limit on the total length of detention in a punishment cell during a specific period of time (e.g. one year). Thus, in lack of due process guarantees, it becomes possible that prisoners, disliked by the administration of the facility, spend months or even years in solitary confinement with short breaks between different isolations.

Those isolated in a punishment cell with the right to work shall not have the right to visits (LEP, Article 76a) and correspondence (*Regulations*, Article 103). Those isolated in a punishment cell without the right to work, apart from the restriction of the visits and correspondence shall not have the right to food parcels and money for personal needs. In determining the disciplinary punishment the character and the gravity of the committed offence shall be taken into account, as well as the attitude of the prisoner to it, his/her previous behaviour and health status (LEP, Article 77).

The conditions in the punishment cell and the belongings, which the punished can keep with them, are determined with an order of the Chief Directorate of the Execution of Penalties from 1995.⁷ According to this order, the cells should not be damp, they should have direct access to natural light, they should be constructed in a way that allows locking, and they should be heated and ventilated. The cells should be furnished with a wooden bunk bed or wooden platform placed at least 25 cm above the floor. The area per prisoner should be no less than 80/190 cm. Each prisoner should have a mattress. Each prisoner is allowed to keep a blanket or two (depending on the season) only during the night, underwear, a jacket, trousers, a hat, socks, shoes, a handkerchief, a towel, soap, a toothbrush and toothpaste. The prisoner is allowed only a 30-minute out-of-cell walk. Punishments are imposed by the director of the facility following a procedure that does not envisage any due process guarantees – the

⁶ Article 76, *Law on the Execution of Penalties*.

⁷ *Order 1-G31* from 29 June 1995 of the head of the Chief Directorate of the Execution of Penalties Zdravko Traykov.

prisoner's explanations must be heard by the director before issuing the punishment order (Article 79, LEP). Prisoners have the right to appeal the punishments in general to a higher administrative authority, and only for punishment with isolation in a punishment cell the prisoners have the right to appeal before the district court although the appeal does not suspend the execution of the punishment.

Article 37 of the LEP requires the penitentiary administration to conduct censorship on – with some exceptions – all prisoners' correspondence. Correspondence with the courts, the prosecutor's office, the investigation officers, the President, parliament, the Council of Ministers, the Ministry of Justice, the Ministry of Interior and the human rights bodies at the UN and the Council of Europe is excluded from censorship. All other correspondence, including correspondence with defence lawyers, is censored. The correspondence exempted from censorship is submitted to the prison authorities in sealed envelopes.

The *Law on the Execution of Penalties* (Article 33) and its *Regulations* (Article 58) provide for visits of relatives or other persons at least once a month for 30 minutes only on Sundays (or Saturdays subject to permission from the administration) following a schedule for each group of prisoners. Article 33 of the *LEP* provides that visits are to be conducted in the Bulgarian language. If the conversation between the visitors and the prisoner is conducted in a language that the administration does not understand, then the administration may be assisted by an interpreter to be paid for by the prisoner. If prisoners or visitors breach the rules of conduct, the administration may terminate the visit. These regulations have a negative effect on the visits to Turkish and Roma prisoners – who are overrepresented in Bulgarian prisons – as some of them do not speak Bulgarian well.

Prisoners who have good behaviour may be awarded up to five days home leave (LEP, Article 74, para. 1e). This award does not apply to prisoners on very strict and special regimes and to life prisoners. In addition to this possibility, the prisoners placed in transitory facilities can be awarded up to two days home leave every month. Prisoners placed in open and transitory facilities can be awarded a 12-hour leave outside the prison. All these awards are given by the prison director.

Prisoners are allowed to make phone calls to their close relatives. The director of the prison may forbid visits or correspondence with persons who have a negative impact on the prisoner, excluding spouses, children, siblings, and parents.

The prisoners are allowed at least one hour of outdoor exercise a day, to receive and keep money for personal needs, to work and to be educated while serving a sentence.

In addition to the disciplinary measures, the prisoners may be isolated administratively under Article 85 of the LEP. This measure is imposed “when necessary, for the prevention of escape, assault over the health and life of other persons, as well as other crimes, upon order of the Ministry of Justice”. Under this measure, the prisoner can be isolated in a single cell for a period of up to two months without the right to participate in collective events. In this case, if possible, the prisoner shall be given work in the cell or in another isolated place. The prisoner is not allowed to appeal this measure.

Another type of administrative isolation, envisaged by Article 85a of the LEP, may be imposed by the prison director on the prisoners who are on a strict or very strict regime. The latter may be placed in permanently locked premises under strengthened supervision and guard when they flagrantly or systematically violate the established order or exercise a negative influence on other prisoners, which

endangers the prison security. The order for placement shall be announced after hearing and against the prisoner's signature. This measure is subject to immediate termination when the grounds for its imposition are no longer valid. Every three months the need for imposition of the measure is reassessed. The isolated prisoners can appeal the order imposing this measure before the administrative authorities and the district court. The prosecutor exercising control on the legality in the respective prison shall be immediately informed about the measures under Articles 85 and 85a of the LEP.

Similar types of administrative isolation may be imposed on remand prisoners under Article 130g of the LEP. It provides that prison directors and directors of investigation detention facilities may order administrative isolation of a prisoner who "flagrantly and systematically violates the established order". These measures can be appealed before the district court every month.

According to the *Constitution* and the *Law on the Judiciary* the prosecutors in Bulgaria exercise control on the legality of all "punitive and other compulsory measures". They have powers to:

- Visit all places of detention without preliminary notice and to check all documents related to detention;
- Interview detainees and prisoners in private;
- Receive complaints and information from third parties;
- Order the administration of the prisons and places of detention to keep them informed about acts and measures it undertook or plans to undertake.

Each prison in Bulgaria has a special commission established under Article 17 of the LEP. The commission is chaired by the prison director and composed of prison officers, a judge from the district court, a representative from the municipal visiting committee, a probation officer and a psychologist. The commission decides on the changes of the prisoners' regime, on their transfer to other facilities and on placement of life prisoners in common dormitories. It also makes proposals to the courts for early conditional release of prisoners.

The predominant form of placement in the prisons and in the investigation detention facilities in Bulgaria is organised in large dormitories. Individual placement is used for punishment or for administrative isolation and only in exceptional cases. Thus, the Bulgarian system is the opposite of the requirements of the *UN Standard Minimum Rules for Treatment of Prisoners* or the *European Prison Rules*, i.e. that placement in individual cells is the predominant form of custody and any other system is used by exception or if the prisoner wishes to be placed together with other prisoners. This system was endorsed under communism and since its fall there has been no incentive to change it.

Since 2000, the crime rate in Bulgaria is on a constant decrease.⁸ Data on the recorded crime per 100 000 inhabitants puts Bulgaria among the countries with a relatively low crime compared to the advanced countries of Western Europe and North America.⁹ Contrary to these trends, the prison population is on a constant increase. At present it stands at around 11 000 prisoners, i.e. around 140 per 100 000 inhabitants and is much higher compared to the rates in the Western EU countries. Yet,

⁸ Cf. *Crime Trends in Bulgaria: Police Statistics and Victimization Surveys*, Sofia, CSD, 2005, p. 11.

⁹ *Ibid.*, p. 13. According to the UNODC data for the year 2000 Bulgaria had four to five times less crime compared to the USA and the advanced countries of Western Europe.

there is a wide-spread belief in Bulgarian society that the prisons are empty and that the criminal justice system is not working as it should to fill them.

1.2. Visit to the Lovech Prison

The IHF delegation visited the prison in the town of Lovech on 27 September 2004. The delegation had an initial meeting with the Director, and then it inspected the premises and had interviews with other members of the prison staff and with prisoners. The delegation began the visit at 9:50 a.m. The meeting with the Director lasted until 12:55 p.m., followed by a 45-minute lunch and afterwards the delegation inspected the premises of the prison until 5:45 p.m. The delegation could talk privately with sentenced prisoners and with staff members.

1.2.1. General Information

The Director, Marin Kalchevski, has been a prison officer since 1981. In 2003 he was appointed Director of the Lovech Prison, where he used to work as head of the security department. He has graduated from law school and the police academy.

The director's office was modestly furnished. The furniture was old and worn-out. However, his office was the only air-conditioned room in the entire prison. The ceiling was made of wood carved by prisoners. The Director had no PC; the only computer the delegation saw was the one in his secretary's office. There was no access to Internet. No books or legal files were to be seen in the director's office. Small flags of NATO, the EU and Bulgaria were placed behind the desk.

The Director said he was informed about the Council of Europe *Recommendation (2003)23* of the Committee of Ministers to member-states on the management by prison administrations of life-sentenced and other long-term prisoners. The text, he explained, has not been translated into Bulgarian.

1.2.2. Categories of inmates, segregation and its purpose

The prison in Lovech is one of the biggest in Bulgaria. On the day of the visit the prison population totalled 1 291 prisoners. The main prison building in the town of Lovech (built in 1927) accommodated 730 prisoners (with a capacity of 410). The closed hostel in the town of Troyan housed 448 prisoners (with a capacity of 162). Seventy-nine prisoners were accommodated in the Poligona Prison Hostel (semi-open), the capacity of which was 52. The open prison hostel in the town of Veliko Turnovo housed 34 prisoners (with a capacity of 46). Of the total prison population, 248 prisoners were not sentenced.

The basic categorization that was taken into consideration when the prisoners were accommodated to different prison facilities was into remand, sentenced and recidivists. By law the open prison facility in Veliko Turnovo accommodates first-time offenders sentenced to up to three years of imprisonment. However, during the visit some prisoners there were serving sentences of four and even five years. The Poligona Hostel was supposed to house first-time offenders with sentences under five years. The Troyan Closed Hostel housed prisoners sentenced from five to ten years of imprisonment. The prisoners housed in the main building were classified into three groups:

- i. Prisoners sentenced to life imprisonment with or without a possibility for substitution of their terms;
- ii. Prisoners sentenced with long sentences (20-30 years of imprisonment);
- iii. Recidivists with up to one-year sentences.

The IHF delegation visited only the main building in Lovech, i.e. the facility with the harshest regime housing prisoners sentenced to longest terms of imprisonment. It did not visit the hostels.

All in all, 493 prisoners in Lovech were first-time offenders. Out of them, 12 prisoners were serving life sentences, six of which without the possibility for substitution of their terms. Many prisoners were serving 20-30 year sentences. Two foreign nationals were detained on remand on the day of the visit. One was Turkish and the other one – Hungarian.

Newcomers in Lovech were firstly placed in the admission facility where they were kept for a period of 14-30 days. While in the admission facility, prisoners undergo medical examinations, they have their medical records opened, they are instructed in house rules by a social worker, they obtain information about the category allocated to them. As far as the delegation could see, the prison did not practice segregation based on national, ethnic or religious criteria.

The LEP with its subsequent amendments from 1995 and 2002 regulates the status of prisoners under life sentences. Article 127b provides that prisoners sentenced to life without the right to conditional release shall not serve their time under light/open or general regimes. Such prisoners are placed under very strict or strict regimes and work in isolation (Article 127b/4/).

1.2.3. Material conditions and hygiene

On average, 2.75 sq. m. of floor space is available to each prisoner in the main building of the Lovech Prison, far below the international standards. Bulgarian penitentiary legislation does not contain a provision regulating the minimum space per inmate in cells. The IHF delegation was told that the number of inmates in Lovech would grow by some 100 newcomers in the near future. The courts that have reopened after the summer break were expected to put on trial people who were expected to end up in the prison.

The delegation saw that most dormitories were overcrowded. Almost every dormitory accommodated 10-16 prisoners. Prisoners had a bed of their own, but not all of them were provided with enough blankets, pillows and sheets. Bunk beds were often stacked at three levels. The dormitories were poorly furnished. The number of cupboards or lockers – few of which could be locked – did not meet the needs of accommodated prisoners. Therefore, prisoners had to keep their belongings in bags, which they put under their beds. The number of chairs was insufficient.

Dormitories were so constructed that they allowed some access of natural light. However, artificial light was inadequate and prisoners could not read under it. The delegation observed that only one bulb emanating poor light was functioning in each dormitory in spite of the fact that all were wired.

The prison did not have a ventilation system. Dormitories were ventilated only through the windows. The delegation noticed that a number of windows were broken. Some were covered with plastic plates.

According to interviewed prisoners, the central heating system operates for several hours only, rather than throughout the day. Many complained of cold during wintertime. Blankets were available, but were too thin to make up for the low temperature. The prison Director and other officers told the delegation that inmates had not complained about the heating.

Toilet facilities were in a deplorable condition. They were so constructed that they offered no privacy. Only one of the two hot-water boilers was operating. The air in the dormitories smelled badly.

1.2.3.1. Special Section XI

Special Section XI had six cells. At the time of the delegation's visit, the prison guard in charge of the section wore an unzipped, worn-out bulletproof jacket.

Cell no. 23: A door and an iron grid made the cell's entrance. Though barred, windows were also covered with wire nets. The floor was made of concrete that was visibly cracked. The cell was furnished with five dilapidated metal beds, one table, two chairs and one small radiator. There was no sanitary facility. The cell's measurements are 4.1 x 3.22 m, i.e. 2.64 sq. m. of floor space per prisoner. It was supposed to accommodate five inmates. However, only two beds were occupied at the time of the delegation's visit. One of the two inmates was asleep/pretending to sleep. The other prisoner, M., had a broken arm. He had filed a complaint to the ECHR in Strasbourg. He complained that prison authorities refused to forward his grievance. His arm was broken in a fight with a prisoner serving a life sentence. M. did not have a lawyer. He showed the delegation his complaint to the office of the regional public prosecutor in May 2004. The reply came on September 24 (case no. 547/04). The public prosecutor's office refused to institute criminal proceedings. M. said that the fight took place inside the cell. He and the other prisoner kept fighting until prison guards separated them. The fight broke out because the life-sentenced prisoner did not want to turn down the TV. The Director punished both inmates equally: he decreased by 15 percent the amount they were entitled to spend in the prison canteen over the next month. According to the interviewed prisoners, a guard makes the rounds in corridor in 10-15 minute intervals, but never enters the cell.

1.2.3.2. Section III

Cell no. 41: The cell accommodated eight inmates. They were all Bulgarian citizens and all of them worked. The cell was kept open during the day. According to the prisoners who have spent almost two years there, neither the prison Director, nor a public prosecutor had ever entered the cell. A social worker visits them once a day. They were allowed to talk to a psychologist once every three months. A prisoner who had served seven years and had three left, was the "oldest" resident. His name is V. F. and he had filed a complaint to the ECHR in Strasbourg. Another prisoner, I. C., of Romani origin, complained of physical abuse while in police custody.

The measurements of the cell no. 41 were 4.01 x 4.40 m, which amounted to 2.21 sq. m. per prisoner. Eight prisoners shared two lockers. They had a TV set of their own. A low wall separated the toilet from the rest of the cell. Tap water, however, was available only in the corridor for three hours in the morning. At the time of the delegation's visit the temperature in the cell was 22.4°C and the humidity – 45%.

Cell no. 42: The air in the cell was stuffier than in other cells. Even more predominant was the stench of urine. Ruined window frames did not shut properly. The inmates said that the temperature in the cell in wintertime was 5°C below zero and 45-50°C in July and August, when the prisoners could hardly breathe. Dilapidated metal beds (190x77 cm) were definitely too short for the prisoners higher than 180 cm. The cell's measurements were 5 x 8 m. The ceiling was 270 cm high. While Bulgarians actively participated in the conversations with the delegation, the Romani inmates were hiding behind their backs. The bedclothes in the cell had not been changed for 2 weeks. Inmates were given a piece of soap, which had to last them for 2 months. They used it for bathing and for washing their clothes. Their families had to provide them with shoes. Prisoners' clothes were shabby, including those delivered from the army supplies.

The prisoners in this section did not work. One of them, a man of Romani origin, had asked to be given some work seven times. According to the interviewed prisoners, prisoners had to use their connections in the ranks of prison officers (or bribe them with cigarettes) to be offered a job.

1.2.4. Nutrition

According to the Director, the daily food allowance from the state budget was 1–1.15 BGN (0.51 EUR-0.59 EUR) per prisoner. Daily meals provided to hospitalised prisoners amounted to 1.20 or 1.30 BGN (0.62 EUR or 0.67 EUR) per patient. However, the quoted food budget was approximate, given that some food was produced in the prison. But as the prison bought food at retail prices, the actual daily food allowance was somewhat higher.

According to the prison Director, prisoners' special dietary needs were taken into consideration. Lists of dietary regimes were made for each group of such inmates. However, prisoners complained that diets were the same for all inmates, including diabetics. One prisoner with gastric ulcer told the delegation that his "dietary menu" for lunch was "rice without the sausage [served to other inmates]".

There was a canteen where prisoners could buy food if they had money. Some of them received money from their relatives. Some were paid for the work they performed in prison. The inmates who worked were allowed to shop in the canteen twice a month. Those who received money from home could do their shopping once a week. The canteen sold soft drinks. Drinks were not allowed in food parcels sent to some prisoners by their families.

Most inmates complained of the quality and quantity of food. Fresh vegetables, meat, milk and dairy products were hardly ever on the menu. Prisoners punished with placement in disciplinary cells said their daily menus were composed of two slices of bread and a teaspoon of margarine for breakfast, a bowl (approximately 250 ml) of lentil soup or potatoes for lunch, and a bowl of soup for dinner.

1.2.5. Medical care

1.2.5.1. The general ward

The Lovech prison has a hospital built in 1967. According to the prison authorities, the hospital had been renovated and enlarged and the tuberculosis ward was under construction. On the day of the visit, 47 patients were hospitalised in the pulmonary ward.

The hospital was under the jurisdiction of the Ministry of Justice, rather than the Ministry of Health. In keeping with the agreement signed with the National Health Insurance Fund, outside specialists, too, paid visits to the prison.

The hospital employed seven doctors (two psychiatrists, one pulmonary specialist, two internists and one radiologist), eight paramedics, about 20 nurses, one dentist, one cook and one ambulance driver. No member of the medical staff worked in the outside community or ran a private practice. All medical officers were considered public servants and the law prohibited them from working at other posts. The dentist worked full time. However, his services were available to prisoners on some days only, either in mornings or afternoons.

The hospital worked around the clock. At least one doctor or one paramedic was present on prison premises at all times. Sick inmates were hospitalised in rooms that did not meet even basic hygiene standards. They were dark and did not allow sufficient access of natural light. Artificial light was inappropriate and patients could not read by it. The walls were badly ruined. The concrete floors were unkempt, dirty and cold. Some windows were not fitted with glass. The rooms were furnished with beds only – there were no tables, cupboards or chairs. The furniture in the two doctors' offices was old and dilapidated. The walls were dirty. Deplorable oilcloth covered the floor. Prisoners' medical records were scattered all over the place. A few outdated medical handbooks were placed on the shelves.

A record of medical examinations with 7 675 entries made as of January 1, 2004 was kept in the office. Each entry contained the date on which medical examination was conducted, the patient's name, the doctor's diagnosis, the prescribed treatment, and, occasionally, some recommendations.

Each prisoner was medically examined upon arrival. For special tests, such as those for hepatitis B and C and syphilis, patients were driven to the town hospital. However, patients apparently did not undergo these tests regularly. HIV tests were not obligatory. They were conducted with the consent of the prisoners and only when there were "visible signs of the disease" or when the prisoners had lead a "very active sex life." This might explain why no HIV positive patient had been registered up until then.

According to the medical staff, when a prisoner wanted to be examined, he had to first inform a guard about his problem. Then, the guards reported to the doctors. According to the staff, in these cases the prisoner would normally be examined the same day.

Guards were sometimes present during the medical examination. Regarding emergency treatment, prisoners were immediately taken to the emergency ward if it is impossible for a medical officer to intervene *in situ*. Approximately, 50 inmates were medically examined each day.

The prison has had a problem with tuberculosis for years. According to the medical staff, in 80% of the cases of tuberculosis the prisoners came to the prison already sick upon admission. Thanks to a newly introduced anti-tuberculosis programme, the number of sick inmates had been reduced.

Information from the prison authorities revealed that in 2003, doctors prohibited confinement in disciplinary solitary cells of 8-10 inmates for health reasons. In 2004, this number was five.

The prison director pinpointed that drug addiction among inmates was turning into a pressing problem, mostly affecting young adults (up to 30 years old). Apparently, no measures had been taken to deal with this category of patients who needed special treatment.

According to information obtained from the staff, medications were supplied by private companies. Drugs were prescribed by doctors only. The delegation saw a small refrigerator, almost empty shelves and scant and outdated medical instruments.

Injuries were entered in daily registers, as well as in the prisoner's medical records. All injuries were detailed and copies were forwarded to the social worker. The procedure was the same regardless of whether the prisoner was injured in the course of a sports activity or from the use of force by guards. The procedure was slightly different when it came to occupational injuries. An occupational inspector was obliged to report each in writing. Regarding injuries inflicted by prison guards, they too were entered in prisoners' medical records. Medical officers reported such injuries to the prison Director only when specifically ordered to. No daily registers of these incidents were kept. Medical officers believed that they were obliged to deal with inter-prison violence just by offering medical aid and registering the injuries.

In 2003, five cases of suicide attempts were registered in the prison. In 2004, there were two such cases. Eight prisoners died in 2003 from cancer, heart attacks and strokes. Six died in the prison and two died after they were released. In 2004, the prison registered 12 cases of self-mutilation and 15 attempted self-mutilations. All these prisoners were consulted by a psychologist. According to the medical staff, on average there were 6-7 rapes in the prison every year. They were investigated by the prosecutors.

1.2.5.2. The Psychiatric Ward

There were 44 patients in the psychiatric ward. These were prisoners who developed psychiatric conditions while in prison. The entire ward was utterly unkempt and neglected. The concrete floor was totally ruined. The material conditions in that ward were by far worse than those the delegation saw in other prison premises.

Four patients were accommodated in a six-bed room, which reeked of urine. The patients looked unattended. The ward's dining room was furnished with seven tables. Only one toilet facility with seven squatter toilets was available to the patients. The facility was dirty, cold, wet and stunk. Patients had no access to the toilets during the night and had to use buckets instead.

1.2.6. Work in the prison

The type of prison work available to prisoners depended on their treatment regimes, conduct and professional competence. However, there were not enough jobs for all interested inmates. According to the prison Director, approximately half of the inmates from the main building were engaged in prison work. Work was not mandatory, but everybody wanted to work in order to decrease the days of punishment (see below). In the past the administration was obliged to ensure work for everybody, but this was not the case any more as there was not enough work.

Prisoners mostly worked in the furniture manufacturing unit, which produces furniture for the domestic market and for export to Austria and Germany. Another facility that engages prisoners produces cleaning sponges. Prisoners are paid for their work as a minimum the amount that equals the minimal monthly wage guaranteed under Bulgarian law. On the day of the visit it was 120 BGN (62 EUR). The prisoners serving their time under normal and strict regimes received only 50% of this amount. The other half went to a special penitentiary fund.

However, in Bulgaria major privileges granted to working prisoners derive from the system of counting two days spent at work as three days serving of imprisonment. Prisoners nickname these two days “crosses,” as that’s how they cross out an extra day from their term of imprisonment. The interviewed prisoners complained of unequal employment opportunities. According to them, prison work is a privilege given only to influential inmates who use their connections or have money for bribes.

1.2.7. Discipline, punishment and isolation

The prison had a maximum security wing, which accommodated prisoners considered to present a security risk. Such prisoners were generally classified in four groups:

- Prisoners punished with an isolation in a disciplinary cell for up to 14 days;
- Prisoners who were administratively isolated by an order of the Ministry of Justice to prevent their escape, assault over the health and life of other persons;
- Prisoners who were administratively isolated by an order of the prison Director who flagrantly or systematically breach the established order or exercise a negative influence on other prisoners;
- Remand prisoners who were isolated by a prosecutor’s order or by an order of the prison Director for breaching systematically the order in the prison.

The delegation first saw two prisoners from the second group. One of them had been punished for having attempted to kill an inmate. The other was mentally disturbed and avoided the company of other people. Then the delegation visited cell no. 5, where it found two prisoners from the third group isolated by an order of the prison Director. A double door partitioned the cell and the corridor. The second door had a glassed opening. As it was almost impossible to interview the two inmates through such screen, the delegation asked the guards to open it. There it met T. A., imprisoned for 18 years, who was isolated in the cell since 18 August 2004. The other prisoner in the cell, S. M., had been sentenced to 20 years imprisonment. Both had been placed in isolation for systematic violation of the prison regime. The prisoners told the delegation that a prison doctor who was supposed to examine them periodically, did this through the glassed opening. T. A. complained about the rats plaguing the entire prison. The prison Director received S. M. a week after he had been isolated, on 17 July 2004. Both prisoners said that they did not have access to newspapers, radio, television or books, and were not entitled to daily walks. Just a day before, for instance, they were served a piece of bread, a teaspoon of margarine and tea for breakfast, a cup of soup for lunch, and beans and potatoes for supper. They complained of not having free access to drinking water. Though the delegation visited the cell in the early afternoon, it was very dark inside.

There were four remand prisoners in Group IV whom the delegation could not meet.

In the event of a serious disciplinary infringement, disciplinary measures were taken against a prisoner the same day. For lesser breaches of discipline prisoners were punished a day later. A prisoner punished with a disciplinary could lodge a complaint before the court although the complaint did not stop the execution of the decision. In 2004, the court overturned one disciplinary punishment for procedural reasons.

All isolation cells were in deplorable condition. The furniture was old and run down. There were no beds and bedclothes. The hygiene was totally inappropriate, and there was no tap water or toilets. The prisoners either used buckets or called the guards to escort them to the toilets. The temperature and artificial light were inadequate.

According to the prison records, 160 inmates had been punished with punishment cells since the beginning of 2004, many of them two or more times. The prison administration provided the IHF delegation with the following statistics of offences, punishments imposed and the number of prisoners who underwent punishments:

Type of offence	Total no. of offences	Imposed punishments	No. of punished prisoners
Bringing in, preparation or use of alcohol	8	Isolation in solitary confinement without work – 6	6
Refusal to work	5	Isolation in solitary confinement without work – 5	3
Offences related to the work process	3	Extra cleaning duty – 1 Isolation in solitary confinement without work – 1	2
Gambling	13	Reprimand – 1 Extra cleaning duty – 8 Reduction of wage – 1	10
Escape from prison	1	Isolation in solitary confinement without work – 1	1
Assault	79	Reprimand – 1 Extra cleaning duty – 20 Reduction of wage – 15 Isolation in solitary confinement without work – 40	54
Homosexuality	2	Extra cleaning duty – 2	2
Thefts, fraud	39	Extra cleaning duty – 8 Reduction of wage – 9 Isolation in solitary confinement with work – 2 Isolation in solitary confinement without work – 18	27

Attempts to take out or bring in letters and other unauthorized objects	139	Reprimand – 3 Extra cleaning duty – 67 Reduction of wage – 29 Isolation in solitary confinement without work – 15 Deprivation of the right to a leave – 1	93
Unauthorized relationships and visits	44	Reprimand – 1 Extra cleaning duty – 15 Reduction of wage – 21 Isolation in solitary confinement without work – 4	27
Failure to return from home leave	4	Isolation in solitary confinement without work – 4	4
Insubordination and failure to carry out an order	101	Reprimand – 10 Extra cleaning duty - 22 Reduction of wage – 22 Isolation in solitary confinement with work – 3 Isolation in solitary confinement without work – 31	61
Other offences	7	Extra cleaning duty - 2 Reduction of wage – 1 Isolation in solitary confinement without work – 4	2
TOTAL OFFENCES:	445	Reprimand – 16 Extra cleaning duty – 145 Reduction of wage – 98 Isolation in solitary confinement with work – 5 Isolation in solitary confinement without work – 129 Deprivation of the right to a leave – 1	292, 37 of which remand prisoners

1.2.8. Use of force and arms

The delegation was told that in 2004 guards used physical force against prisoners on 25-30 occasions. All such cases were registered and detailed in daily records of disciplinary offences. According to the prison Director, a medical doctor examined the injured prisoners and entered the findings in the daily record. Disciplinary proceedings on the use of force were instituted against only two prison officers. No firearms had been used against prisoners over the past two years.

Prisoners, however, told the delegation that doctors did not record their injuries inflicted by the guards. “How is it possible that an aggressive or agitated prisoner, who causes trouble and is beaten with truncheons and dragged down corridors and stairs to a disciplinary cell, does not even have a scrap on his wrist?” wondered a prisoner. According to the prison Director, no prisoner had complained of excessive use of force by guards. However, when asked to be more precise, he admitted that in 2003

four complaints about harassment and battery were lodged to the military prosecutors and two complaints were lodged in 2004.

The delegation was told by prison officers that guards promptly intervened in the event of inter-prisoner violence. Disciplinary measures were taken against those considered “guilty.” They were punished mostly by confinement in disciplinary cells. If there was a danger that a conflict would be resumed once such prisoners were back in their dormitories, they were kept separated without any possibility of physical contact.

1.2.9. Contacts with the outside world

Prisoners are entitled to two 30-minute visits per month. They can also get visits on national holidays. However, over 50% of the prisoners in Lovech did not have any visits. All visits were supervised by guards. In 2004, one visitor was deprived of visits as a punishment, as he attempted to smuggle in a mobile phone. The prison Director seemed rather surprised when the IHF delegation members asked him whether Muslims were allowed to receive additional visits on their religious holidays. As religious holidays were not recognized as national holidays, such a practice has apparently never been discussed.

Prisoners could be released for short periods of time in case of family deaths. In these cases, the prosecutors were solely in charge of deciding to grant them up to seven-days’ leave. Five such cases were registered in 2003.

No private rooms have been set up for spousal visits. Moreover, prisoners and their visitors were separated by a physical barrier. Only in exceptional circumstances were children under 16 allowed to reach out and touch their father.

All prisoners’ letters, including those to their lawyers, were censored with the exception of the letters to some state authorities. In 2003 prisoners’ correspondence in Lovech was banned in two cases. Prisoners were allowed to make five-minute phone calls twice a month. All phone calls were supervised. Although the prison Director emphasized that the procedure should be made more liberal, the delegation noticed only one phone booth in the entire prison, and even this was locked up.

1.2.10. Activities

By law prisoners are entitled to up to one hour of outdoor exercise. Some interviewed inmates, however, reported that their daily outdoor stay lasted 30-45 minutes. According to the prison regulations, some prisoners under lighter treatment regimes are allowed to walk along corridors from 9 to 10 a.m. and from 6 to 7 p.m.

The prison employed 16 full-time officers in charge of social activities (four psychologists and 12 social workers). One officer was in charge of around 100 prisoners. In the opinion of the delegation, a ratio like this hardly allows for any serious group or individual treatment. These officers do not wear uniforms.

The prison school provides access to elementary and secondary school education. In total, 102 prisoners, some of whom came from other prisons, attended the prison school. Their distribution by educational degrees was as follows:

- Elementary (1 – 4 class) – 29 prisoners
- Intermediate (5 – 8 class) – 25 prisoners
- Secondary (9 – 12 class) – 48 prisoners

About 80% of the students finished the academic year.

The prison administration also organised courses of vocational training for carpenters.

The delegation found the prison library closed. At its request, a guard brought the keys to it. The library was located in a small room (about 12 square meters) and was stocked with some 1 500 books. New books were not supplied, nor were there copies of newly enforced laws. Around 300-400 prisoners were regular readers.

Once a month religious services took place in the prison chapel of the Eastern Orthodox Church. The chapel could accommodate up to 15 prisoners. Prisoners did not receive pastoral visits in private. An imam had never visited the Muslim prisoners. The deputy Director could not even tell whether there were Muslim prisoners at all.

1.2.11. Inspections

According to the prison administration, the CPT visited the Lovech Prison hospital on two occasions, paying special attention to persons with mental disabilities. Some CPT recommendations had been implemented immediately. As for the other recommendations, they needed extra funds, which were difficult to obtain.

The Central Prison Administration conducted regular inspections of the prisons. Usually, these inspections took place once every two or three months. In 2004, no sanctions or recommendations resulted from inspections.

The Deputy Prosecutor of the Lovech district supervised the lawfulness of execution of penalties. He also participated in the work of the commissions deciding paroles and prisoners' categorization. According to Bulgarian law, the Prosecutor is entitled to meet all prisoners in private, including those who have lodged complaints. He, however, rarely did this in the Lovech Prison.

Over the past eight years not a single legal action had been taken against the prison. In the past 14 years, court officers have visited the prison only twice. These facts, if true, indicate the following:

- Prisoners do not believe in the efficiency of the legal means provided by the courts;
- Prisoners were afraid that their grievances would provoke retribution of prison guards and/or their informers;
- Prisoners were either poor or insufficiently educated to lodge complaints. On the other hand, non-governmental organisations (local and Sofia-based) dealing with human rights and capable of acting on prisoners' behalf were not much concerned with this aspect of prison life.

According to the prison Director, only two prisoners had filed complaints to the European Court of Human Rights in Strasbourg. One of the complaints was filed by a prisoner serving a life sentence and the other came from a prisoner who had been subject to ill-treatment during investigation detention.

1.3. Visit to the Pazardzhik Prison

On 27 September 2004 the IHF delegation visited the Pazardzhik Prison and spent six hours there. The delegation had a short conversation with the prison Director, Mr. Vesselin Kotsev, after which it inspected the premises. It had the opportunity to interview sentenced prisoners in private and to see some documents. In general, the prison authorities were cooperative. The delegation members read in advance the most recent report of the Bulgarian Helsinki Committee on the Pazardzhik Prison from 9 May 2003 and were able to compare the situation in the prison with the BHC findings.

1.3.1. General information

The prison in Pazardzhik is old. It was built in 1877. A new building was constructed in 1950. Back then it was a relatively modern prison facility in the Balkans. According to the inmates, there is a need for a bigger building. The last major reconstruction took place in 1974. The facility has local heating and lavatories. The heating was reasonable – it was using natural gas and was relatively cheap and therefore could maintain appropriate temperature during the winter. After the major reconstruction 80% of the cells were supplied with toilet facilities. Only those cells, which could not be reconstructed, remained without toilets (20%). The last cell renovation was in 2000-2001 and there had been no budget for another one that was planned for 2003-2004.

The prison in Pazardzhik is a male facility for recidivists. On the day of visit there were 690 prisoners. On average, it offered 4 sq. m. per capita. On the basis of a capacity designed to offer 6 sq. m. per capita it should accommodate 450 inmates. Pazardzhik Prison was one of the very few prisons in Bulgaria, which had its prison population reduced over the past four years. In 2000 it had 1000 inmates and in May 2003, during the BHC visit, it had 798 inmates.

The facility served six regions at the time of the visit. It used to serve seven regions until May 2003, when the Sliven region, which is believed to have a relatively high crime rate, was redirected to another prison. Although the prison is mainly for recidivists, there are some 10% first-time offenders. These are inmates serving sentences of five years and over for heavy crimes.

1.3.2. Categories of inmates, segregation and its purpose

All prisoners in Pazardzhik are Bulgarian nationals. The last statistics from 2003 revealed that the prison had 330 Bulgarians, 350 Roma, 118 Turkish and 7 others. There was a case of an inmate with a Bulgarian father and a Russian mother, who in spite of having a Bulgarian passport, claimed he was Russian.

As of 30 August 2004, there were 11 accused (the youngest one born in 1984) and 36 defendants (a total of 47 out of 690). The periods of stay for those defendants ranged between three and five years, which included the period of the appeal. The longest period of stay for an accused has been since 7

July 2004. The prison is obliged to produce statistics every three months and send them to the prosecutor.

Upon admission to prison, detainees are sent to a special room, where the prison personnel check their belongings, clothes and luggage. They also examined by a doctor. The admissions department has three rooms – a bathroom, a room where newly-admitted detainees are examined, and a room where are given their prison clothes.

1.3.3. Material conditions and hygiene

The prison had a central heating system. A cell for sentenced prisoners (first-time offenders) measured app. 20-25 sq. m. and had 11 beds. The ceiling was 2.5 m from the floor. On the day of the visit, there were nine prisoners in it. The natural light was sufficient; the artificial light was adequate for reading and writing after dark. This cell had two TV sets, which belonged to the prisoners.

The next cell the IHF delegation visited was intended for 11 people and had 30 sq. m. of living space. The ventilation was good, all windows could be opened and the natural light was sufficient. But there were only three light bulbs and it could be rather dark in the evenings. Some of the inmates were drug addicts, but there was no possibility to place them in a special medical unit and no possibility to sent them to a psychiatrist. The toilet was in a separate room, equipped with a small sink. All prisoners were wearing their own clothes. Both cells were in poor condition and in need of repair.

Another cell, which the delegation visited in the unit for recidivists, was 50 sq. m. and accommodated 20 people. The inmate with the longest sentence was a young man serving a 15-year sentence. The cell had a toilet in a separate small room. The access to natural light was good and the windows were large enough. As for artificial light, there were only three light bulbs lamps in the cell, and it was obvious that they were not sufficient for such a large room. The floors were concrete and during winter it was probably very cold inside. There was only one radiator in the cell. Many windows had no glasses and overall the conditions were inhuman. Prisoners had to block windows with whatever they could find.

The punishment cells in the high security corridor measured 3.5 x 2.7 m. All windows were barred. There were no beds or chairs. The mattresses lay on wooden platforms, raised 30 cm from the floor.

Free access to toilet was available in the morning and in the evening for 15 minutes. During the day, the prisoners had to ask for special permission to go to the toilet. Taking a shower was allowed once a week. On the day of the visit the IHF delegation saw three persons in three cells. The delegation measured the lightening, the temperature, the noise and the humidity in one of the cells. They were respectively: lightening – 25-30 Lux; temperature – 23.5°C; noise – 75 dB; humidity – 70%.

Smoking was allowed in the cells, but there was no possibility to separate smokers from non-smokers. Every prisoner could buy up to 30 packs of cigarettes a month.

The radio was centralized and it was impossible to change the frequency. Prisoners were allowed to have TV sets in the cells and watch them during the day. The electricity was switched off at 10 p.m., with the exception for holidays, Olympic games and other sports championships. Inmates were allowed one immersion heater per cell. Every corridor had one hot water boiler. Each bathroom facility had 12 showers. The inmates took a shower once a week (when there was also hot water),

while the ones who worked outside the prison could shower every evening after work in the summer (this did not apply to the inmates working inside the prison).

1.3.4. Nutrition

According to the Director, the ideal daily food allowance per capita would be 2.20-2.50 BGN (1.13-1.28 EUR). This is almost twice below the requirements of the 1994 *Decree No. 14* on the physiological norms of nutrition. Yet, the prison budget allows only for 1.19 BGN daily (0.61 EUR), with an additional 0.32 BGN (0.16 EUR) for working inmates. In 2004, the annual budget for food was approximately 320 000 BGN (164 103 EUR), 233 917 BGN of which from the prison budget and the remaining – from sub-contracted by the central penitentiary administration deliveries.

There is no special diet for Muslims. No one had asked for vegetarian food and it would have been very difficult to provide. The prison administration tried to observe diets based on medical indications. There were special diets for inmates with diabetes and ulcer. During the first three months after being discharged from hospital, prisoners suffering from TB were put on a special diet, which consisted of one extra egg and a piece of cheese a day.

Most prisoners interviewed by the delegation complained of the quality and quantity of the food. They said that they contributed to their diet with the food parcels they were allowed to receive every week.

The canteen was one for all categories of prisoners, with the exception of those in the high security corridor. The food, however, was the same for all prisoners. Prisoners had to eat in shifts, as the canteen could fit 150 prisoners at a time. The IHF delegation found that the lighting in the canteen was insufficient.

1.3.5. Medical care

The medical department consists of three rooms – a dentist's room, a room for examinations, and an internal room. There was also a pharmacy. The medical department employed one doctor, one paramedic, one dentist and two orderlies (inmates were employed for this job). The position of the psychiatrist was vacant.

The dentist's room was clean and equipped with the necessary medical equipment. The doctor worked for six hours every day and, according to documents, treated 15-20 people daily. He was not present on the day of the visit and the delegation was not able to interview him.

Tuberculosis is a special concern in the prison. The number of prisoners afflicted with the disease has increased in recent years, but the last examination and fluorographic screening was carried out in 2003. Those infected were sent to the special medical department and then to the hospital in the Lovech Prison. Upon their return from the hospital they were placed with other prisoners if there was a written agreement by a doctor. According to medical data, in 2004 there were 20 people afflicted with TB. The total budget for treatment of prisoners in 2004 was 7 432 EUR (including dental care).

According to the medical staff and the available documentation there were no HIV positive prisoners, although no special tests had been performed. In 2003 there were one or two cases of hepatitis C.

Since the inmates did not undergo any medical examinations in prison, the only source of information were their past medical records.

According to the available data, there were 80 prisoners sentenced for possession and distribution of drugs. Normally, in such a contingent there are always some prisoners who are drug addicts. The IHF delegation asked the paramedic on duty whether there was any special treatment available for drug addicts. The answer was that such people existed, but they did not need special medication or treatment. They were only provided with consultations. The delegation doubts very much that this is sufficient.

The prison medical staff is appointed and controlled by the Ministry of Justice. Relationships with the Ministry of Health are almost non-existent. The prison needs a psychiatrist, however the prison Director's attempts to recruit one failed. The level of remuneration in the prison is low and once medical professionals take a job inside the prison they are not allowed to work outside the prison. Financially, it was obviously not a good choice for doctors to take a prison job.

One prisoner died in the prison in 2004. He had a stomach tumour and was transferred to the hospital, but it was not possible to treat him because of the progression of the disease. His sentence was terminated and his relatives sent him to another hospital, where he died a fortnight later. There had been one case of a heart attack in 2004. Three years ago there had been a suicide by hanging in the prison.

1.3.6. Work in the prison

Permanent jobs in the Pazardzhik Prison are apparently scarce. Prisoners are engaged in shoe making from time to time. Permanent jobs inside the prison (e.g. as a cook) are the most wanted. Those placed in the hostels could work outside the prison without supervision by the guards.

The share of working prisoners has decreased. In 2003, up to 70% of the prisoners had worked during periods of highest employment (this figure includes seasonal work), while on the day of the visit the total number of working prisoners did not exceed 25%-30%.

According to Article 64 of the LEP, the prisoners apply for a job before the social inspector and the medical staff who decide whether a particular prisoner can work. The working inmates get a medical insurance, but there is no pension scheme. According to the LEP and the *Code of Criminal Procedure*, two working days count as three days of serving the sentence, which means it influences earlier release. Despite this there was no judicial review of the decisions to be granted a job.

1.3.7. Discipline, punishment and isolation

The high security corridor in Pazardzhik was in a separate zone on the first floor. There were 27 cells in this corridor. The punishment cells measured 3.5 x 2.7 m. All windows were barred. There were no beds or chairs. The mattresses lay on a wooden platform raised 30 cm from the floor. Prisoners can spend up to 14 days in a punishment cell. Bulgarian law does not limit the period of time a prisoner can spend in a punishment cell in the course of a year.

The cells in the disciplinary section were furnished with two beds. Apparently, they were used when the number of punished inmates exceeded the number of punishment cells. According to the BHC report about this prison, in 2002 as many as 502 prisoners were punished with placement in a punishment cell. At the time of the visit, the IHF delegation met just one person who was alone in a punishment cell. He was serving the seventh day of his 14-day long punishment. He believed that he was unjustly punished, but did not appeal the order. He added that he was aware of the possibility for appeal, but thought it was pointless.

In the high-security zone, the delegation met a prisoner who was isolated administratively. The administrative isolation in this zone could be ordered by the prison Director for three months. After this period, it had to be reviewed. Based on the review, Director decided to prolong or end the inmate's placement in this zone. Unlike the disciplinary isolation, administrative isolation in the high-security zone had no time limit: it could be prolonged every third month for years. The man in the zone, the guard explained, was sentenced for 12 years for a sexual offence. Other inmates harassed him regularly because his crime was known. The man reacted violently and this resulted in fights. For this reason the Director decided to isolate the prisoner from the other inmates. Those serving a life sentence were also placed in the high-security zone. At the time of the delegation's visit, there were 13 such inmates in the prison, four of which were serving a sentence without the possibility for substitution.

The members of the delegation asked the director about an incident in which four people had been punished for refusing to work. He stated that all work was voluntary and that nobody could be forced to work. But when a person decided to work, the job became a responsibility. The case at issue concerned a group of prisoners who refused to work on the days when they could buy products from the prison shop; the working day lasts from 8:00 a.m. to 4:30 p.m., whereas the shop's working hours were from 9:00 a.m. to 4:30 p.m. (for non-working inmates) and from 9:00 a.m. to 5:00 p.m. (for working inmates). The choice of goods in the shop is not at all large, and by the end of the day the shop sells out and the inmates miss their chance of buying what they need.

1.3.8. Use of force and arms

The guards in Pazardzhik prison carry truncheons and handcuffs all the time, although the prison personnel maintains a civil attitude. Only those who effectively guard the inmates have military ranks. Inmates are much less guarded compared to some other prisons. Only two guards were present in the basketball grounds. According to the prison Director, firearms in this prison had not been used for years.

When interviewed in private, some inmates complained of physical abuse by the guards. Some said that this happened very often. A Roma prisoner complained of physical abuse, which he attributed to discrimination on religious grounds.

1.3.9. Contacts with the outside world

Prisoners can make telephone calls once a week according to a schedule. Phone calls are paid, and prisoners buy phone cards to hold conversations. According to the LEP, there is a list of those people to whom a prisoner can make telephone calls: parents, spouses, children, and siblings. To make a call, a prisoner has to fill in an application, which has to be endorsed by three persons, to the

administration. Normally, only internal and inter-city calls are available. There is no possibility to place international calls, except for prisoners whose relatives live abroad.

All correspondence of prisoners is subject to censorship, even that to their lawyers, in clear violation of international law. The only exceptions from this rule were letters to some state bodies and to the European Court of Human Rights.

Relatives and friends can visit prisoners every week for 45 minutes. The meeting room does not provide for any physical contacts between prisoners and their visitors: there was a wire netting, which divides visitors from prisoners. Only children up to seven years of age can squeeze through the narrow door under the netting. After visits all prisoners are searched to prevent smuggling of drugs in the prison.

1.3.10. Activities

The prison had a gym – a large room of 150-200 sq. m. (that used to be a large cell) equipped with a limited variety of sports equipment: a weight, some dumbbells and a table tennis table.

Different categories of inmates had different time for activities. First-time offenders could go to the gym for two hours a day or play football and volleyball. They also had free time in the prison (three hours a day). All departments had a common corridor – the “club” where prisoners could spend their free time.

As for recidivists, they had to spend almost all of their time in the cells, except for the time one hour daily allocated for outdoor exercise. The administration in Pazardzhik, however, allowed 1 hour and 45 mins of outdoor stay a day.

The prison had a very good chapel and an Orthodox priest working in the institution permanently. All icons were painted by prisoners and there were a lot of them. One former prisoner made a carved wooden wall in this small church. Prisoners could come to the church in the time appointed. All religious services were served here. The church could accommodate 50-60 persons. Inmates had the possibility to light a candle. The chapel was also accessible to prisoners with life sentences, but they could use it separately from other prisoners. In the course five years 300 people were baptized and two were married in the chapel.

An NGO called Initiative for Civil Activities opened the first probation centre and educated 42 inmates inside the prison in 2003. The program lasted for one year and was aimed at educating completely illiterate Roma inmates under the age of 25. The foundation offered an extra motivation to the participants, namely 200 BGN (103 EUR) each. Most of the TV sets owned by the inmates in the prison were bought with this money.

1.3.11. Inspections

The Ministry of Justice carried out a financial check in February–May 2004. Usually, the Ministry of Justice checks different institutions two or three times a year. The National Auditing Office also carried a financial audit in the prison.

The district prosecutor visited the prison regularly. The prosecutor's office usually followed up on the prisoner's complaints, but never systematically inspected the situation in the prison with regard to the observance of the human rights of the prisoners. The prisoners' requests were usually against the long proceedings and requests for accumulation of sentences according to the law.

From time to time, the prison is visited by the Hygiene and Epidemiological Inspection. It made several observations and recommendations related to the maintenance of hygiene.

The European Committee for the Prevention of Torture carried out a visit to the prison in 1995. In January 2004, there was an EU Commission visit to check the progress in the prison reform in advance of the country's accession to the EU. The inspection was initiated by the Bulgarian Government.

Several NGOs, including the BHC, visit the prison. The last BHC visit for training and monitoring purposes was on 9 May 2003.

1.4. Visit to the Investigation Detention Facility in Plovdiv

The IHF delegation visited the Plovdiv investigation detention facility on 27 September 2004. The Bulgarian Helsinki Committee had visited the facility a month earlier, on 27 August 2004. The delegation could benefit from the BHC report, which rationalized its visit a lot. During the visit the delegation could not interview detainees because of the restrictions in Bulgarian law.

1.4.1. General information

The building of the facility was located in the city centre, in the building of the District Department of the Ministry of Internal Affairs. It is a place for investigative custody of persons undergoing criminal investigation, who are detained pending trial. Earlier the building belonged to the police, but since the police had not had the right to execute pre-trial detention, they had to share it with the Ministry of Justice. The Ministry of Justice employs all the staff of the facility. There were 48 officers, mainly men, and a few female officers.

The area of the prison was 940 sq. m. The total capacity of the facility was 66 people. But on the day of visit there were 101 beds, 41 of them were double bunk beds.

1.4.2. Categories of inmates, segregation and its purpose

The IHF delegation started its visit with observation of the cells. The detainees were placed in 30 cells, many of which had double bunk beds. According to the BHC report, the daily average number of inmates in 2002 was 69, in 2003 – 85, and on 27 August 2004 – 97. On the day of the visit, the number of detainees was 128 people. The figures given by the Director, however, were not clear. Once he mentioned 55 persons in pre-trial detention and 67 or 80 persons waiting for the court's decision in custody. These figures would mean 122 or 135 inmates, instead of 128. Whatever the case, the facility was heavily overcrowded. Among the inmates there were 25 women, seven minors and two foreign nationals, one from Turkey and one from the Netherlands. They had not been visited by the consuls of their countries. There was no data on the inmates' ethnic origin.

During the first 72 hours after their arrest, inmates have to be escorted to the court where the judge decides about release or pre-trial detention. Those who were suspected of a crime that was committed in the city of Plovdiv, would be brought back to this detention facility. Others were usually sent to the prison in Plovdiv or to other prisons. The maximum period of time a defendant could normally spend in the facility visited by the IHF delegation was six months. However, the Director said that there were six persons who had spent more than six months there.

Questioning took place in the same building and was executed by the investigation authority that in Bulgaria is part of the Judiciary. Any act of the investigation outside the building ought to be approved by the investigation authority. In this case, the defendant would be escorted by the guards of the detention facility. Approximately half of the inmates were brought in the investigation detention facility by police officers, usually after a short-term arrest in the police building. The others were either detained at some point during pre-trial detention or were transferred from other detention facilities for investigation activities.

1.4.3. Material conditions and hygiene

The IHF delegation was permitted to enter an empty cell, which was app. 7 sq. m. in area and 2.6 m high. This would mean that an inmate had 1.75 sq. m. of space, partly covered by the double bunk beds, and 4.5 cubic meters of air. Such conditions were clearly inhuman and degrading, especially in view of the fact that detainees were confined to these cells constantly. It also needs to be taken into consideration that the average number of inmates in the Plovdiv detention facility was on a constant increase. Taking into consideration the jurisprudence of the European Court of Human Rights, it is clear that every one of the inmates in the facility had a case before the Court.

There were no chairs or tables in the cells. The detainees had to store their personal belongings on the open shelves outside the cells. According to the Director, valuables could be deposited at the office of the facility. There were no toilets in the cells, just a sink with running cold water. There were two toilets and a bathroom with a shower in both corridors. Inmates had to knock on the door if they wanted to go to the toilet. According to the Director, they could take a hot shower once a week in winter and twice a week in summer. The toilets and bathrooms were clean. The guards used them also. Soap and toilet paper were provided by the administration. Washing powder and toothpaste could be purchased by the inmates or by their visitors. A guard collected the requests of the inmates every week and bought the food or the hygienic articles for them if the inmate had the money. Inmates could wash their clothes in the sink and dry them in the cells and in the corridors.

Only 20 of the 30 cells got natural light through small windows close to the ceiling of the cell. The windows of the remaining ten cells faced the corridor. These cells did not get any natural light.

1.4.4. Nutrition

According to the Director, the inmates got meat three or four times a week. If true, this would mean that the nutrition in the Plovdiv facility was better compared to the prison in Pazardzhik, where inmates got meat once or occasionally twice a week. The daily food allowance in Plovdiv was 1.20 BGN (0.62 EUR). Unlike Pazardzhik, in Plovdiv the IHF delegation could not ask inmates about their nutrition, because the delegation was not allowed to meet any of them. The delegation was not provided with information about the calorie value of the food in the facility. However, the detainees

were allowed to buy food. Every week a guard made a list of what the detainees wanted to buy with their own money. They could also buy books or magazines.

1.4.5. Medical care

The facility did not have a doctor, only a paramedic who worked from 8:30 a.m. to 5:00 p.m. The detainees underwent medical examination upon admission by the paramedic. If a person was admitted late at night, the paramedic carried out the medical examination in the morning. During this examination the paramedic took the temperature and looked for visible signs of illness. If there were any signs of torture or ill treatment, the paramedic prepared a report and referred the case to the prosecutor. The facility had 4 or 5 such cases during 2004. The staff of the facility usually did not have any information about the consequences of the investigation. Once a paramedic had to testify before the military prosecutor, this was a sign that an investigation was going on, the Director said.

BHC reported some statistical data as provided by the director during the organisation's visit on 27 August 2004. For the first six months of the year, 2,058 examinations (or 15 daily) had been performed. The highest number of examinations in a single day had been 34, the Director said. Of all 1100 persons placed in the facility during the first six months of 2004, 148 were drug addicts. If they had already been under methadone therapy, they could continue this therapy. But it was impossible to start therapy in the detention facility.

Apart from the paramedic, a general practitioner, who was chosen by the administration to serve the facility, came when the administration called for or when the paramedic was on holiday. At least once a day the doctor visited the pre-trial detention facility to examine detainees who had complaints.

In 2004 there was one case of hepatitis C. There was one suicide attempt in 2003 and another one in 2004. A dentist who worked in the Plovdiv Prison also provided dental care to the investigation detention facility. An inmate from the facility could be transported there, however, only in cases of severe problems.

1.4.6. Discipline, punishment and isolation

The facility did not have punishment cells. The administration could prohibit calls as a punishment. In August 2004, there was a hunger strike that lasted one day. The BHC reported about 19 hunger strikes in 2003.

1.4.7. Use of force and arms

Guards were did not carry guns, only handcuffs. They carried guns only when a prisoner had to be transported outside. According to the official records, the guards had to apply force four or five times during 2004.

1.4.8. Contacts with the outside world

Apart from the two floors for the cells in the building, there was a third floor with one room where inmates could meet relatives or their defence lawyer. Relatives could visit inmates with a prior appointment twice a month for 45 minutes, in the presence of the guards. Inmates and visitors were

separated, no physical contacts were allowed. Lawyers could meet the defendants privately on working days from 9 a.m. to 5 p.m.

According to regulations, prisoners had unlimited right to correspondence. Telephone calls were allowed twice a week, after handing in a written application to the administration. Telephone calls were approved by the investigative body. The prisoner had to inform the persons he/she wished to speak with and the guard would dial the number. The conversations were not taped, but one of the officers stayed near the prisoner and listened to the conversation. Calls to lawyers were not limited, but if the investigator considered that a call could affect the investigation, it could be prohibited.

Correspondence was not limited. Letters to relatives were subject to censorship. So were the letters with the lawyers in a clear violation of international standards. Letters to the authorities, prosecutors or to the court were not controlled. Letters to the BHC and other human rights organisations were subject to control.

Representatives of religious communities could not visit the inmates and they could not attend religious services.

1.4.9. Activities

As other parts of the building belonged to the police, there was no space for outdoor stay or for a gym. Persons in pre-trial detention were not allowed to work. This means that inmates could not do anything but sit or lay on their beds throughout the day. Prisoners could only go to the toilet and for interrogations. They got their meals in their cells in plastic bowls. A signal light indicated to the guards if a door is open. Parts of the corridor could also be blocked by doors and people could be monitored by video cameras.

1.4.10. Inspections

Inspections from the Ministry of Justice were carried out in this facility from time to time. Last time officials of the ministry visited the facility in July 2004. The district and the regional prosecutor also visited the facility every month. The last visit took place a week before the visit of the IHF delegation. The prosecutors usually meet those inmates who complained. They write their remarks in a special book but they usually did not find any violation of the law. Nor did they ever make a remark on the inhuman nature of custody in this facility.

1.5. Visit to the Belene Prison

The visit to the prison in Belene took place on 28 October 2004. It started at 10:50 a.m. The meeting with the Director lasted until 1:35 p.m. and was followed by a 60-minute lunch. The IHF delegation's inspection ended at 6:25 p.m. The IHF delegation visited only the maximum-security unit, the sixth unit, the prison library and the prison chapel. It was able to talk to sentenced prisoners in private and to see some documentation.

1.5.1. General Information

The prison in Belene is located on a big island of the Danube River, near the town of Belene. During the communist regime the island was a place of imprisonment and banishment of the political opposition in the 1950s and of ethnic Turks who did not want to change their names in the late 1980s.

The prison governor, Mr. Svilen Chichev, had been in charge of the prison since 2001. The prison covered the regions of Dobrich, Silistra, Plevan, Veliko Tarnovo, Shumen, Rouse and others. The prison was located on an island, and had a big auxiliary farm of 20,000 hectares that was also part of the prison. The Belene prison was constructed in the 1960s. At the time of the IHF delegation's visit, a renovation was going on in the first floor of the maximum-security section.

The capacity of the prison facilities was for 400 inmates. On the day of the visit of the IHF delegation, there were 694 prisoners. Therefore, the prison was 173% overcrowded. The IHF delegation was surprised to find such an overcrowded facility in the middle of a big island, all of which belonged to the prison. As the prison had 1948.6 sq. m. of space, every prisoner had only 1.86 sq. m. at his disposal.

1.5.2. Categories of inmates, segregation and its purpose

The prisoners were categorized into accused (28 people), defendants (98 people) and sentenced prisoners (568 people). Most of the prisoners were serving up to three year prison terms. There were 106 prisoners sentenced to 20 years of imprisonment and 6 prisoners sentenced to life imprisonment, three of them without the possibility of substitution. The IHF delegation was told that the number of prisoners with life sentences was increasing.

The prisoners in Belene were male, aged between 18 and 60. More than 50% of them were aged between 25 and 39. The prisoners were of different national/ethnic background: 292 were Bulgarians, 246 were Turks, 138 were Roma and 18 were described as "other."

The newly arrived prisoners were sent to the Admission Unit, where they stayed between 14 and 30 days. During this period the prison staff opened prisoner's records, conducted medical check-ups, provided information about their rights and obligations and allocated prisoners to a prisoner group. First-time offenders were held in large dormitories, sometimes with 16 inmates living in them. Recidivists were kept in separate cells in the high security area. Life-sentenced offenders were also in the high security section building. The punishment cells were placed in the same unit, but on a different floor.

The regime of some prisoners was not always a segregation criterion. One of the segregation criteria was employment, which meant that non-working prisoners were placed in separate groups.

1.5.3. Material conditions and hygiene

The IHF delegation visited the maximum-security section and the group VI, where the non-working inmates were placed.

The building of the maximum-security section was in use since 1978. Punishment cells, isolation cells and the cells for life-sentenced prisoners were located inside the building. The maximum-security section had six life-sentenced prisoners at the moment of the visit.

The IHF delegation inspected only the first floor of the section on which there were the disciplinary cells, one temporary cell and the cells for life sentenced prisoners. Except with the prisoners, the IHF delegation spoke with the psychologist and with two guards.

Each of the two punishment cells had approximately 5 sq. m. with a little sanitary facility. The cells were furnished with a wood plank, a bed, and a little bedside table. The IHF delegation did not see any pillow, sheets, table, or chairs.

One cell was the bottom of the corridor separated. A space divided in two identical cells was separated by a wall. Each cell had a bed and a toilet, but no sink. The toilet facility was separated from the living space by a small wall. The cells had small, oblong, grated windows, which were secured by a dense wire netting.

The IHF delegation talked to three inmates, and they complained about the corrupted system in the prison. They said that those prisoners who had money could afford better prison conditions, like new sheets.

In the unit for life sentenced prisoners the IHF delegation spoke with two life prisoners. One of them had been described by the staff as an exemplary inmate, while the other was described as a very dangerous one. The first prisoner was in the cell no. 6 since 1995. His regime was changed twice: first from very strict to strict, and then from strict to general. The cell was decorated and was the only cell the IHF delegation had seen during its visit, which was in line with the requirements of the European Prison Rules. The cell was large and clean. It had two small windows, one bed, one table with a chair and a small bookshelf with about 100 books. The cell had a sink next to the toilet, but there was no access to running water, and the water was kept in bottles. The IHF delegation observed electronic equipment, among them a 17-inch TV set. The prisoner handed out meals and helped the section guard. The inmate's mother lived abroad and visited him once a year. She also sent money.

On the opposite side of cell no. 6 the cell of the second life prisoner was located. He heard the IHF delegation coming and insisted on talking to it. He was a client of the Bulgarian Helsinki Committee. The prison staff tried to dissuade the delegation and warned that the person inside the cell was a very dangerous prisoner. He had committed five murders and one rape. The IHF delegation was advised to stand far away from the cell bars. The prisoner had been in the prison for five years. Since November 2003 he had been finally sentenced to life imprisonment. He was a troublemaker, but harmed more himself than the administration. He wrote many complaints. His cell was small, 1.65 x 3 m, which included an in-cell sanitary facility and a bed. The in-cell sanitary facility was separated with a one-meter high wall. The cell had no access to running water and the IHF delegation did not observe any bottles with water. Except for the bed, there was no furniture inside the cell. To dry his clothes the prisoner had to hang it on the separation wall of the toilet or on the bars. There was no heating appliance inside the cell, but outside, closer to the second cell. This prisoner had just enough space to stand and no possibility to move inside the cell. Books and papers, together with correspondence to the European Court of Human Rights in Strasbourg, were stacked on the cell floor, and a small tape recorder was lying on the top of one of these piles. Two book rows that covered different areas and belonged to the prisoner were placed on a wooden shelf in the inner corridor. The cobweb, urine stench and mustiness were all over the cell. The floor in the cell was concrete, but full of holes. The prisoner did not have a TV set, as he had no money to buy one. He was being denied the opportunity

to wash himself. He also complained about his wrists being deformed because of police torture and frequent use of handcuffs. He had a feeling that he was developing arthritis in his hands. He complained that the guards left the window in the parallel cell open, despite the fact that the temperature was very low during the night. He was a Protestant, but the administration only offered him contacts with an Orthodox priest. He was very suspicious, but not paranoid and obviously was in need of psychological counselling.

Group VI was located in a run-down building opposite a playground. The prison medical centre was located on the ground floor of the same building. During the stay in the building, the IHF delegation visited several cells and spoke to a dozen inmates.

The inmates lived in large-capacity dormitories, most of which were overcrowded. Sixteen inmates inhabited one cell of about 40 sq. m. Each of them had only 2.5 sq. m. at their disposal.

The cells were very poorly furnished, but with enough beds for every inmate. The beds were, however, seriously damaged. The mattresses and blankets were extremely thin. The bedding and the pillows were dirty and damaged. Inmates complained that regardless of the season they were given the same blankets. The heating was not strong enough, particularly during the night. Some of the inmates said that the heating was completely turned off. There were only a couple of small chairs, two small to medium-sized tables, the height of which was insufficient for writing, and several run-down lockers. The number of lockers was insufficient for all prisoners, forcing inmates to share lockers or to keep their belongings underneath their beds. In almost every cell and in every corridor windows were broken. Reportedly, the windows got broken during summer, and they would be repaired during winter.

Most cells were equipped with toilets, a sink and a tap. There was a separation wall that guaranteed some privacy. But as 10-12 inmates were placed in one cell, this meant that 10-12 people shared one toilet. The running water was available only for 1–1.5 hours a day. In every room one could find plastic bottles filled with water, and the inmates informed the delegation that the water had sand residue. Inmates could use the communal lavatory during the day and night. There was also an electrical supply regime and the inmates could use it from noon to 10 p.m.

There were no bells to call the guards to the cells. Thus, prisoners, who were being beaten and were prevented from reaching the door to call a guard by banging on it, were left without help. The guards stayed in their rooms and walked in the corridor three times a day in order to count the number of prisoners in each cell and to take them to the canteen for meals. The guards entered cells once every 2-3 months to inspect the state of the bars.

The IHF delegation visited cell no. 1. It was 8 x 4.50 m, had 10 inmates, which amounted to 3.6 sq. m. per inmate. It had three large barred windows, and draughty window frames. A clothesline hanged across the cell. There was a lavatory at one end of the cell, but because of the water shortage the inmates could use it only for 30-40 minutes a day. The concrete cell floor was dirty and damaged. There were eleven run down bunk beds in the cell, and one had almost no transversal bars to hold up the mattress. This bed was out of use, but inmates did use it from time to time. The sheets were very dirty, though they were changed every two weeks. Some of the beds did not have pillows, the linen was dirty, run-down and could not provide sufficient warmth.

The room had good access to natural light, but during the night the lighting was insufficient as there was only one light bulb on the ceiling. The noise level in the cell was tolerable. The only ventilation was provided through the windows. The inmates informed the delegation that there was almost no heating in the dormitories in wintertime. Three to four inmates shared one locker to store their belongings. However, most of the lockers were run-down and many could not be closed. A lack of basic furniture made the cell look quite spacious. There were two tables, both of them not sufficiently high for writing, and only one chair.

The prisoners could take a shower once a week and they had to use it four at a time for 20 minutes. The bathroom was too small for the number of inmates. Prisoners' clothing was very dirty and worn out, and it was not clear when the clothing was washed properly last time.

Cell no. 2 had 10 beds, including four bunk beds on the ground floor. There was no space between these beds. The rest of the equipment in this cell was identical to the one described above, with the difference that only one table was in this cell with a well-functioning chair. The windows were single pane, and they were draughty. The inmates complained that it was very cold during the winter. The cell reeked of urine.

The faucets in the joint bathroom that was intended for 34 inmates had water only 30-45 minutes a day. There was no running water during the morning hours. Every morning prisoners had to wait in a queue for the toilet, as there were only four toilets (all of them without toilet seats). Only two showers worked in the bathroom. The strongest prisoners occupied the toilets first. One young and strong man from the cell admitted that he had the right to use the toilet first. An elderly inmate standing in the corner, who looked like an alcoholic, was one of the last in the line. One prisoner said that the cells did not look differently 21 years ago. The only difference was that nowadays the cell had a walled-off bathroom.

Prisoners were transported to the prison in a small bus, intended for two prisoners only. Both compartments were very dark and too small to provide human conditions during transportation.

1.5.4. Nutrition

The daily food allowance in the prison was 1.30 BGN (0.67 EUR). The delegation received many complaints about the quality and quantity of the food. One inmate reported that the two main differences between the prison conditions at present and twenty years ago were that toilets had been installed in the prison cells that were missing before and that the food had been better twenty years ago. Dietary food was available, but its quality was very poor. Doctors could prescribe a special diet and increase the calories of meals if the health condition of the prisoners required this. The prisoner informed the IHF delegation, however, that all prisoners received the same quality and quantity of food. Though the prison administration told the IHF delegation that the religious food regulations were observed, many facts pointed to the opposite.

The inmates received three meals per day. Those who worked got four meals. Bread, cheese and margarine were served for breakfast. For lunch it was soup with beans, peppers or tomatoes and another quarter of bread. In the evening the meals were the same. Peas and soybean were served as a meat substitute or macaronis and cheese. Prisoners rarely ate meat. Unsweetened tea was served twice a week. An inmate from the section VI complained that he found worms in his food.

The prisoners suffered from the lack of drinking water, so they had to stock water in bottles in the period when they had access to water.

The meals were served in the prison canteen. The prisoners formed queues of about 40 in front of their section, and a guard brought them in turns to the canteen. The prison had a shop, but many inmates had no money to buy extra food there. The inmates could receive parcels, but some complained that the parcels they received were previously opened.

1.5.5. Medical care

The medical staff of the Belene prison consisted of a doctor, a paramedic, a psychiatrist, a nurse dentist and a psychologist. The dentist was not part of the permanent medical staff. The doctor was available from 9:00 a.m. until 3:00 p.m. From 3:00 p.m. till 9:00 p.m. a nurse was present at the medical facility. There was no doctor in the prison during weekends and for urgent cases inmates were brought to the polyclinic. He was an employee of the Ministry of Justice and his work was not supervised by the Ministry of Health.

Two rooms of around 20 sq. m. each functioned as the medical office, and they had only basic furniture. The medical staff reported shortages of medicines. Some of the inmates were advised to write to the prison director, and to request the necessary medicine. The medical documentation was kept without any order; the medicines were in disarray, and they were placed in dirty cardboard boxes. There were 18 flasks with liquid in one of these boxes, and most of the flasks ought to be thrown away because of their expiration date. The expiration date of one of those flasks was 02.09.1994. Two of these flasks were unmarked, while only four flasks had an expiration date that was still valid. The IHF delegation saw an ECG, blood pressure measurement instruments, and a sterilizer. There was also an isolation room for aggressive patients.

Prisoners were examined immediately upon arrival. A guard was usually present during this examination. Special tests, such as the one for TB, were made in the town polyclinic. The inmates were not tested for HIV. According to the information of the medical staff, two death cases were recorded, caused by heart attacks, since the beginning of 2004. According to the prison authorities, there were 36 cases of tuberculosis during 2003. Since the beginning of 2004 two new TB cases were registered. One inmate had syphilis and 30 persons had mental health problems. The medical staff examined an average of 50 patients per day.

A report on recorded injuries was sent to a social worker (12 of them were working in the prison) and the chief guard on duty. Only 1-2 cases of physical injuries as a result of physical abuse had been recorded in the prison since the beginning of the year. There was a case of a chest contusion on 24 September that resulted from a fight between prisoners. A new X-ray was planned for 29 September. However, there was no record of ill treatment and the cigarette burns that the prisoner reported to the IHF delegation later on. According to the medical staff, there were three cases of self-injuries and 24 cases of food rejection. No suicide cases had been recorded, at least no *serious* attempts. The medical staff member did not mention anything about the young Roma, to whom the IHF delegation spoke later in the small prison hospital. In order to be given a consultation with a psychologist the prisoner should file an individual petition.

The small prison in-patient facility had 20 beds. At the moment of the IHF delegation's visit, there were 11 patients in the facility. One of the patients had problems of a mental health nature; another was waiting to be tested for syphilis. The rest had different non-infectious conditions. Patients with tuberculosis and hepatitis were transferred to the Lovech prison hospital. The rooms of the medical facilities were large dormitories with several beds with a bedside table and a TV set, but without any other furniture. Light was provided by one neon tube, which was insufficient for reading even during the day.

Out of eight patients in the first room, only three were not victims of an assault and battery, or homosexual rape by other inmates. One of the prisoners was allegedly been beaten for several days by three other inmates. Four days before the visit of the IHF delegation, he was beaten in the presence of a guard. Another patient, a young Roma, tried to commit suicide by cutting his veins, as he was a victim of rape during his stay in the admission section. The hospital documentation did not mention anything about the rape, the beatings and the cigarettes burns.

Two more cases indicated a serious problem with the medical care in the prison. A 24-year-old prisoner had quite a large knife wound in his arm. The knife prevented him from moving his arm freely. The medical documentation showed that he had to be operated, but the national health care service refused to perform the surgery, as he was not considered an urgent case. A week before the visit he had been given a pill to help relieve the pain. He had been imprisoned for two months and had two more years to serve. Another patient, who did not mention his name, complained about tooth pain to the doctor, and he gave him a simple painkiller that did not help him.

1.5.6. Work in the prison

Work skills, the sentence regime, the duration of the sentence and the prisoner's behaviour were the criteria for selection for work in the Belene prison. According to the prison authorities, the low share of prisoners who worked was due to the small size of the town of Belene and the lack of serious businesses there. The town could not offer many job opportunities. According the Director's estimation, between 200 and 250 prisoners, i.e. around one third, worked permanently. The prisoners worked in four main units – osier furniture, a cow farm, a pig farm and a sheep farm. The prison also had a sawmill. Some inmates worked in a woodcutting production plant next to the prison. Others were engaged in the maintenance of the bridge that connected the island with the land. In 2003, 60 inmates were employed in the nearby city of Svishtov. In the wintertime, however, the employment of inmates dropped to lower than 30%.

According to the administration, inmates who worked received a financial contribution, but not in cash. They received a voucher they could spend in the prison shop. Some inmates asked to send their money to their families. The amounts they did not spend were put in the prisoners' saving accounts. The time inmates spent working could contribute to their early release, as according to Bulgarian law two days of work count as three days of imprisonment. Work in the prison was obligatory, and those prisoners who refused to work were punished. This, however, did not happen very often, as the work was a rare commodity.

Only two inmates were engaged in a program for social rehabilitation that prepared the prisoners for life outside the prison. Except to learn how to find a job, the prisoners received some financial assistance.

1.5.7. Discipline, punishment and isolation

According to the Director, there were fewer cases of disciplinary punishment than at the Lovech prison. But Belene had fewer inmates than Lovech.

Authorities informed the delegation that punishments were not applied frequently. Prisoners were punished because of their internal fights, gambling and stealing. Since 10 January 2004, 27 isolations for disciplinary purposes were registered in a special journal. There was a case of an inmate who received 14 months of punishment in a disciplinary cell. After three months he had spent in isolation, he had to pass a psychological evaluation, which was supposed to determine whether he could be further isolated.

Eight disciplinary cells were located in the maximum-security section, on a separate floor. The windows in some of the disciplinary cells were broken, and the window frames were covered with plastic and nylon. The inmates complained that the temperature in the cells was very high during the summer and very low during the winter. This resulted from the lack of windows. The section had its own bathroom that was being used at least once a week, according to a schedule. The daily outdoor activities were not longer than one hour. Before they went to the disciplinary cells, all prisoners who were punished had to be examined by a doctor. Medical conclusions were recorded in a journal, but not in the prisoner's personal file.

At the moment of the IHF delegation's visit, four sentenced prisoners were isolated under Article 85a of the LEP with a decree of the prison Director for systematic breach of the internal order in the prison. Another two remand prisoners were isolated on the same grounds under Article 130g of LEP.

Three prisoners were placed in a punishment cell with six beds. The cell had 11.47 sq. m., which amounted to 1.91 sq. m. per inmate. The prisoners had to stay there six months because of breach of discipline. They used blankets brought from home, as those provided by the prison were worn out. The only furniture in the cell was a chair and a small table, which was 55 cm high and not adequate for writing. There were only three lockers in the cell, but the space was insufficient to keep the personal belongings. One of the inmates kept his in a bag under the bed. To dry the underwear, inmates used a rag that was stretched diagonally above their heads. There were two 14-inch TV sets standing perpendicularly to each other. The inmates complained about the electricity regime. The guards shut it down without any reason and inmates could not read, listen to the radio, or watch TV.

The cell had a toilet that was separated by a small wall. As there was no sink, prisoners washed their hands in a small plastic wastebasket. The inmates could take a shower once a week, for 15-20 minutes. Warm water was available, and each prisoner received a small bar of soap once every two weeks.

The prisoners had to yell in order to call the guards, as there were no electronic means for this purpose. The inmates informed the IHF delegation that their relations with the guards had been very bad. There were cases of wardens' unsanctioned use of violence. An inmate was beaten after he refused to take food. The prisoner complained, but the guard was not sanctioned. One of the inmates reported a liver colic to the guard, and he had been waiting 2.5 hours for a doctor. The prisoners addressed the guard as "the elder." When the prison psychologist entered the cell, the prisoners

became silent. An inmate complained about the medical attention and the food. He said that the food was not adequate for his health condition. He complained about not having seen any doctor.

Life-sentenced prisoners were accommodated in solitary confinement cells unlike in the Lovech Prison. The prison Director said that Lovech Prison was overcrowded and this was the reason why the lifers were put together in the same cells. However, as Belene was also overcrowded, this was not a satisfactory explanation. The prison Director referred to domestic law, according to which the life-sentenced prisoners should be placed in solitary confinement. Bulgarian legislation, however, does not prohibit lifers to be placed in common cells and the Belene Prison administration should consider changing this situation for the benefit of the inmates with life sentences.

1.5.8. Use of force and arms

The disciplinary incidents and the use of force were recorded in a journal that was supposed to keep a record on the use of force. The staff was obliged to document every case of the use of force and to follow it by a report. According to the authorities, in 2004 they received only one appeal for excessive use of force.

The IHF delegation received a complaint from one prisoner, who claimed that on the third day of his stay in the prison of Belene, he was ill-treated and raped several times in the admission unit in the presence of other inmates. He was beaten by two inmates and then repeatedly raped by one of them. The IHF delegation has the names of the victim and of the alleged perpetrators. Upon leaving the admission unit the prisoner who was abused was sent to the same group as one of the alleged perpetrators. Thus, the news about the rape quickly spread among the inmates in the group and he was reportedly harassed by other inmates. Because of the continuing threats and verbal abuse, he cut his veins and had to be transferred to the prison in-patient medical facility. Although he complained of rape, the doctor had established no traces of use of force. The prisoner filed a formal complaint to several authorities in Bulgaria and to the Bulgarian Helsinki Committee. The prosecutor's office and the prison administration conducted an investigation and concluded that there was not enough evidence to charge the alleged perpetrators with rape. The BHC followed up on the complaint and interviewed the prisoner after the conclusion of the prosecutors. The BHC researchers were told by the prisoner that he withdrew his allegations before the government investigators and did not want to pursue his complaint. The prisoner was placed on a permanent basis in the in-patient medical facility and was apparently afraid to lose his place. Nevertheless, the IHF delegation concludes that the risk of rape is a serious problem in the Belene Prison and urges the Bulgarian government to take measures to address the problem.

The IHF delegation also received a complaint from ill treatment from another inmate (the IHF delegation has his name) from Group I. The inmate reported that he had been beaten in the course of a week in September 2004 (17-24 September) by three other inmates. The alleged perpetrators were from the same group. The IHF delegation has their names as well. The prisoner, who was a victim of the abuse, claimed that the beating was linked to the fact that he was of Romani origin. The inmate reported that he was hit on the back of the head, on the chest and burned with cigarette butts. The inmate reported that the last beating on the 24th was witnessed by a guard on duty, and that he could identify this guard. The ill treatment stopped after the inmate had been able to talk to his social inspector and was moved to the prison medical facility. The medical journal in the prison medical

facility did not mention any complaints about ill treatment. The only record was that the inmate's ribs were "bruised".

1.5.9. Contacts with the outside world

The Belene Prison is located in the north of Bulgaria, on the border with Romania, and families who live far from the prison cannot visit their detained relatives frequently. There were no programs that could ensure regular visits to the inmates. However an inmate could apply to be transferred to a prison closer to his relatives. The Chief Directorate on the Execution of Penalties makes final decisions on these requests. Bulgarian law does not envisage long-term spousal visits and the prison in Belene did not have a facility for such visits.

The room for the visits was located on the bank, close to the prison administration's building. It was a very dark room, and could accommodate eight prisoners and eight visitors. Because of the physical partition, it was not possible to guarantee proper privacy of a visit. Two dense wire nettings with an empty space of about 65 cm prevented any physical contact between a detainee and his visitor. This was the only visiting room for the entire prison.

As 4-5 inmates received visits simultaneously, the noise level was very high, and this prevented a normal conversation. Unless an inmate had been staying in the prison for a long time, he was not allowed to have physical contact with his children. And even then, he needed to ask for permission. Every visit lasted not longer than 30 minutes, and it took place only during the weekend. Only the prosecutor could prolong the visit for up to 90-120 minutes if the relatives came from far away. One inmate had a 2-hour-long visit in 1999, but this was an isolated case, as even permission for a 90-minute visit had been very rare. The conversation had to be in Bulgarian though many visitors did not speak Bulgarian well. But as none of the staff members spoke Turkish, they could not act as translators. There were cases of prisoners who did not receive visits for almost ten years.

The attorney visits were held in the maximum-security section of the prison. A lawyer's room was located on the first floor of that section and was furnished with a table and a chair that were foreseen for the lawyer. The defendant was placed in a densely bared cage. The defendant could receive and hand out documents through a hole in the cage. Lawyers could visit the inmates also during weekdays. According to the LEP, correspondence of the prisoners is to be controlled. The inmates complained that some of the guards read their correspondence, and afterwards "forgot" to send it to their families. All correspondence written in a foreign language had to be translated into Bulgarian.

Prisoners could call home every Wednesday. They could talk for 10-25 minutes if the social inspector approved it. The conversations had to be in Bulgarian. Some of the prisoners, however, could not call home, as they could not afford a pay card.

The IHF delegation was informed that the journalists from the national TV were interested in making a film about two life-sentenced prisoners, and the prison administration approved their visit.

1.5.10. Activities

The inmates who did not work spent all day in their cell, except for the one-hour outdoor exercise. According to the detention regime, some of them could walk around the corridor, where a TV set was

put up, but only guards could switch it on. They were unlocked from 6:00 a.m. to 10:00 p.m.

The prison had a large library (around 5 000 books), but no funds had been allotted to purchase new books. The library had classical literature and encyclopaedias. Inmates could take books for as long as they needed. There were around 400 prisoners who had library cards, but only one third were regular readers. The prison received national and local newspapers.

Prisoners with good behaviour could be awarded with home leave. It was given by the prison Director and could not apply to the prisoners on very strict and special regime or to the life prisoners. However, the local prosecutor had the right to veto the award. In case the request was approved, the prison administration prepared a document that acted as an ID card.

Representatives from a citizen's association in Silistra visited the prisoners several months ago. The prisoners had asked for newspapers and magazines, and their request was fulfilled.

The Belene prison did not have any educational possibilities and the prisoners who wanted to study were transferred to the prison in Stara Zagora. At the moment of the IHF delegation's visit, there were 67 illiterate prisoners inside the prison. Most of the prisoners had elementary education (287), and only nine had secondary school education.

Though the prison administration informed the delegation that they approved home leave during Ramadan holidays, the prisoners the IHF delegation spoke to denied this. The prisoners who wished to fast had to eat at the same time like other prisoners, and they didn't get any privileges. None of the prisoners had asked the administration to be allowed to pray five times a day. One of the inmates complained that there was no opportunity for a choice of meat and that no religious celebrations were held.

An orthodox priest had the right to hold mass inside the prison's Orthodox chapel. The chapel was a large room with icons that had been painted by some inmates. The floor of the chapel however was in a pitiful state. The priest had never visited the inmates in their cells. Twice a year, during holidays, prisoners signed up with the priest for a service. There was no legal solution according to which the priest could visit prisoners with life sentences. The Pentecostal service was held in the prison every Wednesday.

1.5.11. Inspection

The Deputy District Prosecutor carried out inspections in the prison and took part in the Article 17 Commission meetings that were held every two months. The Prosecutor's visits were always planned and announced. He never wrote any report and did not leave any recommendations.

An inspector of the Labour Office also visited the prison during 2004. He checked the labour safety, and supervised the fulfilment of the domestic labour legislation. He too did not leave any recommendations.

The Bulgarian Helsinki Committee held visits to the prison on a regular basis.

1.6. Visit to Sliven Prison

The IHF delegation visited the Sliven prison for women on 28 September 2004 and spent five hours there. This is the only prison for women in Bulgaria. The IHF delegation first met with the prison Director, Ms. Margarita Petrova, the Deputy Director, the Inspector of the Personnel and another member of the staff. The conversation lasted about 1.5 hours. Then the delegation members observed the premises. They were able to talk with the sentenced prisoners in private and to see some documentation.

1.6.1. General Information

The prison is located near the town of Sliven, which is one of the big district centres in Bulgaria. It was surrounded by a medium-high iron fence. Although the prison was quite old, it was in a very good condition, organized, clean and created a pleasant atmosphere. This could be attributed to the fact that it was solely for women, it was run by women and there was an appropriate management policy. The Director's and the staff's attitudes were humane. The regime in the prison was satisfying. The administration followed a strict legalistic approach that made use of both sanctions and awards.

According to the Director, the material conditions in the prison were improved: the dentist and the physician's rooms were renovated, the sanitary units were reconstructed, thus having now one lavatory in each floor. There was also a new kindergarten and new TV sets in the common rooms (called 'clubs'). No other important changes had been made in 2004.

The number of prisoners changed daily. On the day of the IHF delegation's visit, there were 324 inmates. The capacity of the prison was 400-450 inmates. Although the prison was not overcrowded, it too marked an increase in the number of inmates during the past year and a half. During the Bulgarian Helsinki Committee's last visit on 28 March 2003, the number of inmates had been 280.

1.6.2. Categories of inmates, segregation and its purpose

At the end of 2003, according to the inmates' self-identification, their ethnic origin was as follows: 81 of 223 (36%) were Bulgarian; 57/223 (26%) were Turkish (some Muslim Roma were also included in this group) and 78/223 (35%) were Roma. Thus, minorities and especially Roma heavily dominated in numbers indicating serious problems with the Bulgarian criminal justice system and with their integration in Bulgarian society in general. The prison administration did not classify prisoners on the ground of their ethnic identity.

The prison Director offered the IHF delegation the last annual survey on the age and the types of crime of the prisoners, which it presented also to the Chief Directorate on the Execution of Penalties at the end of 2003. According to this survey by the end of 2003, the prisoners were distributed by age as follows:

- 18-24 years old – 32 women (14%)
- 25-29 years old – 30 women (13%)
- 30-39 years old – 68 women (29%)
- 40-49 years old – 60 women (27%)
- 50-59 years old – 26 women (12%)

- Over 60 years old – one woman

According to the Director's data at 21 November 2003 there were 223 sentenced women. 43 of them were sentenced for crimes against the person (19%), 157 women were sentenced for crimes against property (70%), and 20 – for other crimes.

On the first floor there was a small room for monitoring. It had one screen showing the insides of four cells equipped with cameras that operated 24 hours a day. These were the cells of an inmate with serious mental health problems and three solitary confinement cells. According to the administration, they needed to observe those that had suicidal tendencies or had made suicide attempts.

Four persons were responsible for the inmates upon their admission, since the latter stayed for 30 days in a different part of the prison, so that the individual correctional schedule may be drawn. This is where the medical checks and the evaluation were made.

1.6.3. Material conditions and hygiene

The closed unit for recidivists was situated in a separate wing. Its main entrance (a wooden door) was always locked. The cell doors remained open except when the inmates had their meals. There were 14 cells on both sides of a long corridor, one lavatory, a common room, two heaters and one window (2 x 1 m) at the end of the corridor.

The average cell in this unit measured about 12 sq. m. for three or four people; it had one barred window, a private locker and a wooden floor. Although small for the number of inmates they held, all cells were in a very good condition. Generally, the inmates were put in the same cell with those with whom they share some kind of identity (ethnic, religious, etc). There were some complaints about low temperatures in the cells in winter.

The lavatory (10.5 sq. m.) had two visible parts: one of them had five basins on one side and three on the other, two ground toilets, one mirror and was lit by two electric bulbs; the other part had three showers on one side and five on the other, two ground toilets, one window (1.5 x 0.75 m) and was lit by two more electric bulbs. The lavatory was generally old, clean, a bit damp, with a cement floor, tiles on one of its walls and one heater (1.5 m long).

The common room, which was called "club" (14 sq. m.) had many chairs, a table, two new closets, two windows, a heater, two electric bulbs, a TV set and a sign showing that smoking was not allowed.

The detention unit had 29 rooms on both sides of a long corridor, including a lavatory, a common room (3 x 3.5 m, 3 m high) and rooms for a psychologist and physicians. There was a window at the end of the corridor. Most cells had two beds. The total number of detainees in the unit on the day of the IHF delegation visit was 20, including the three that arrived on 28 September 2004. A standard cell was of 8 sq. m. and was intended for two people. Large windows were facing the prison's yard. As the unit was situated on the first floor, women from this unit could easily communicate with other prisoners who were walking outside or went to work. Lavatory was on the corridor and was clean and in good condition.

A separate prison building hosted the transitional unit on its 1st floor, whose residents could go out in the yard at any point, and the minors' department on the 2nd floor. The unit for minors did not much

resemble a prison. There were 13 rooms on both sides of the corridor. The walls of the corridors were adorned with paintings. It was lit with 11 electric bulbs. There was a room (5 sq. m.) with 10 new basins and another one with four showers and two ground toilets, both in a very good condition. The tea room (4 sq. m.) was pleasant, with a microwave and some wooden furniture for storing items. Minors could have something to drink and smoke there.

All rooms in the minors' department looked like dormitories. The bed linen was clean, and of pleasant colours, the windows were large, there were TV sets in every room, in two cells there were cages with parrots. There was free access to fresh air and natural light, the artificial light was also sufficient. During the visits with their parents the minors could have physical contacts. Every cell could accommodate two inmates. Members of the delegation managed to speak with the girls from two cells. The first two girls were accused of instigation to murder. They were detained on 8 May and until 28 July were kept in Stara Zagora, and then were transferred here. The girls were aged 15 and both could get up to nine years imprisonment. The second pair of girls were accused of cruel murder. They could expect to be sentenced to 12 years imprisonment.

The transitional unit was used for those inmates who had no more than six months to serve until they were released from prison and whose total sentence was under five years. Sixteen men who were brought to Sliven to help with the prison repairs were also settled in the transitional unit. There was one room (7.5 sq. m.) with 10 basins and one room with toilets that was quite damp. At the end of the corridor there was a telephone. The average cell was about 9 sq. m. with three beds, one window (2 x 1.5 m), one table, one electric bulb, lockers and plants.

The prison had a special department for newborn babies. The kindergarten comprised of four rooms, including a lavatory, a room for changing and washing the babies, a kitchen and a dormitory. This unit was new and was in a perfect condition: clean, spacious, sunny (with glass windows), with appropriate furniture (many closets), an area to play with toys and a small veranda where mothers could walk with their babies. On the day of the IHF delegation visit there were three babies and their quite young mothers were taking care of them spending the whole day there (they sleep in the same place), an activity that equals inmates' working day.

According to the law, the prison administration was obliged to provide everything for the raising of the babies (food, vaccinations etc.) up to the age of three. Afterwards the relatives took up this role. However, in practice the prison could provide for the baby until the age of one. After their first birthday, the babies were sent to children's institutions. The mothers could visit their children once a month. There were also mothers that gave their child for adoption directly after birth.

The prison had a unit for inmates with psychiatric problems. The material conditions there were worse, with less furniture but the cells were considered by the administration to be safer in this way, due to the health of the inmates. Three inmates in this unit were sentenced to life imprisonment.

A standard cell was 10.5 sq. m. with 2-3 beds, windows, plastic floor, a bucket and a very small heater. In one of the cell the inmate had serious mental health problems and wanted to hurt herself. She had been in Sliven for three months. She said that she no longer took any medical treatment and that this was due to the general practitioner's decision, but not the psychiatrist's.

1.6.4. Nutrition

The large dining room had a space of about 30-35 sq. m. and was situated in another building. On the day of the visit the menu comprised of:

- a) Breakfast: tea (200 gr.), sugar, marmalade (40 gr.);
- b) Lunch: bean stew (300 gr.), cheese cream (300 gr.);
- c) Dinner: pasta baked in the oven (300 gr.);
- d) 10 slices of bread daily.

Meat was usually served once a week. The tables and chairs in pairs of two were simple, but in a satisfying condition and there were also around 180 lockers for the foodstuffs brought to the inmates by their relatives. The dining room was clean, but permeated by a heavy smell of chlorine.

According to law, the medical unit made a monthly list of inmates who needed more food (pregnant and working inmates). However, both groups received only one or two extra sandwiches. The extra diet for the pregnant inmates lasted throughout the pregnancy and for the following 10 months, yet it could not be characterized as a proper diet, since it was just an increase of the daily calorie intake (3 000 calories) and met no needs specific to pregnancy. The IHF delegation's members were shown the list of the pregnant inmates (four) and those that had some health problems, like diabetes, problems of ingestion and bile (limited number, three in total). Those who had recovered from tuberculosis did not receive any extra food since, according to the prison Director, this was not legally possible.

1.6.5. Medical care

There were three medical rooms in the prison: for the general practitioner, the dentist and the gynaecologist. The dentist's room was fully equipped. There were many medicines in the unit with the price label on them. The general practitioner was an employee of the Ministry of Justice. The psychiatrist was working part-time while the gynaecologist came to the prison three times a week. There was also a psychologist. Sixty medical checks were carried out on 27 September 2004, while on 28 September 2004, 10 exams had been carried out until the time of the delegation' visit.

Medical tests upon admission were obligatory and they involved: a syphilis test, a test for parasites and a blood test. The HIV test was done upon request only, while a test for hepatitis C was done only when a blood transfusion was required since it was expensive. No blood donation was allowed within the prison. There were 15-20 inmates with syphilis annually. Most inmates had fleas or lice. Since drug addicts could not usually have a blood test, they were taken to the epidemiologist so as to take blood sample from another part of the body (i.e. the finger).

There was one recorded case of an HIV positive inmate five years ago. Cases of hepatitis C existed only 10 years ago. During home leave there were cases of domestic abuse and all visible scars were registered in the inmates' medical files. The number of inmates who were drug addicts or dealers was increasing. They faced serious health problems with their kidneys. However, there was no specific treatment followed for drug addiction, like a methadone programme. The administration usually applied one month of isolation in order to help the drug addicts abstaining from drug use, which provoked complaints.

No deaths had been reported in 2004. In 2001 one death occurred because of high blood pressure and heart thrombosis. The investigation showed no fault of the administration. For every occurrence of death an investigation was carried out to check upon the administration's responsibility.

Pregnant inmates were observed by a gynaecologist, who worked part-time. If according to the gynaecologist there was a pregnancy problem of a sentenced inmate, the district prosecutor could terminate the execution of the sentence. According to the law, the prison administration had to prepare a non-obligatory evaluation of this as well. In the case of non-sentenced inmates, the gynaecologist could propose the postponement of the execution of the sentence. In all cases, however, the inmates gave birth in a hospital.

According to the 2003 report, there were 84 mental health cases. The general practitioner, the psychiatrist and the social worker worked on them. They prescribed tranquilizers and anti-depressants when necessary. If medical expertise estimated that some cases were serious, required a long therapy and were deteriorating, then the prison psychiatrist decided upon the necessity of a temporary transfer of the inmates to the psychiatric prison hospital in Lovech. The permission for this was issued by the Chief Directorate on the Execution of Penalties within one day. Afterwards the inmates returned to the prison.

The prison did not have enough free medicines and could not provide for the needs of the prisoners who needed them. Some inmates used special imported medicine, which were brought in the prison by their relatives. All medicine had to be prescribed and approved by the prison doctor, irrespective of how the inmate got it. Only basic medications were left to the security guards in cases of emergency, when the doctors were not in the prison (e.g. during night time).

In 2003 the prison budget was 214 000 BGN (without the salaries) (109 745 EUR). In the first seven months of 2004, the amount was 190 000 BGN (97 436 EUR), which proportionally is more than in the previous year. Until end of July, the prison had spent 67 000 BGN (34 359 EUR) on food and not more than 2 000 BGN (1 026 EUR) on medicines, meaning that every person got only 7-8 BGN (3.6-4.1 EUR) on average.

The prison bought medicines when in case of emergencies or if an inmate had a heart problem. The inmates paid for their treatment. The prison managed to keep the inmates alive, but not in good health, the Director said. The problem the prison faced was that most prisoners did not have health insurance and were not eligible for free medicines supplied by the National Health Insurance Fund. Several prisoners interviewed by the delegation said that the medical personnel sold them medicines. One inmate told the delegation that she had to pay 2 Euros for a dose of Exoderyl, which was prescribed to her by the doctor. The prison administration tried to hide this fact.

1.6.6. Work in the prison

Prisoners could shorten the length of their sentences by working or attending school. If one fulfilled the daily work norm, two working days counted as three days of imprisonment; 14 hours at school counted as one working day.

Despite these advantages, the share of working inmates went down from 72% in the previous year to 64% on the day of the visit. The fact that the Sliven area was not flourishing economically and that not all types of work could be carried out by women had an effect on the working rate of the prison

population. Moreover, the inmates' education status was generally low and they had been unemployed before entering the prison, they had no experience with organised industrial work and they could not learn working in any of the two workshops of the prison. (In one of the workshops army and prison uniforms were sewed, in the other domestic sponges were manufactured).

1.6.7. Discipline and punishment

In 2003, 700 offences were committed in the prison, but not all 700 punishments were applied since pedagogic measures were followed instead. The punishments were the following:

- disciplinary punishment with extra work (cleaning) – 480;
- deprivation of the right to attend prison events – 112;
- disciplinary cell without the right to work – 107;
- decrease of the amount of money prisoners could spend – 35;
- disciplinary cell with the right to work – 8;
- warning – 3.

The delegation was surprised at the relatively high amount of punishments, including disciplinary cells, in the prison. This was apparently due to the legalistic approach adopted by the prison administration.

The maximum length of disciplinary isolation was 14 days, but usually the inmates got 3 to 7 days. Thirty punishments of solitary confinement were postponed due to good behaviour.

During the interviews inmates claimed that some were sent to the disciplinary cells because they signed a petition against the Director's administration. One of the signatories, who were punished with three days' placement in a disciplinary cell, said that she had not paid attention to what the petition said: *"I only went through the text - I didn't really read it..."* The Director explained that an inmate collected signatures to protest against the medical service in the prison. The petition paper was blank and it was subsequently transformed into a petition against the administration, though this was not the reason why the inmates supported it. The Director admitted that the medical service was not satisfactory. There were also cases of disciplinary cells imposed upon inmates with psychiatric problems. Taking also into account the fact that there was no prior psychiatric examination and given that one of the inmates was the author of the collective complaint mentioned above, while the other had problems with her previous cell inmates, the case raised some questions regarding the rationale of the imposition of disciplinary measure. Moreover, during their isolation, prisoners did not receive medicines and/or specialised treatment.

The disciplinary cell the IHF delegation saw had a space of about 6 sq. m. The cell was divided in two parts, one of which was the main barred cell. There was a window that allowed natural light in the other half of the room. There were no beds, but only mattresses on the floor. There was no toilet, but only a bucket for physiological needs and the prisoners had to call the guard if they wanted to go to the lavatory. The two inmates confined there were given a seven-day disciplinary cell because they were fighting. This was their 6th day. They had received many such punishments before. Yet, they saw no need to appeal the order since they did not believe that it would have any effect. They were allowed to take a 30-minute walk outside the main cell, but still in the same room. They told the delegation that the quantity of food was insufficient. There was one electric bulb over the door, which was insufficient.

1.6.8. Use of force and arms

The prison personnel comprises of 145 people – the ratio of personnel to inmates is almost 1:1.5. This included also administrative personnel that supervised the working process. In 2003, there were 38 instances of use of physical force by the personnel, yet there were no signs of any sort of (physical) torture.

1.6.9. Contacts with the outside world

The prison had information sheets displayed on the walls, where inmates could find forms of how to make appeals or applications. The detainees were provided with an envelope, paper and stamps upon admission to prison and then they had to make their own arrangements from then on. Everybody had to buy their own stationery. All correspondence was checked, except for letters addressed to some authorities and international institutions like the European Court of Human Rights and the Committee for the Prevention of Torture. This censorship included the letters to the prisoner's lawyers, in clear violation of international standards. Relatives of inmates who were minors were allowed to visit them only during weekends for one hour. Physical contact was allowed although an officer was always present nearby.

1.6.10. Activities

The open space yard was pleasant, large, and lined with flowers; inmates' washing was put out to dry at one end of the yard. The walls surrounding the yard were under repair. The administration told the delegation that minors were allowed a two-hour walk, while the adult inmates are allowed a one-hour walk.

The education level of the inmates was reflected in the following percentages: 39% were illiterate; 19% had primary education (though this could mean only up to the 2nd grade of primary school) and 58% declared to have some higher educational degree upon admission. However, there was secondary illiteracy among the inmates, i.e. a number of them had some education, but due to specific living conditions had become illiterate.

In 2003, 80 inmates participated in prison educational programmes – mainly evening professional courses that offered certificates.

The school classrooms (the delegation inspected three of them) were in very good condition with some textiles on display. In the professional training classroom (20 sq. m.) with many sewing machines the delegation met with one of the teachers, but there was no class held at the time.

There were also various photographs of the prison units on the wall: the chapel, the professional training classroom with sewing machines, the classroom, the library, table tennis and gymnastics instruments. All these premises were in very good condition and met all requirements.

According to the last amendments of the Bulgarian law there is no limit to the number of home leaves an inmate can take, yet the maximum length of leave is 5 days per time. There are 4 types of home leave granted to the inmates according to their status:

- 1) In 2003 there were 95 occasions of 5-day home leaves for closed type inmates – meaning that some women could have got 2 or 3 leave, while others only 1.
- 2) The annual 14-day home leave is granted to workers of the closed type, open type and transitional type. However, in cases of closed type inmates, this leave is transformed to a 14-day non-work leave spent inside the prison. In order for one of the 17 transitional type inmates to be granted home leave, they need to supply proof of moral correction, after which an evaluation is made.
- 3) The monthly 2-day leave is granted to the open type hostel inmates.
- 4) The monthly 2-day leave is granted to the transitional type inmates, but only after evaluation, meaning that this leave is not a right, but conditional. Twenty-four such leaves were granted in 2003.

A 12-hour leave is granted to the open type inmates in order to go to town on weekends, but only in the Sliven area. In 2003, 182 such leaves were granted.

In 2003, there were two cases of failure to return on time after a home leave. Yet, these leaves were not given upon administration's decision. The two women were in the transitional type units and came back one or two days later. They were not punished for this, but there was a disciplinary sanction imposed. It is unknown whether they committed anything during this absence as nothing was recorded, yet no criminal offences have ever been committed during leave.

1.6.11. Inspections

The last inspection was carried out by a representative of the Supreme Cassation Prosecution, who met the inmates in private. The BHC also visited the prison.

1.7. Visit to Nova Zagora Investigation Detention Facility

The Nova Zagora Investigation Detention Facility was under the authority of the Sliven Regional Department of Detention Facilities. The facility was located underground in the building of the police department. In 1999 the Ministry of Justice had decided to move the facility to another building – either the new district court building, or the former army building in the city. But it has not been moved so far.

The IHF delegation benefited from the reports of the BHC's visits, which were held on 28 November 2000 and 26 August 2004.

The IHF delegation spent three hours in the Nova Zagora investigation detention facility. It started its visit with an inspection of the cells.

1.7.1. General information

The facility was built in 1923-1924. It has been headed by the Director, Mr. Staikov, for a number of years. He had no recent information on any preparations for moving the facility. There were no other significant indications that the 1999 decision of the Ministry of Justice would be implemented soon.

Meanwhile, the detention facility was in a relatively good state of repair considering that the building was old. But the premises were very wet and damp, and the light was absolutely insufficient. Visitors of investigation detention facilities in Bulgaria were not entitled to meet people in pre-trial detention. This meant that the IHF delegation could not verify the information given by Mr. Staikov by talking to the inmates.

1.7.2. Categories of inmates, segregation and its purpose

According to information supplied by the staff, around 50% of the detainees were Roma, although no data about the ethnic origin was gathered and this information could not be corroborated. On the day of the IHF delegation visit, there were six detainees. Women, juveniles, foreign nationals and those detained for the same crime were separated. As the IHF delegation members were told, on average there were four or five, sometimes three, detainees a day.

Women were sent to the facility very rarely since the Sliven women's prison was close by. Meanwhile, they had two women-officers in the regional department who came when any female detainees were sent here.

1.7.3. Material conditions and hygiene

The facility used to have six cells for a total of 18 prisoners, but this had been transformed into four cells for 14 people. On the day of the IHF delegation visit, six detainees were placed in two cells with three and four beds each. The total area of the two cells was approximately 15 sq. m. The size of the second cell, measuring 1.80 x 3 m, was under 6 sq. m., while the first was larger – 2.2 x 3 m. Therefore, the information supplied earlier by the facility administration that the cells measured 3.75 m x 3.25 m was incorrect, as the width of 3.75 m was impossible in that corridor. The question was why the authorities could not provide more than 2 sq. m. per inmate as they had four cells, two of which were empty at the time of the visit. To the delegation this was a sign that overcrowding was caused not only by lack of financial sources, but also by a conscious policy to torture and humiliate inmates. The IHF delegation members were told that inmates did not spend more than three days in the facility, yet there had been cases of a month-long stay, one case of approximately two months' stay, and one case – of over three months!

The average cell was about 7-8 sq. m. with double bunk or single beds. The beds were placed 35 cm apart, the cell had a small glass window over the door (0.2 x 0.3 m), with metal bars. There were two electric bulbs of 100 W or 75 W in between, which was insufficient for reading. According to the measurements that the IHF delegation took, the light was extremely poor – 16-18 Lux at the most, rendering reading impossible, and very high humidity – over 70%. The temperature was reasonable. There was almost no fresh air.

There was no running water in the cells. The cells had cement flooring. The cells were heated from the corridor where radiators were installed and it could be rather cold in the winter. The cells did not have windows; they had only artificial light and ventilation.

The sanitary facility consisted of a toilet and a bathroom. The toilet did not have a toilet seat, but it was clean. The sink had two taps – for cold and hot water. The hot water was provided by a boiler.

Since the occupancy level of the facility was not high, detainees could shower whenever they wanted. There was no limit on the time one could use the shower or shave. The detainees had 24-hour access to the toilet and were allowed to use it after knocking on the door of the cell.

The detainees were allowed to wear their own clothes. They washed their clothes in the bathroom or in the sink and dried them in the yard of the police department. The Soap and washing powder were given out by facility staff.

The corridor in front of the cells was very clean and there were two light bulbs, which were sufficient for the corridor. At one end of the corridor there was an old type heater that burned wood, which was the only means of heating the unit; it was insufficient for this purpose. On the other end, there was a toilet facility used both by the detainees and the police officers on duty (permanent guard in the corridor) at the underground floor. There were also two storing rooms on the same level.

The internal regulations were displayed on the walls of the corridor.

1.7.4. Nutrition

The detainees did not eat cooked meals. The food was brought from Sliven and it was usually cheese, jam, bread, etc. Meat was not included on the menu. The detainees ate in the cells in plastic bowls with wooden spoons. They were also allowed to keep plastic water bottles in the cells.

1.7.5. Medical care

There was no medical personnel and no medical room in the facility. The physician from Sliven who worked at the District Department of Pre-trial Detention Facilities examined detainees upon admission. In cases of emergency the local emergency unit was called. Every day the detainees' health problems were registered in a book.

The IHF delegation's interest of the procedure in the cases when an inmate made claims of torture, including physical traces, was met by confusing responses. The delegation was told that first the paramedic registered the complaint and his findings in the Medical Record Book. Then the detainee had to file a complaint before the prosecutor to initiate a procedure. Thus, neither the paramedic could file a complaint based solely upon his findings, nor could the detention unit do this on the basis of the medical documentation. Hence, it came out that only after a complaint was made by the inmate him/herself the prosecutor could ask to check the medical documentation. Yet, the complaint sent by the inmate should be in written form, given to the Director who should then proceed it to the competent prosecutor. It was, however, clearly stated that the inmates had nothing to write with, and that they could write something only upon the permission of the investigators.

Reportedly, the facility never had any death case or suicide and since 1995 there has been no assault on the personnel.

1.7.6. Contacts with outside world

There is one room in the building used for visits. Meetings with lawyers and relatives were held in this room, which looked like a cell, with beds but without bed sheets and mattresses. There was a table and

a chair; physical contacts were possible.

Relatives could visit detainees every Friday for up to one hour with the investigator's permission. An officer was always present at these meetings. Meetings with lawyers were not limited and were held privately.

Detainees were not allowed to use a telephone.

According to the staff on duty if a detainee wanted to write a letter, the person would be brought to the investigation authority and he/she would permit or refuse him/her to do so. Letters to family and lawyers were censored. With a few exceptions, almost all detainees were able to write and read.

The detainees did not receive parcels. Most of them received food during relatives' visits.

1.7.7. Activities

Since 2000, there was an area for outdoor exercise in the yard of the police department. The facility administration provided two walks during the day for 30 minutes each. The place for walking was extremely small – about 10-20 sq. m. The roof was metal and during summer it should be almost impossible to stay there. The narrow windows between the concrete wall and the roof were barred. There was one bench in this area. Outdoor stay was organised in shifts in order to prevent detainee contacts.

The rest of the time detainees spent in their cells. If they brought TV sets, they could watch them. They could also buy and read newspapers and magazines.

1.7.8. Discipline and punishment

The detainees were allowed to write complaints only upon permission of the investigator. The Director claimed that there had never been a complaint of ill-treatment. The absence of complaints, however, is more a problem than a fact, as in institutions like this there are usually cases of ill-treatment.

1.7.9. Staff

The staff consisted of 12 persons directly involved in working with the detainees. There was no woman on the staff of the facility to perform searches. But in cases of detention of a woman, a female officer from the police department would be called in.

1.7.10. Inspections

The district prosecutor visited the facility once a month. He usually talked to the detainees, entered the cells and registered his visits in a book.

The Bulgarian Helsinki Committee visited this pre-trial detention facility twice. Apart from the BHC, no other independent monitors and no local NGO monitors made inspections to the facility.

1.8. Recommendations on the Ministry of Justice facilities

1. The IHF delegation recommends that the government of Bulgaria take steps to fight corruption in the prisons. All inmates need to have better material conditions, without the exchange of any favours or financial contributions. All inmates must be given proper beddings (mattresses, blankets, sheets, pillows) and appropriate clothes and underclothes, which should be washed at regular intervals. Inmates must be provided basic articles of personal hygiene items and should be allowed to keep reasonable number of personal belongings.
2. The Bulgarian authorities should reform the prison system by providing more diversified forms of custody and should allow for placement in individual and small-group cells and dormitories according to the prisoner's choice, which however, should allow for common activities during the day and should not result to forms of custody akin to solitary confinement.
3. Urgent steps should be taken to improve the material conditions in the cells, especially those for life-sentenced prisoners and disciplinary cells. The cells should be larger, with better access to natural light, heating, ventilation, beddings and furniture. The inmates should be ensured access to outdoor exercise together with other inmates in order to improve human contact.
4. The IHF delegation recommends that more resources should be allotted to the Belene and Lovech prisons in order to provide inmates with enough medicines, food, furniture, beddings, etc.
5. The IHF delegation recommends that the pre-trial detention facility in Nova Zagora is taken out of service.
6. The IHF delegation strongly recommends that the staff and the authorities of the prison make use of all means at their disposal to prevent inter-prisoner violence and intimidation. The authorities must ensure assistance to the victims, and conduct prompt and impartial inquiries.
7. Existing procedures for dealing with cases of torture and ill-treatment should be reviewed in order to ensure that whenever injuries recorded by a doctor are consistent with allegations of ill-treatment, the information is brought to the attention of the relevant prosecutor.
8. Medical services in the institutions of the Ministry of Justice should be integrated with the national health care system. Doctors and other medical staff should be given independent status and supervised only by medical authorities to allow the fulfilment of their duties as medical professionals.
9. The IHF delegation would like to recall that in view to protect medical confidentiality, all medical examinations of persons deprived of their liberty must be conducted without the presence of guards or prison officers.
10. Special measures should be taken to increase the quantity of inmates engaged in activities in the prisons. All possibilities regarding the engagement in purposeful activities of the detainees in the investigation detention facilities should be explored.
11. The IHF delegation recommends that positive measures should be taken in order to improve the conditions for visits. The duration of visits should be extended and the wire nettings that separate inmates from the visitors should be removed. A timetable of the visits should be

organized in a way that would avoid overcrowding of the visit room. This would improve the communication and atmosphere of the visits.

12. The Bulgarian system should envisage and arrange for long-term and spousal visits to the inmates and should provide for appropriate establishments for this.
13. Muslim prisoners should be allowed additional visits on their religious holidays.
14. For those visitors who do not speak Bulgarian the prison administration should find an interpreter to enable communication between relatives. Prisoners should not be required to pay for the interpretation of their conversations with their relatives.
15. The IHF delegation recommends that the Bulgarian authorities repeal the law that requires censorship of prisoners' correspondence. Correspondence should be checked on an individual basis with a judicial warrant only when there are indications of breach of the security and threats to the rights of others. Special measures should be taken to guarantee the confidentiality of prisoners' correspondence with their legal defenders.
16. Disciplinary confinement and all administrative isolation should be imposed by an independent body with due process guarantees. The prisoners should have the right to appeal those measures effectively.
17. One hour of outdoor exercise is a minimum standard and the IHF delegation recommends that measures should be taken in order to guarantee this to all prisoners – both remand and sentenced, and in all facilities, including the investigation detention facilities.
18. The Bulgarian authorities should consider involving prisoners sentenced to life imprisonment in more activities and should allow them more human contact. A special programme for activities should be envisaged for this category of prisoners to compensate for their isolation.
19. Sanitary facilities in the prisons should be thoroughly renovated. The IHF delegation recommends to the authorities to guarantee the access to running water in each cell.
20. It is seemingly a general practice in Bulgaria – the IHF delegation could see it in the Sliven prison – to charge inmates for the medicines they take in the prison. The authorities should take urgent measures to stop this outrageous practice and the human rights organisations in Bulgaria and in other European countries should campaign against it.
21. The government of Bulgaria should establish a system of regular and effective inspections to the places of detention. Bulgaria should consider ratifying the Optional Protocol to the UN Convention against Torture.
22. The Bulgarian authorities should allow for NGO visits with a possibility for private interviews in pre-trial detention facilities for the purposes of human rights monitoring.

2. Ministry of Health facilities

2.1. Background to the procedure under the Public Health Act and under the Code of Criminal Procedure

2.1.1. Civil commitment under the Public Health Act

Placement in a psychiatric institution in Bulgaria is voluntary or involuntary. Voluntary placement does not differ from placement in any other hospital facility. A more serious problem from the human rights point of view is the involuntary placement which, in turn, is of two kinds: that under the procedure of civil/administrative law and that under the procedure of criminal law.

Administrative law procedure (also known as "compulsory treatment"): The commitment of the vast majority of patients to the Bulgarian psychiatric establishments follows this procedure. Under Article 36, para. 3 of the *Public Health Act* (PHA) "Persons suffering from schizophrenia, paranoia, cyclophrenia, epilepsy, senility, presenility, traumatic, vascular and organic mental disorders, infectious, somatogenic, psychogenic and intoxication psychoses, oligophrenia and severe psychopathy who, due to their illness, are likely to perpetrate crimes constituting a serious danger to society or are dangerous to their relatives or others, or seriously threaten their own health shall be admitted for compulsory treatment in a state or municipal treatment facility under a judicial decree." The procedure is regulated by Articles 59, 61-63 of the PHA. Patients are committed by a decision of the district court, at the proposal of the district prosecutor. The prosecutor makes a proposal for commitment based on an investigation and a forensic psychiatric examination report. The court is obliged to consider the proposal within two weeks of receiving it. With the changes to the PHA of February 1997, in addition to compulsory inpatient commitment, the courts may also order compulsory outpatient commitment. The prosecutor may decree a compulsory psychiatric evaluation, on an outpatient or inpatient basis, if the person who is to be committed refuses without good reason to undergo treatment voluntarily. If a person is committed to a facility for inpatient psychiatric evaluation, his/her stay in the institution may not exceed 30 days, though in certain exceptions it may be extended up to three months. These prosecutor's orders are not subject to judicial review. The person may be brought by compulsion to the court session if he/she refuses to appear voluntarily. The court may hear the person in the treatment facility if his/her condition does not allow appearance in court. He/she has the right to legal defence. The patient is not, however, guaranteed any form of *ex officio* defence. According to an interpretative decision of the General Assembly of the Chambers Hearing Criminal Cases (GACHCC) of the Supreme Court of 1984, the participation of a defence lawyer in legal proceedings under Article 59 of the PHA is not obligatory.¹⁰ Every six months the district court pronounces itself *proprio motu* whether to terminate or extend the course of treatment on the basis of the psychiatric evaluation report presented by the health institution.

Criminal law procedure (also known as "involuntary treatment"): Under Article 89 of the *Penal Code*, when a person who has committed an act dangerous to society in a state of legal insanity, or who has fallen into such a state before the pronouncement of the sentence or in the course of serving the

¹⁰ Interpretative decision no. 39 of 7.06.1984, criminal case no. 31/84, GACCC. Despite this decision, however, in most of the cases the judges appoint an *ex officio* lawyer for the patient during the trial phase of the commitment proceedings.

punishment, the court may rule for the person's surrender to the guardianship of his/her next-of-kin, provided that the latter assume the obligation for the patient's care and treatment. Alternatively, the court may order involuntary treatment at an ordinary psycho-neurological facility, a special psychiatric hospital, or a special ward in an ordinary psycho-neurological establishment. A proposal for such treatment may be made by the regional or district prosecutor. Prior to this, the prosecutor is obliged to appoint a medical examination and to order an investigator to clarify whether the person presents a danger to society. Under this procedure the participation of a defence lawyer in the court proceedings is mandatory. In other words, if the person does not hire a lawyer, the court must appoint one. In this case, too, six months following the beginning of the treatment, the court makes a *proprio motu* pronouncement on the continuation, replacement, or termination of the involuntary treatment.

The legal placement procedure for compulsory and involuntary treatment in Bulgaria presents serious problems with the conformity of the Bulgarian law to the provisions of international human rights law guaranteeing the right to liberty of person. Bulgaria is one of the few member-states of the Council of Europe to have lost several cases at the European Court of Human Rights in connection with its methods of placement for compulsory treatment, specifically for the procedures prescribed by the *Public Health Act*. With its judgment of 5 October 2000 in the case of *Varbanov v. Bulgaria*, the European Court of Human Rights established a violation of two provisions of the European Convention on Human Rights (ECHR), Article 5.1, concerning the lawfulness of the detention in psychiatric facilities by an order of the prosecutor for evaluation, and Article 5.4, concerning the right to judicial review of the legality of detention by an order of the prosecutor for evaluation.¹¹ The Court found that the prosecutor alone, without medical basis, cannot place a person in a hospital as the prosecutor cannot guarantee that the person is “of unsound mind”, which is the explicit ground for deprivation of liberty under the ECHR.

While the European Court of Human Rights was hearing this case, the Bulgarian government introduced several amendments to the *Public Health Act* in the sections concerning medical measures enforced by compulsion. Although the changes were made after the case had closed in Bulgaria, the government tried to refer to this reform in order to reject some of the complaints. These attempts were, of course, unsuccessful. Of the three problems relating to the conformity of Bulgarian legislation to the standards of the European Convention, these amendments served to solve only the second, concerning the powers of the prosecutor's office to detain persons for inpatient psychiatric expertise. These powers were given with the new Article 61, paragraph 2 of the PHA: "If the person refuses to undergo psychiatric expertise voluntarily without good reason, the prosecutor shall order that it be conducted by compulsion – on an outpatient or inpatient basis." The other two problems, however, remained unsolved – prosecutors were not obliged to seek any medical opinion prior to a patient's placement in an inpatient facility for expertise, and detention by a prosecutor continued not to be subject to appeal in court.

2.2. Visit to the Karlukovo Psychiatric Hospital

The Karlukovo State Psychiatric Hospital is located in Gara Karlukovo, Lukovit municipality, Lovech district. The IHF delegation visited the hospital on 27 September 2004 from 10 a.m. to 1:30 p.m. The visit was unannounced and the hospital Director and the other staff were taken by surprise. Although

¹¹ The case is available at: <http://cmiskp.echr.coe.int/tkp197/search.asp?skin=hudoc-en>.

the Ministry of Health was informed in advance by a phone call, the staff claimed they were not informed about the forthcoming mission. The delegation first interviewed Dr. Nikiforova – Director of the hospital and Nikolay Stamenov – Chief Accountant.

2.2.1. General information

The Karlukovo State Psychiatric Hospital is a psychiatric establishment under the authority of the Ministry of Health. The first activities concerning mental health care date back from 1902, and with the increase of the number of patients hospitalised on the premises of the institution, the State Psychiatric Hospital was established in 1936. It is situated some 13 km away from the town of Lukovit, in a mountain region, facing a river and a huge rock with caves.

The hospital receives patients with different diagnoses and needs from the North-Western Bulgaria. It had a capacity of 250 beds, and in August (the most recent information the delegation received) there were between 220 and 230 patients.

The average hospital stay (irrespective of whether the patient was there for voluntary or involuntary treatment) was 47-48 days. The diagnoses of the patients were as follows (the figures are approximate):

- 180 patients with schizophrenia,
- 30 patients with bipolar disorder,
- 5-6 patients with epilepsy,
- 2-3 patients with developmental disability, and
- 1-2 patients with alcohol-induced psychoses.

More than half of the patients (over 115) were involuntary hospitalised in 2004.

Statistics on the involuntary patients during 2001-2003:

The statistics for patients placed in the hospital for evaluation with a prosecutor's order under the civil procedure during the past years were as follows:

- 116 patients for 2001,
- 81 patients for 2002,
- 99 patients for 2003.

The numbers of patients placed with a court decision for compulsory treatment were:

- 150 patients in 2001,
- 190 patients in 2002,
- 168 patients in 2003.

At the time of the visit there were 10 patients placed in the hospital under the criminal procedure and the longest stay of a patient following this procedure was seven years.

The hospital had a register for involuntary patients, which the delegation did not see.

Forty to fifty patients were placed under guardianship and they came from both families and social care institutions. The guardians did not sign any documents regarding the treatment and the placement of their wards in the hospital because usually they did not accompany the patient to the hospital. So either the patients themselves or the doctors made decisions regarding treatment or placement.

2.2.2. Categories of patients, segregation and its purpose

The patients were placed in 5 wards:

- First Male Ward – for active treatment of acute psychoses;
- Second Male Ward – for rehabilitation;
- Third Male Ward – for further treatment;
- First Female Ward – for active treatment of acute psychosis;
- Second Female Ward – for rehabilitation and further treatment.

On the day of the visit there was an ongoing renovation of one of the wards, which used to be the First Male Ward and because of that the patients from that ward were transferred to other premises. The ward was not in use, but was expected to start functioning soon. The management, however, planned to place patients from the rehabilitation wards there, as the acute patients were considered to be too destructive to be placed in a new facility. The renovation started in November 2003 and the hospital authorities had received 290 000 BGN (148 718 EUR) from the state budget for renovation and 100 000 BGN (51 282 EUR) for repair of the central heating system. The Director said that they needed an additional 200 000 BGN (102 564 EUR) to finish the renovation.

The intention of the Director was to organise seven wards at the hospital – in addition to the existing five, one for drug addicts and one for patients with personality disorders. She also wanted to transform the ward/s for further treatment into a social care home within the hospital.

The delegation checked some of the medical files of the patients. In several cases the competent court had failed to issue its decision within the statutory 30 days. The staff explained that due to the summer vacations of the court administration some of the patients did not receive a court decision within the one-month period.

The delegation noticed several cases where the legal procedure was breached and the patients were staying illegally deprived of their liberty in the hospital:

M.T. complained that he broke one of the windows of his neighbour's car and was brought to the hospital by police on 7 July 2004 for examination. The expertise done by the doctors was sent on 11 August to the prosecutor. On the day of the visit there was still no court hearing appointed in the District Court in Vidin on his case.

M.V. had arrived on 10 June 2004 and had no court decision yet.

D.G. had arrived on 30 July 2004 and had no decision yet.

M.A. had arrived on 15 July 2004 and had no decision yet.

A 27-year-old involuntary patient reported that he was brought to this hospital on 7 June 2004 from another psychiatric hospital. He was not informed about the reasons for the moving.

Karlukovo hospital also held a small number of persons declared to be criminally irresponsible (around 10) pursuant to Section 89(b) of the *Penal Code*, which provides for involuntary treatment of such persons in an “ordinary psycho-neurological establishment.” As was the case with the civil patients, their placement was subject to a court review every six months. By contrast, the review procedure under criminal law involved a second psychiatric opinion, and the presence of the patient's lawyer in court was obligatory. This legal procedure is respected and followed in every step.

In the Karlukovo hospital free and informed consent for treatment was only sought from voluntary patients, but not from involuntarily hospitalised patients. The hospital had issued a 12-page brochure entitled "For you, patients!" that contained the basic information about the hospital, the daily regime and some information about the visits, religious services and the rights of patients. The chapter on the rights and responsibilities of patients said that the patients were allowed to submit complaints on whatever they were dissatisfied with to the head of the department, the Director of the hospital or to other institutions. This information, however, was too general and did not offer a clear procedure for complaints. The delegation was of the opinion that the information contained in the brochure differed from the actual situation in the hospital and tended to present the idealistic rather than the realistic picture.

Although this was a mental health institution for active treatment, there were patients at the hospital who did not need active treatment and should have been at home or in a social care home. For example, some of the patients in the wards for further treatment should have been in a social care home, but the Director claimed that there were no spare beds in the nearby social care homes.

2.2.3. Material conditions and hygiene

The hospital consists of five separate buildings. One was the administrative building (accountant office, Director's cabinet etc.). The other was an old two-floor building that was being renovated on the day of the visit. There were five rooms with five beds on each floor and a locker for each patient, as well as big closets for the patient's clothes.

The hospital administration planned to provide each room with a TV set. The rooms had big windows with sufficient natural light. They had 5.8 sq. m. for each of the beds and a lavatory adjacent to each room, equipped with a toilet and sink. Each room was equipped with a radiator. In the corridor there was also sufficient light and heating. The windows in this ward were with lead glass.

There was also a dinning room with four lavatories, two rooms for serving the food and washing the dishes. On each floor there were also shared toilets with three toilets and two sinks. In the bathrooms there were three showers and two boilers. The delegation was told that three sets of bed linen were available for each patient.

On the second floor there were two seclusion rooms – one with two beds, a wardrobe, and lockers, and one with a single bed. Their doors were metal with a small window for patient supervision. The hospital authorities thought about the possible ways of putting soft materials on the walls of the seclusion room. There were also one doctor's office and a room for intervention and a nurse's room.

The hospital administration planned to move the women's rehabilitation ward to the second floor and to open a ward for people with drug addictions and personality disorders on the first floor.

There were lots of moisture on the walls on the first floor of the newly renovated building and some of them already started to peel. The impression of the delegation was that the problem with the moisture would postpone the transfer into this building for many months. Apart from this, the delegation had the impression that this ward provided all the necessary material condition for hospital treatment of the patients and should serve as an example how the other wards should be renovated.

Three wards were situated in the biggest three-floor building: the First Male Ward for active treatment of acute psychosis; the First Female Ward for active treatment of acute psychosis, and the Second Female Ward for rehabilitation and further treatment.

2.2.3.1. First Male Ward for active treatment of acute psychoses

The delegation first visited the First Male Ward for active treatment of acute psychoses situated on the ground floor of a three-storey building. The ward accommodated 64 patients. Thirty-one of them were committed for compulsory treatment and an unknown number were placed with a prosecutor's decision for evaluation (the decisions were at the psychiatric dispensary, where they are first sent and the hospital learns about the court decisions when they arrive).

This ward was locked. The corridor was long, the floor was clean, but the building was very old and in a very bad state of repair. The rooms were around 30 sq. m. and had nine or 10 beds, but 13 or 14 patients. Most patients were in the rooms lying on their beds. The rooms were overcrowded with beds and the delegation noticed a couple of cases where two patients had to share a bed. The accountant explained that there were enough beds and sufficient space for each patient, but because of the renovation of the old building the patients were placed in these rooms. He also added that some of the patients were homosexual couples and they chose to sleep together. Some patients were hanging out in the corridor. The walls of the building were seriously damaged and plaster was peeling. The rooms were equipped with radiators, but they were all rusty and seemed to be out of order. Some were torn from the walls. Most of the doors of the rooms were broken and in some rooms the windows had no glasses, but only cardboard and sheets. The mattresses on the beds were thin, very old and dirty. Some of the beds did not have sheets, and those that did were extremely dirty and old. There was a bad smell of urine all over the place. The patients were dressed differently: some wore civil clothes and some pyjamas and old military trousers.

The IHF delegation noticed numerous signs of violence on the patients' bodies. In one of the rooms it saw a patient, a young man, who had lots of open wounds on his arms. Another patient, Y. D., complained of ill treatment by other patients. T. M. complained that Y. had hit him twice in the head with a spade. Y. admitted this. M. T. complained that police officers broke his finger in Vidin, before they brought him to the hospital. The finger was indeed broken and had not been treated since 8 July 2004, something the staff mentioned when asked by the delegation.

The hospital had organised three excursions together with the NGO Psychohronica to the nearby monasteries and caves. They went there by bus and a total of 32 patients attended the visits.

At the end of the hall there was the medical room for the doctor and the nurses. The doctor there kept a record of the patients that were in need of specific supervisions related to some kind of dangerous behaviour. Fourteen patients were supervised because of their aggression, 7 – for their inclination to escape, 9 – for suicidal behaviour and 3 – for auto-aggression.

2.2.3.2. First Female Ward for active treatment of acute psychoses

The ward held 37 female patients in five rooms. The conditions in this ward were similar to those in the acute male ward, only slightly better. The rooms had six to eight beds each. Only one of the rooms (the so called “living room”) had no furniture. The women just smoked and walked around in this room.

The women were poorly dressed, the bed linen was extremely dirty and smelled revolting. The walls were peeling.

2.2.3.3. Second Female Ward for rehabilitation and further treatment

There were around 30 patients in this ward. They had seven rooms with up to seven beds each. The material conditions on this ward were better than in the acute wards. There were blankets and sheets on the beds, as well as places for personal belongings. The staff claimed that they changed the sheets every 10 to 12 days.

The patients were communicative and complained that they had little time for showering and had to hurry while taking it.

On each floor of the main building there were three toilets and a bathroom. The bathroom in the acute male ward did not work because, as the staff explained, there were problems with the hot water supply. Sixty-four men from the ward took a shower in the other building. The patients were allowed to take a shower once a week.

There was a problem with the central heating. It was in need of repair, but was functioning. According to the hospital Director, the central heating was on from 6 a.m. to 8:30 a.m., from 12 a.m. to 2 p.m., from 6 p.m. to 9 p.m. and from midnight to 2 a.m.

2.2.4. Nutrition

Food in the hospital was served three times a day. According to the director, 66 patients received an additional two meals because they suffered from anaemia. The daily food allowance was 1.99 BGN (1.02 EUR), an improvement over previous years, when it used to be as low as 0.43 BGN (0.22 EUR), as in 2002. There was a shop, where the patients could buy food. They could also receive food parcels from relatives.

The kitchen was spacious and clean and had all the necessary equipment. The kitchen staff kept samples of the food for 48 hours. A doctor and a nurse prepared the menu. On the day of the visit, the patients had *musaka* (a mixture of baked potatoes and mince meat) and soup. For dinner, the patients were to have beans and compote. In the kitchen the delegation saw a big plate with fresh salad, but the staff explained that the salad was for the staff, not for the patients. The patients received fresh fruits

rarely – twice a year. On the day of the visit there was no food prepared for the dietary regime of the patients who needed it.

Although the daily food allowance was more than four times higher than in previous years, it was still insufficient. Patients did not receive fresh fruit and vegetables on a weekly basis and had to supplement their diet in the shop subject to availability of money.

2.2.5. Treatment

The major treatment method in the hospital was pharmacotherapy. The money for the medicines was provided by the state budget and they could buy only the cheaper medicines. The neuroleptics used were mostly chlorpromazine and haloperidol. Very few atypical neuroleptics were used. In the men's acute ward only two patients were given risperidone. In the women's acute ward – none of the patients took it. Some patients were administered depot neuroleptics (moditen). Although the neuroleptics were used with correctors, the delegation mentioned patients showing signs of extrapyramidal side effects.

No invasive therapy, such as the electro convulsive therapy and insulin comas, was applied in the hospital. Psychosurgery had never been used there. The delegation understood that it had never been used in any hospital in Bulgaria.

There was, however, no occupational therapy either. It was cancelled in 1991 because the hospital authorities did not provide financial compensation for the patients for their work, although they were able to sell the products they produced. There was no specific law that regulated the percent of the profit obtained by selling the products that should be allocated to the patients.

Around 32 patients took part in trips to Pleven and to the nearby case Sueva Dupka with the hospital bus. For the most part, however, the patients from the acute wards spent the entire day locked in the ward.

The hospital had a small rehabilitation room. It was approximately 30 sq. m. and was equipped with six different body-building machines. The rehabilitator said that all patients when in remission were allowed to use this room. They gathered by ten in each group and spent one hour twice a week (for patients from the acute wards) and three times a week (for patients from the other wards). The rehabilitator said that there were individual programmes for all patients that visited the room.

There was also another room that served as a library, art therapy, and music therapy and for knitting. These two rooms seemed very small and poorly equipped and they provided for a small number of patients (not more than 30).

Four patients died in the hospital in 2004.

2.2.6. Seclusion and restraint

On the male acute ward there was a separate journal where the staff kept record of the restraints. It started on 13 February 2002 (before the CPT visit). From 1 January 2004 to 27 September 2004 some 49 restraints had been applied in the ward. The information in the notebook included the name of the

patient, the length of the restraint and the doctor who ordered it. A nurse and an orderly performed the restraint with leader belts.

The delegation saw a journal for the restraints also in the acute female ward. The first entry was on 14 April 2002. From 1 January 2004 up to 27 September 2004 there were 18 restraints recorded in the journal. On this ward restraints were performed with textile belts. In both wards there was no separate seclusion room. Patients were restrained in front of other patients, on the beds in their rooms.

In the male rehabilitation ward there was one permanently isolated patient, who had committed four murders. This patient was not considered secluded by the staff. The patient had lived in this room for 5-6 years and the guard and the doctors said that during the day he was out of the room, going out (always accompanied by a guard) and he stayed locked in the room by night. The secluded patient was not considered under any form of seclusion and there were no entries for him in the journals. The room was sufficient in space, but poorly lighted with natural and artificial light. The situation of this patient was a serious concern for the delegation, which it expressed immediately to the staff and required urgent measures.

2.2.7. Staff

The hospital staff consisted of 129 persons – Director (a psychiatrist), three psychiatrists, three physicians who were still studying to take a university degree in psychiatry, four vacant positions for three psychiatrists and one internist, two psychologists, one social worker, two physicians, one rehabilitator, 32 nurses (without psychiatric qualification), 49 orderlies, 5 guards and some auxiliary personnel.

The work was organised in two shifts plus duties. Throughout the nightshifts only five orderlies (one in each ward), three nurses, one doctor and a guard stayed on duty.

The maximum salary for a psychiatrist with a specialisation was 465 BGN (239 EUR), for a doctor without a specialisation – 330 BGN (169 EUR) and for the nurse – app. 200 BGN (103 EUR).

The delegation was informed that the salaries were much lower than the amount a psychiatrist could earn with a private practice. Thus, according to the Director, psychiatrists came to work in this hospital for several months, just to gain experience, then left it and start private practice. It was apparently very hard to fill the staff positions for psychiatrists and four of them were vacant on the day of the visit. Most physicians lived on the premises of the hospital in apartments.

2.2.8. Inspections

The Ministry of Health did not make regular visits to the hospital. Their last visit, according to the Director, was three years ago. A representative of the prosecution office had never visited the hospital. The Regional Health Centre and State Sanitary Inspection regularly visit the hospital on a monthly basis.

2.3. Recommendations on the Ministry of Health facilities

1. The procedure for civil commitment to a psychiatric institution for active treatment in Bulgaria should be brought in line with the international standards. More specifically, it should envisage:
 - a. Appearance in person before the court under a specific procedure for determination of the legality of the detention shortly after the initial placement;
 - b. Participation of a lawyer from the moment of detention and obligatory representation during the entire proceedings, including the appeals. A system of adequate legal aid should be envisaged for the patients who are unable to pay lawyers' fees;
 - c. Conducting the court hearings for involuntary hospitalisation according to due process standards, including a possibility of the committed to appear before the court in person, to present an alternative expertise, to have sufficient time for the preparation of the defence and to cross-examine witnesses.
2. The hospital authorities should clearly explain the reason for transferring a patient from one psychiatric hospital to another.
3. The law and the practice in Bulgaria should envisage a procedure to seek informed consent for treatment from the involuntary patients also, as well as a procedure to evaluate the capacity of the patient to give an informed consent for treatment. Advanced directives should be incorporated in law as legitimate forms of expression of a specific will.
4. Forms of treatment in the hospital should be diversified and should include occupational, art, sports and group therapy, in which all patients should be involved. Treatment should make use of the modern anti-psychotic drugs, which should be made available and accessible to the patients.
5. A clear and precise complaints procedure should be made available to all patients.
6. The government of Bulgaria should ensure improvement of the material conditions and of the quality of the food in the Ministry of Health facilities. It should ensure that patients in the Karlukovo Psychiatric Hospital are placed in decent material conditions and that the hygiene standards are improved. Patients in the closed wards should be allowed to spend sufficient time for outdoor exercise.
7. The staff should make sure that patients are not subject to physical abuse from other patients or from orderlies. All signs of physical abuse by officials should be reported to the relevant authorities, investigated and prosecuted.
8. Patients should not be restrained in front of other patients. Mechanical restraint should be avoided. The record about the restraints should contain information about the circumstances and the reason for the measures.
9. Long-term seclusion of patients should be prohibited. The situation with the permanently isolated patient in the men's rehabilitation ward should be urgently reconsidered.
10. The hospital staff should be better rewarded materially and morally for their work.
11. The government should encourage regular inspections, including by human rights NGOs, to the hospital that would bring up quality recommendations and should monitor their fulfilment.

3. Ministry of Education and Science facilities

3.1. Background to the involuntary placement of delinquent children in the facilities of the Ministry of Education and Science

Juvenile delinquents who are under the age of criminal responsibility in Bulgaria (14 years) or those who are over 14 and have committed a criminal offence, but the judge considered it did not merit confining them to a juvenile prison, can be placed in a school for delinquent children. In essence these institutions are remnants from the communist era in both the procedure for placement and the belief that the institution is an appropriate environment for rehabilitation of juvenile delinquents.

The procedure for placement in Bulgaria is regulated by the *Law on Combating Anti-Social Behaviour of Juveniles*, which was adopted under communism and underwent some changes after its fall. The law talks about “anti-social behaviour” very broadly without going into details to spell out different offences. This is why different law enforcement bodies interpret this term differently and what counts for “anti-social behaviour” in one jurisdiction does not necessarily count as such in another.

Special divisions within the police called “children’s pedagogical offices,” which are established in every district police department, investigate juvenile offences. Initially, these offices brought the case before special commissions, appointed by the mayor of the municipality, called “commissions for combating anti-social behaviour”. They are composed of retired schoolteachers, officials from the municipality and acting or retired police officers. Representatives of the “children’s pedagogical offices” are also members of the commissions. The juvenile is brought before such a commission, which serves as a prosecutor, a court and a defence lawyer. It hears the case and imposes a punishment. The latter can be a reprimand, an obligation to repair the damage caused and several others. It can also be a confinement to a school for delinquent children. The selection of the school and the actual placement of the child there are made by the Ministry of Education and Science. There are two types of such schools – educational boarding schools (the former labour educational schools) and social-pedagogical boarding schools. The educational boarding schools are for more serious offences and for repeated delinquents. The social-pedagogical boarding schools are for minor offenders or for children that are at risk of being abused by their families. In fact, however, the commissions do not make these distinctions and the composition of the two types of institutions is more or less the same.

Both the educational boarding schools and the social-pedagogical boarding schools are institutions for deprivation of liberty. Their students are held there involuntarily; they are sought by the police in case of escape and are punished for escapes when caught.

The procedure for placement in a school for delinquent children used to be in gross violation of international due process standards. A number of domestic and international organisations have criticized it repeatedly since the mid-1990s.¹²

¹² Cf. Bulgarian Helsinki Committee, *Labour Educational Schools and the Rights of Juveniles in Bulgaria*, Sofia, 1995; Bulgarian Helsinki Committee, *Educational-boarding Schools and Social-Pedagogic Boarding Schools in Bulgaria* (in Bulgarian), Sofia, 2001; Human Rights Watch, *Children of Bulgaria: Police Violence and Arbitrary Confinement*, September 1996. See also the Regular Reports of the European Commission on the Progress of Bulgaria Towards Accession to the EU since 1999.

The *Law on Combating Anti-Social Behaviour of Juveniles* underwent two major reforms – in 1996 and in 2004. The first reform introduced minor changes in the procedure for placement of children in educational boarding schools with an introduction of a very formal court review (without hearing) of the decisions of the commissions by the district courts. The second reform introduced more due process standards – court hearings, a possibility to appeal and a possibility to be represented by a lawyer. It too, however, preserved the vagueness of the concept of an “anti-social behaviour” without spelling out specific offences and with all the improvements offered lower due process standards than the juvenile penal procedure (e.g., unlike the latter, it does not provide for an obligatory participation of a lawyer).

In 1999 the Ministry of Education and Science issued two regulations on the internal order in the educational boarding schools and in the social-pedagogical boarding schools. These regulations determine the internal procedures for placement, the rehabilitation, disciplinary procedures and the documentation that these institutions ought to keep. In addition to these a number of other regulations of the Ministry determine the educational process and the staff salaries in the schools for delinquent children.

3.2. Visit to Gabrovtsi Correctional School for delinquent children

On 28 September 2004 the IHF delegation visited the Special Educational Boarding School in Gabrovtsi, Kilifarevo municipality, near Veliko Tarnovo. The delegation spent four hours at the school. It talked to the Director, Mr. Todor Haralampiev, and to several members of the staff, conducted private interviews with students placed in the school and inspected all premises. The team also saw some documents related to the placement, the hygiene and the material conditions in the school. The staff was cooperative and did not try to prevent the team from conducting monitoring activities.

3.2.1. General Information

The Special Educational Boarding School in Gabrovtsi is an institution for placement of delinquent boys with mild intellectual disabilities under the *Law on Combating Anti-Social Behavior of Juveniles*. It is the only such institution in Bulgaria and it accepts children that fall under the two categories from all over Bulgaria. All educational boarding schools in Bulgaria are state institutions under the direct authority of the Ministry of Education and Science. The Ministry appoints the Director, it determines the school curriculum and exercises control directly as well as through its territorial divisions – the regional educational inspectorates.

The capacity of the school was 90 children. On the day of the visit there were 13 boys placed and another 13 were expected to arrive by the end of October. The school operated for children from the 3rd to the 8th grades. Two students were orphans; the rest had one or two parents. The Director stated that only 1-2 students were ethnic Bulgarians. The rest were Roma. Thus, in this respect the school resembled the other special schools for children with developmental disabilities in Bulgaria, which are predominantly Roma.

3.2.2. Admission

The school possessed 26 placement documents, which were court decisions. In addition, each boy had a document, certifying his mild developmental disability. The latter documents are issued by diagnostic commissions, consisting of psychiatrists, psychologists and educators. This procedure, however, was seriously flawed and allowed for diagnosing as developmentally disabled many children (mostly Roma) for social, rather than for psychological/psychiatric reasons.¹³

The school had only two children accepted under the reformed procedure of the *Law on Combating Anti-Social Behaviour of Juveniles*. The rest were placed under the old procedure, i.e. with court decisions, which were only a rubber stamp of the decisions of the local commissions on anti-social behaviour, which tried the case in gross violation of due process standards. The Director explained the absence of half of the students with the fact that his school accepted children from all over Bulgaria and hence some children had to travel back from more distant locations.

3.2.3. Material conditions and hygiene

The material conditions in the school were poor, as was the hygiene. The State Sanitary and Hygienic Inspection had refused to sign the school curriculum for the current academic year, which was needed to start the academic year. It had issued a number of recommendations to improve the hygiene, which, according to the Director, could not be fulfilled because of lack of funds. The student bedrooms were dirty; the walls were dilapidated. Some walls were recently painted by German volunteers, who worked in the school over a year ago.

The bedrooms had enough space as the school was working far below its official capacity. They were, however, dirty and poorly equipped. The toilets were dirty, as were the baths, although the latter had enough showers to serve the need of the few children residing in the school. The delegation was told that children bathed twice a week.

The dining room was clean and the tables were covered with tablecloths. The delegation, however, was left with the impression that this was due to its arrival, of which the school authorities knew. There were enough chairs and they were in a good condition.

The school receives its budget from the state through the Ministry of Education and Science. The initial budget the Ministry ensures is usually lower than the final, as the school receives additional money for maintenance during the year. Thus, during 2003 the initial budget approved by the Ministry was 96 317 BGN (49 393 EUR) whereas at the end of the year it reported some 137 844 BGN (70 689 EUR) spent. During 2004, the school got an increase in its initial budget approved by the state – 121 930 BGN (62 528 EUR).

3.2.4. Nutrition

The quality and the quantity of the food in the school was insufficient for the needs of the young boys and did not meet the standards established by the Bulgarian state for providing healthy food to

¹³ Cf. Bulgarian Helsinki Committee, *Special Schools in Bulgarian* (in Bulgarian), Sofia, 2003.

juveniles in state establishments.¹⁴ The daily food allowance per student was 1.70 – 2.00 BGN (0.87 – 1.02 EUR). This amount included the value of the products from the small farm that the school had (two cows, some farmland and a tractor). So, in fact the amount of money provided by the state to the daily food allowance was smaller: 1.00 – 1.20 BGN (0.51 – 0.61 EUR). On the day of the visit, the lunch menu included two meatballs with potatoes and pasta with milk for desert. It was probably better than on days when the school did not have international visits.

3.2.5. Medical care

The school in Gabrovtsi did not have a medical professional on its staff. The medical care was ensured by the GP, whose practice was in the municipal center of Kilifarevo. According to the Director, he visited the school from time to time, but more often the students would be brought to Kilifarevo if case they had any problems. Supply of necessary medication, however, was a serious problem, as the school did not have enough money to buy them. Dental care was also ensured in Kilifarevo, where the students had a personal dentist. It was, however, restricted to urgent interventions since dental care in Bulgaria is mostly paid and the school budget did not have funds to ensure advanced treatment. There were two diabetic students in the school, whose medicines were ensured entirely by the Bulgarian Red Cross.

3.2.6. Education

In theory, the Special Educational Boarding School in Gabrovtsi should follow both the curriculum of the special schools for children with mild developmental disabilities and that of the special schools for delinquent children. It had classes from the 3rd to the 8th grades and, unlike the mainstream Bulgarian schools, operated on Saturdays. According to the national norm for schools for delinquent children one class should consist of at least six students. As the school had only 26 students enrolled, it had to mix four of its classes to ensure that they met the national norm. Thus, the 3rd and the 4th, as well as the 5th and the 6th grades were mixed, i.e. children from both classes studied in one classroom with one teacher, a process that can hardly ensure effective education, especially for children with learning disabilities.

The school had five teachers, five “educators” and one psychologist on staff. Including the post of director, this brought the figure of the pedagogues to 12. Students study in the classroom between 7:30 a.m. and 12:30 p.m. In the afternoon, the educators assisted them in the preparation of the homework and offered additional educational support.

The IHF delegation, however, was left with the impression that the educational process is not something that anybody in Gabrovtsi took seriously. As the State Sanitary and Hygienic Inspection had refused to sign the school curriculum, the academic year had not yet started in the school. The Director explained that they were waiting for the other 13 students to arrive, while in the meantime they were looking for ways to sort out the problems with the Sanitary Inspection. The delegation saw the classrooms, which were in a poor condition, with broken furniture and had very little to offer in terms of educational materials. Some of the textbooks the students used were from the 1970s with

¹⁴ Cf. Bulgarian Helsinki Committee, *Educational Boarding Schools and Social Educational Boarding Schools in Bulgaria* (in Bulgarian). According to this report the daily food allowance per student in such establishments ought to be at least twice higher in order to meet the national nutritional standards.

pictures of the then head of state Todor Zhivkov and Leonid Brezhnev in friendly hugs. The school had to buy some of the textbooks and notebooks with the money from the milk it sold to the villagers.

All teachers come by bus from Veliko Tarnovo. On the day of the visit, several of them showed up shortly before noon, stayed in the school for one hour and returned with the next bus.

3.2.7. Activities

The school had very little to offer to the students in their spare hours. There were two day rooms, where they watched TV or had parties in the evenings. The TV set was old and black-and-white, although the Director was trying to persuade the delegation that it was colour.

During 2000 and 2002 the Director, a couple of teachers and some students visited Germany, where they established cooperation with a local school. In return, their German partners visited the school and helped in painting the walls and bringing some aid. Since 2002, however, these relationships were apparently severed and the entire “German affair” left little traces in the school other than the painted walls, which most of the teachers did not like.

The Director, the teachers and the students interviewed by the delegation said that many students spent their free time helping local villagers. As they did not receive any pocket money from the state, this was a way to earn money. The Director said that in fact they get very little from the villagers and often not even in cash, but in products. He believed that they were exploited.

Some students spent time in Kilifarevo or in Veliko Tarnovo, when they got leave from the Director. According to him, they went to the city for a walk, or for begging or working for money.

Except for the one visit to Germany, the students never participated in any other organised excursion. According to the Director, some of them have never seen the sea.

Although most of the students had parents, only 2-3 had some contacts with them. According to the Director, some parents used their children for begging or for theft.

3.2.8. Discipline and punishment

In Gabrovtsi discipline is maintained by punishment and by rewards, although the school had very little to offer in order to promote good behaviour. The Director mentioned several punishments he imposed, all of which were not legal. These included prohibition to leave the school to the village/city; obligation to look after the cows and, occasionally, slaps.

The Director admitted to slapping the students from time to time, but said that he used this punishment in exceptional circumstances. He believed that anything tougher than slaps is an inhuman punishment, which does not have a pedagogical effect. On the day of the visit the delegation observed a situation when one student, who was apparently punished with a prohibition to go to the town, was begging the Director for pardon and to allow him to leave the school.

The Director also said that the students fought with one another and that he and the other staff interfered. Fights are part of the reason for imposition of punishments. In general, however, the

Director did not believe that they were widespread and that they caused serious problems for the students and the staff.

3.2.9. Inspections

The school was inspected by a number of institutions over the past year. Perhaps the most crucial was the inspection of the State Sanitary and Hygienic Inspection before the start of the academic year. This visit caused a *de facto* closure of the school for sanitary reasons.

A year and a half ago the school was visited by the Veliko Turnovo Regional Education Inspectorate. The Ministry of Education and Science had carried out a visit two years ago. Both visits resulted in some recommendations, but none of them were significant.

In addition, the police and the prosecutor's office visit the school from time to time, but these visits were caused by the need to resolve concrete cases. Although under the Bulgarian *Constitution* and the *Law on the Judiciary*, the prosecutor's office is empowered to exercise control over all "compulsory measures", at no point did this institution visit the school for monitoring purposes and never made any recommendations for improvement of the conditions.

3.3. Recommendations on the Ministry of Education and Science facilities

1. The Bulgarian government should seriously reconsider the future of the schools for delinquent children as they deprive the students from a family environment and hardly serve the purposes of rehabilitation of the juvenile delinquents.
2. The procedure for placement in the schools for delinquent children should be further reformed and brought in line with international juvenile justice standards.
3. The Ministry of Education and Science and other institutions should carry out a thorough inspection of the Special Educational Boarding School in Gabrovtsi, and take a decision about its future.
4. Inhuman material conditions and ill treatment should not be allowed to exist in the Special Educational Boarding School in Gabrovtsi and in the other institutions for delinquent children in Bulgaria.
5. The educational process in the Special Educational Boarding School in Gabrovtsi and in the other institutions for delinquent children in Bulgaria should be improved and brought in line with the national educational standards.
6. The Bulgarian government should offer a meaningful programme of activities and rehabilitation to the students of the Special Educational Boarding School in Gabrovtsi and in the other institutions for delinquent children in Bulgaria.

4. Ministry of Labour and Social Policy facilities

4.1 Background to the procedure of placement in social care homes for people with intellectual and mental disabilities

Placement in a social care home is one of a range of social services provided in Bulgaria according to law. The provision of social services is regulated in the *Social Assistance Act* (SAA)¹⁵ and its *Regulations* (RISAA)¹⁶ and in *Ordinance No. 4* of the Ministry of Labour and Social Policy from March 1999.¹⁷

According to the RISAA, Article 36, the social services may be provided in the community and in specialised institutions. Para. 3 of Article 36 clarifies that one type of such institutions is the social home for adults with disabilities. The same article provides that social services in institutions should be provided only after all other options for social services have been exhausted. The social services provided in these homes are financed by the state budget through the Ministry of Labour and Social Policy (MLSP) and the quality control and supervision of the services is to be done by the regional departments of the Social Assistance Agency at the MLSP – District Social Assistance Department (DSAD).

Article 40 of the RISAA provides that admission to a home has to be initiated by filing a request to the District Social Assistance Department by the person to be placed in the home or by his/her relatives/guardians. The request should be accompanied by an identity card, a personal medical file, and a decision of the Labour Medical Expert Commission for the assessment of the disability. Then the social workers in the DSAD gather information about the person's property, relatives, incomes, needs, health condition and file a needs assessment report to the head of the DSAD suggesting or refusing placement in a home. The head has to send a proposal for placement of the person in a home to the head of Social Assistance Agency at the Ministry of Labour and Social Policy and the latter approves that with a written order. Then the person is placed in a home. The last part of the procedure is not provided in law, but has been practiced since the mid 2003.

The social care homes for people with mental disabilities are three types - homes for people with developmental disabilities, homes for people with mental illness and homes for people with dementia. There are 52 such homes altogether in Bulgaria hosting some 4 500 people (around 2 500 in homes for people with developmental disabilities, around 1 200 in homes for people with mental illness and around 800 in homes for people with dementia).

Placement in a social care home in theory is “voluntary”. The majority of the homes' clients are incapacitated and have legal guardians. They usually apply on behalf of them to the directors of the

¹⁵ *Social Assistance Act*, promulgated *State Gazette*, issue no. 56/19 May 1998, last amended *State Gazette*, issue no. 120/29 December 2002.

¹⁶ *Regulations for Implementation of the Social Assistance Act*, *State Gazette*, issue no. 133/11 November 1998, last amended in *State Gazette*, issue no. 40/29 April 2003.

¹⁷ *Ordinance No.4 from 16 March 1999 for the conditions and order for providing social services*, issued by the minister of labour and social welfare, promulgated *State Gazette*, issue no. 29/30 March 1999.

DSAD and the latter place the incapacitated persons in the homes. When the clients are not incapacitated before being placed in a home, the directors of the homes initiate such a procedure in compliance with an instruction given to them in 1999 by the MLSP.

In these cases the clients are incapacitated while residing in the home. After that they are not allowed to leave the home and if they escape the staff and the local police department initiate a search operation. Given that and in order to satisfy the requirement of Article 5.4 of the ECHR, placement in a social care home should be ordered by a court for everybody who is not able to give consent. No such procedure exists in the Bulgarian legal system (although court review of the placement was introduced for children placed in social care homes in 2003). This makes the majority of placements *de facto* illegal detentions.

In addition, the incapacitation procedure carries many defects – limited options for types of guardianship, lack of a differentiated approach in each individual case, lack of control and review of the guardian’s activities, etc. The *Law on Persons and the Family* provides that “juveniles and adults who, due to their imbecility or mental disease, cannot take care of their affairs, shall be placed under plenary guardianship and shall be declared legally incapable”.¹⁸ The law further stipulates that people with less severe disabilities may be placed under partial guardianship.¹⁹ The basic principle underlying the law is that the legal status of adults who are placed under plenary or partial guardianship is the same as that of minors,²⁰ who cannot carry out legal actions on their own behalf. Specifically, only a guardian may carry out legal actions on behalf of a person under plenary guardianship, while people under partial guardianship can perform legal actions themselves, with their guardians’ consent.²¹

The procedure for placing a person under guardianship is regulated by the *Code of Civil Procedure*, which has not been amended since 1983.²² A person may be placed under plenary or partial guardianship at the request of a spouse, a close relative, the prosecutor, or by anyone who has a legal interest in the individual’s competence.²³ A person whose capacity is called into question must be interviewed in person in court and, if needed, can be compelled to participate in the court hearing. The person’s relatives and experts may also be called to give evidence before the court. If, after the interview the court finds it necessary, it can immediately appoint a temporary custodian who will take care of the ward’s personal and property interests.

The *Family Code*, chapter 10 regulates the appointment of guardians.²⁴ The mayor of the municipality appoints a guardian from among the relatives or close friends of the person placed under guardianship.²⁵ The guardians of people placed under plenary guardianship are responsible for the life, health, and property of their wards, and for representing them before third parties.²⁶ The guardians of people placed

¹⁸ *Law on Persons and the Family*, Article 5 (amended, *State Gazette*, issue no. 89/6 November 1953).

¹⁹ *Law on Persons and the Family*, Article 5 (2).

²⁰ *Law on Persons and the Family*, Article 5 (3).

²¹ *Law on Persons and the Family*, Article 5 (3).

²² *Code of Civil Procedure*, promulgated *State Gazette*, issue no. 12/8 February 1952, chapter 27, Article 275-277.

²³ *Code of Civil Procedure*, Article 275.

²⁴ *Family Code*, promulgated *State Gazette*, issue no. 41/28 May 1985, Chapter 10.

²⁵ *Family Code*, Article 11.

²⁶ *Family Code*, Article 117, para. 2.

under partial guardianship only give consent for legal actions performed by their wards.²⁷ A guardian may request revocation of the guardianship order. The same court hearing procedure then applies.

In May 2003 standards for material conditions and location of the homes were introduced by amendments in the RISAA. Although vague they obliged the homes to provide each resident with hygiene items, bed with full bed clothing, food with sufficient quality and quantity, medical care, activities meeting the needs of each resident, etc. The system of financing the homes for persons with mental disabilities has also changed since 1 January 2003: instead of being dependent on municipal funds, they are currently financed from the state budget on the basis of a standard upkeep cost per resident. In 2003, the Council of Ministers estimated that the annual per capita allowance in a home for people with mental illness should be 1 143 BGN (585 EUR) and 1 446 BGN (740 EUR) in a home for adults with developmental disabilities. In 2004, 2 346.56 BGN (1 203 EUR) was allocated to each resident in a home for mentally ill adults and 1 601 BGN (820 EUR) per resident in a home for adults with developmental disabilities.

4.2. Visit to the Batoshevo Social Care Home

The Batoshevo social care home is located 14 kilometers from the town of Sevlievo in the north of Bulgaria, at the end of a rudimentary road that follows a river. It is a very isolated place, and the location has shown to be deadly for some men who have drowned when trying to escape from the home. One of them had drowned recently.

The IHF delegation visited the home on 27 September at 4:55 p.m. The visit was unannounced. Due to the late arrival of the delegation and the early departure of the staff, it was not possible to meet with the personnel in charge. Neither the Director, nor the deputy director, doctors nor nurses were present at that time. For this reason, the visit lasted only half an hour. While it has not been possible to get precise updated data on the budget or general data related to the residents, the delegation could observe the material conditions.

Most residents could not speak. The delegation spoke with those who could. It also spoke with three staff members who were on duty.

4.2.1. General information and placement

The Batoshevo social care home is under the authority of the Bulgarian Ministry of Labour and Social Policy (MLSP). It is supposed to be supervised by the district and regional departments of the Ministry. It is designed to provide residence to men from 18 years of age with developmental disabilities. The home can accommodate up to 100 men.

The procedure for placement in the home requires filing a request to the District Social Assistance Department (DSAD), either by the potential resident or his relatives. A social worker in the DSAD collects information about the person's property, income, needs, family ties and health condition and writes a report to the head of the DSAD suggesting or rejecting placement in the home. The head of the

²⁷ *Family Code*, Article 122, para. 2.

DSAD then sends a proposal for placement of the person to the head of the Social Assistance Agency at the MLSP, who confirms or refuses placement.

4.2.2. Categories of patients, admission

The most recent visit paid to this institution by the Bulgarian Helsinki Committee was on 16 October 2003. It found that half of the home's residents had been placed there at their relatives' initiative. Ten of them were incapacitated by their relatives. It was alleged by the home Director that they were placed in the home because their relatives wanted to make a profit from their property.

At the time of its visit in October 2003, the BHC noted that from the 98 men placed, 67 were diagnosed with a developmental disability ranging from mild to severe. The remaining 31, however, were diagnosed with schizophrenia, epilepsy or alcohol addiction.

The IHF delegation assumed that this irregular situation had remained basically the same during the months that had followed, since, as a rule, once one is placed in a social care home he/she will live there for his/her entire life. Therefore serious concerns remain that persons suffering from mental illnesses, such as schizophrenia, are placed in establishments for mentally retarded people. They should be moved as soon as possible to institutions where their medical condition can be treated.

4.2.3 Material conditions and hygiene

Two buildings, built in the 1970s, were used for accommodation. The first one was in a poor state of repair. The smell throughout the visit was overwhelming. The stench coming from the toilets could be smelt in all parts of the building. There was a laundry-room where a lot of activity was going on, with many residents washing clothes in a rudimentary environment. The material conditions in the whole building were very poor.

The rooms were overcrowded, with each resident getting a maximum of 2 sq. m. in the sleeping area. In some rooms old metal beds were placed together side by side; only a narrow corridor on one of the bed allowed for free movement. Some beds had no sheets. Others had "rubber sheets," for those with incontinence. These sheets were filthy and looked cold and uncomfortable. There was no other furniture other than beds in the rooms. Night tables were inexistent. The residents had no place to keep personal belongings, such as closets or cupboards. Lamp bulbs were missing from some sockets, and air could be felt passing through the window, raising concerns as to the temperature in the rooms in winter.

The delegation was concerned that overcrowding in the living space could only contribute to creating an inhuman environment, where there was no place for individuality. Violence resulted from these conditions, as had happened in this institution over the last few years.

One part of the building was locked. When the orderly opened the door the delegation saw a resident, who was said to be dangerous, labelled as a "sexual maniac". He had been kept locked up in this section for an extended period of time. The mission team members asked to see a record of the placement in seclusion, but no such record existed. The seclusion had not been prescribed by a doctor and there was no time limit for the isolation, which could go on for an indefinite period of time.

The IHF delegation visited the showers in the first building. Four out of five showers were functioning

(the faucet was missing on one of the showers), and hot water was available. Residents were obliged to take one shower per week. The number of showers for the total number of residents, however, was clearly insufficient. There was no changing room.

The second living space visited was in a somewhat better condition. It was less crowded, and had been refurbished in recent years.

The BHC reported that in October 2003 that home residents wore army uniforms. This situation had changed at the time of the IHF delegation's visit, as all residents were wearing civil clothes, albeit worn out.

4.2.4. Nutrition

The delegation visited the kitchen and the dining room. Both were clean, but the kitchen needed refurbishment. Lunch on the day of the visit consisted of *musaka*, which consists of mince meat and potatoes. Dinner that evening consisted of tomatoes, cabbage, cucumbers and beans.

A member of the kitchen staff explained that the budget for food was insufficient. She said they were complementing the budget by growing vegetables, but that still there was an urgent need for extra money to feed the residents properly, and offer them a little extra that would make their lives more human, such as offering a cake on their birthdays. Apart from the three daily meals, residents did not have access to either food or drinks.

The staff member in the kitchen said that they needed funds for buying cutlery and other kitchen necessities. The problem of fundraising for the home was discussed, and the difficulty of finding donors for such place with male adults was seen as particularly difficult compared to finding donations for equivalent children or women's homes.

4.2.5. Staff and medical care

Only two orderlies were working at the time of our visit, one of whom showed us the facilities, but was not in the position to provide us with information. This person was new in the establishment, after being offered the position in the framework of a programme for jobless people. She had received no training for the job. At the same time, she gave the impression of having a caring attitude to the residents.

The delegation found the level of staffing most insufficient. This was indicative of the lack of care and attention given to the residents. Two orderlies were clearly insufficient to look after one hundred men with developmental disabilities.

Although according to earlier guarantees, a round-the-clock medical supervision would be guaranteed in the home as of March 2003, such an assessment cannot be accurate in view of the situation at the time of visit of the IHF delegation, which was unable to talk to a doctor.

According to the BHC October 2003 report, the total number of staff in 2003 was 35 persons. The monthly salaries ranged from 74 to 128 EUR per month. There should be six full-time nurses and one psychiatrist on a part-time position. The residents had also a general practitioner registered in the nearby town of Sevlievo. Access to a dentist was a serious problem for the residents.

The IHF delegation was concerned that the combined effect of low salaries and remoteness of the Batoshevo social care home resulted in the impossibility to attract qualified staff to work in the home.

Around two thirds of the residents took psychotropic medicines. Once diagnosed, the residents were not reassessed. Only their therapy was sometimes changed. In October 2003, 12 residents were hospitalised for active treatment of tuberculosis. Still, the Regional Epidemiological Institute had not visited the home at that time. The staff had issued a ban for visiting the home at their own initiative.

From June 2004 to the moment of visit in September, three deaths had occurred, one of them as a result of drowning in the nearby river. The two others apparently died from illnesses.

There had been six death cases in 2003, including two resulting from beating of residents by fellow residents. The case of Vasil Malinov Spasov was of special concern. Vasil Spasov was moved from the social home in Dragash Voyvoda allegedly to live in better material conditions. He died on 21 March 2003 after being beaten by another resident. The incident was not recorded in the report book of the home.

A commission composed of a medical expert, a financial expert and the director of the Health Care Department at the District Health Care Centre was called to perform an inspection of the home on 4 April 2003. The aim of the inspection was to find out how the medical care for the residents was provided. The protocol stated that:

“Until March 2003, two paramedics and three nurses used to work in the home. Dr. Cankov (psychiatrist) worked on a part-time position. There was no medical supervision during the night. Since March 2003, medical supervision during the night is ensured.”

The IHF delegation had doubts about the accurateness of the information provided to the commission, as no doctor was present at the time of visit, and it was not clear that any would come any time soon, according to the few staff present. The IHF believes that the security of the residents in the Batoshevo home is at serious risk.

4.2.6. Re-socialization activities

In a separate building, there was one large room, which served as a common “recreational” room. It had one TV set. Watching TV seemed to be the only activity available. The TV was on, but the room set-up, with all the chairs placed against the wall around the room rather than in front of the TV set, did not allow for residents to follow what was going on. No one seemed to be paying attention, and in fact a majority of the residents present were walking around in this room, which was the only place where they could somehow move around inside, especially in bad weather. There were a few magazines available. Some drawing activities were reported in earlier visit reports, as well as work on the home farm, which was not paid.

There was no education programme. No activity was offered to stimulate the residents, including the youngest, who were in their eighteenth, nineteenth or early twenties, and were destined to live a life of dependence and meaninglessness. There was an obvious lack of will to rehabilitate any of the residents,

some of whom, under other circumstances, could live in society if a minimum of understanding for their condition, guidance as to integration, and practical support were provided.

Many of the men placed in the Batoshevo social care home were coming from institutions for children, and their diagnoses might have been put long ago, without any chance of overcoming impairment through rehabilitation. Typically, these men were stigmatised and parked in this home, away from the sight of the population, for their whole life.

Very few residents got visits. No excursion outside of the home had ever been organised for the residents.

Overall, the mission members found the home to constitute a dehumanising environment for people who needed stimulation, care and support.

4.2.7. Budget

Information about the budget for 2004 was not made available. From the October 2003 BHC report, it appeared that the budget of the home that year was 190 978 BGN (97 937 EUR). It was approximately the same in 2002. The Council of Ministers had established a standard allowance per resident living in homes for people with mental disabilities. For 2003, the minimum amount of money to be allocated annually per person in such homes as Batoshevo was set at 1 446 BGN (742 EUR).

State funding for the Batoshevo social care home was clearly inadequate. In order to provide better services, social care homes in general would be encouraged to raise funds, which was a real difficulty for homes located in remote, less developed regions, as the one in Batoshevo. The IHF would like to recall that the State has an obligation to provide sufficient resources to ensure that the institutions it creates for the well-being of disadvantaged members of its population are in a position to offer a decent, human living environment, with the appropriate medical attention that the condition of these people requires.

4.3. Visit to Radovtsi Social Care Home

The IHF delegation visited the Radovtsi social care home on 28 September 2004. The visit was unannounced and lasted from 2:30 p.m. to 4:30 p.m.

The members of the delegation spoke with the person who performed the duties of the director, Gergana Popova (former nurse with additional qualification in social work), the accountant Daniela Gencheva and to the nurses on duty and the residents.

The home was meant to be a residential institution for women with mental illness who did not need active treatment. It was supervised (with regard to the quality of the social services provided) and financed by the Ministry of Labour and Social Policy and its local departments. However, the staff was selected, hired and dismissed by the mayor of the municipality in Dryanovo.

4.3.1. General information

The home is located in a village inhabited by just a few local residents, some 10 km away from the small

town of Dryanovo in the central northern part of Bulgaria. The location itself prevents the possibility of re-socialization of the residents and their effective rehabilitation, although certain efforts in this direction were reported by the Director.

The official capacity of the institution was 115 residents. There were 114 residents admitted to the home at the time of the visit. Only one of them was on vacation with her family. Although the home was meant to be a residential institution only for women with mental illnesses, there were 13 women with developmental disabilities (mild to severe) and three women with epilepsy. The rest were diagnosed with schizophrenia. According to the Director, around half of the residents were Roma. All residents received disability pensions. Ten residents were bedridden, but were able to sit in a wheelchair.

The budget of the institution for 2004 was increased in comparison with 2003 (see above, 4.1). The budget of the home for 2003 was 291 478 BGN (149 475 EUR). The budget for 2004 was 414 452 BGN (212 539 EUR), including the staff salaries. From this amount, the money allocated for the maintenance of the home was 269 854 BGN (138 387 EUR). Below is breakdown of the expenses covered by the maintenance part.

Maintenance budget	2003	2004
Food	57 361 BGN	90 000 BGN
Medicine	4 800 BGN	7 200 BGN
Bed clothing	400 BGN	19 000 BGN
Cleaning materials	3 491 BGN	23 500 BGN
Water, electricity	90 099 BGN	115 000 BGN
Services	2 711 BGN	10 000 BGN
Other	n.a.	5 154 BGN
Donations	4 525 BGN	n.a.

4.3.2. Categories of patients and placement

The Director of the institution could not tell the exact number of residents under guardianship at the time of the visit. According to data given to the BHC in January 2004, 101 residents in the home were under plenary guardianship and eight were under partial guardianship. Problems with receiving the pensions of the residents by members of the home's staff at the post offices were the reason for opening a procedure for incapacitation. So, at the beginning of 2003, the Director opened the procedure. During 20 of the cases' proceedings the home was required to pay 20 BGN for each person's psychiatric assessment. However, in the court decisions no results of the assessment were mentioned.

The Director was a guardian of 84 women and had legal authorisation for the rest of the residents. The guardianship council in the home consists of the guardian (the Director), deputy guardian (social worker or a nurse), and two members (nurses, orderlies). The guardianship council's members for each resident were different.

The Director of the institution stated that all but 2-3 residents were placed under guardianship, but for 20 of them the guardians had not been appointed yet by the Mayor.

The residents were placed in the home following a complex administrative procedure. Usually their relatives decided to apply to the local Social Assistance Department for placement of the person with mental health problems in a social care home. The social workers in the department were obliged to make a social assessment of the needs of the person – to gather information about her incomes, property, family status, education, job history, etc. On the basis of this assessment they could either propose to the Director of the department that the person is to be placed in a home or to refuse the placement. If the social worker proposed placement and the Director of the department agreed, then the file with all documents of the assessment should be sent to the director of the Social Assistance Agency at the Ministry of Labour and Social Policy in Sofia for approval. The person was placed in a home upon approval.

According to the national legislation, this placement is one of a range of social services provided for people with mental disabilities and should be applied only when any of the other measures proved to be inadequate and had been exhausted. But the social care homes in Bulgaria have no alternative for people who have no place to reside.

Six women were admitted to the home in 2003 and one – in 2004. The residents were not permitted to go out of the home's yard. Nevertheless, there were 10 escapes during 2003.

4.3.3. Material conditions and hygiene

The two-storied building of the home was built in 1968-1971 for the purpose of the home. One of the wings was under renovation that had not started yet. The renovation was expected to cost some 300 000 BGN (153 846 EUR), which would be allocated by the Social Investment Fund at the MLSP. At the time of the visit the Director knew only that the contract between the municipality and the Fund had been signed by both sides. This was why the residents were placed in the other wing, which led to overcrowding of the rooms.

There were around 20 rooms - 10 on the first and 10 on the second floor. Each room with a few exceptions had four or five beds. Most of the rooms had wardrobes and lockers, even though they were not sufficient for all the residents in the room. The rooms were different in size varying from 12 to 20 sq. m. Residents had 3 sq. m. at their disposal, including the space for the bed.

The floor was covered with linoleum, the walls were clean, and windows had curtains. The beds had bed clothing in a relatively good state in comparison with other homes, but still leaving a lot to be desired.

Each floor had three toilets – two of them were without toilet seats and one with a seat. The doors of the toilets could not be closed from inside. Their water tanks did not work and they were washed with a bucket of water. In front of the toilets there were six sinks (with two mirrors above them) with running cold and hot water on the second floor and two sinks on the first floor. But only five of them could be used at the time of the visit since some had no taps. The members of the delegation tried the water and there was running hot water in the toilets and the bathroom. Each toilet was used by 19 residents. The Director reported the toilets would be renovated in the near future.

The bathroom was on the first floor and had two chairs for disabled persons and five working showers and one basin. It was heated and had access to natural and artificial light. The residents were allowed to take a shower at least once a week following a week schedule. The bathing days were Tuesdays and

Wednesdays, but the residents were allowed to have showers during the rest of the days if they wanted to. The hot water was provided by a 500-litre boiler.

The home had sufficient bed clothing – blankets, pillows, sheets, mattresses, some rubber sheets for the incontinent residents. The bed clothing was not clean enough, as were the clothes and underwear of the residents. The strong smell of urine could be felt everywhere in the home, especially in the rooms of the bedridden and incontinent residents.

The hygiene in the corridors and the rooms was satisfactory although it left much to be desired.

The home had central heating system installed and the staff claimed oil for the next two months was available at the time of the visit. The residents did not complain of the heating. The temperature on the day of the visit in the rooms was 21°C. The electrical equipment was old, but well maintained. The light in the home was sufficient.

According to the staff all disinfectants and means for maintenance of the hygiene in the building were available. This also applied for the means for maintenance of personal hygiene.

4.3.4. Nutrition

The daily food allowance in the home for 2004 was 2.47 BGN (1.27 EUR). The menu for the week was prepared by a nurse, the storage keeper and the cook. A nurse tasted the meals every day and recorded her impressions in a book. The menu for 28 September 2004 was the following:

- Breakfast – tea, tomatoes and cheese;
- Lunch – potato soup, chicken with rice, apples;
- Dinner – green beans, waffles.

The menu for the next day, 29 September 2004, was going to be:

- Breakfast – tea, butter and bread;
- Lunch – potatoes and meat, yoghurt and cucumber soup, juice;
- Dinner – fried cabbage and biscuit cake.

According to the menu the residents had meat in the meals six times a week, one of which was supposed to be fish. The residents were allowed to buy additional food and drinks from the village shop, which worked three days a week.

4.3.5. Medical care

Medical care was provided by five nurses and one paramedic. Every Monday Dr. Stoykova, a psychiatrist from Dryanovo, came to examine all residents. The GP, Dr. Stanev, visited the home only when called. He examined all residents once a year as a prophylactic measure. This included measuring the blood pressure, pulse, weight, as well as a total blood examination. The examinations for 2004 had been already done at the time of the visit. Several times a year the emergency unit from Dryanovo was called, but sometimes they refused to come. The dental care was provided by a dentist from Dryanovo

and the treatment was paid by the National Health Insurance Fund or by the personal pensions of the residents.

A gynaecologist examined the residents if and when needed. Two years ago a prophylactic examination of the uterus of all women was done. Six residents had also hypertension, six had diabetes (one used insulin, two were on a diet, and two used pills). Three women had epilepsy and took Carbamazepine. According to the medical staff, no abortions had been performed for the last several years.

The medical room measured about 24 sq. m.. It was clean and well equipped. Individual plans for medical care had been elaborated. The residents' therapy was registered in the medical file.

The psychotropic medicines prescribed in the home were: Haloperidol (mainly to residents with developmental disabilities and it was paid by the budget of the home), Chlorazine (mainly to residents with developmental disabilities and it was paid by the budget of the home), Risperidone, Leponex, Luminal, Diazepam, Moditen, Fluanxol, Levomepromazine, Akineton, Parkizant. Of all residents 104 were on permanent therapy with psychotropic drugs – seven of them were on Risperidone, 20 were on Moditen-Depo, 2-3 were on Seroquel and two received Leponex. The rest took only old medicines like Haloperidol and Chlorazine.

There were three death cases for 2004 until the day of the visit – the diseased women were born in 1923, 1925 and 1944. The reasons of the deaths were “acute respiratory insufficiency.”

4.3.6. Seclusion and restraint

There was a seclusion room in the building that was to be renovated, which was allegedly used for residents with contagious diseases. But it could also be used for people in psychotic conditions, although, according to the staff, there was no need for this.

4.3.7. Staff

The staff of the home consisted of 37 persons – the Director, a social worker, a paramedic, an accountant, five nurses, 15 orderlies, two storage keepers, three central heating maintenance workers, four cooks, a driver, a maintenance worker, an electrical system maintenance worker and one person working in the laundry.

All orderlies had one room; the administration, the Director and the medical staff had separate rooms. The remuneration of the nurses ranged between 238 to 250 BGN (122–128 EUR), that of an orderly was 170-180 BGN (87–92 EUR) and the Director received 320 BGN (164 EUR).

4.3.8. Inspections

The Social Assistance Department had visited the home for the last time in 2002. The District Social Assistance Department had visited the home last in the beginning of 2003 and the Inspectorate of the Social Assistance Agency – in April 2004.

4.3.9. Violations of fundamental rights and freedoms

Most of the women had finished at least primary education and were able to read. But the home was not subscribed for any newspapers, magazines and there was no library.

There was only one TV set and one radio-cassette recorder in the living room on the first floor where around 80 women could sit. The room was furnished with 7-8 sofas, 35 chairs, a carpet, curtains and there were flowers everywhere to create a cozy atmosphere. The residents celebrated the birthdays once a month of those of them who were born during the month. 25 to 30 residents participated in excursions to towns and historical sites near Radovtsi.

The women told the delegation that they were allowed to call their relatives on the phone. Although the conditions and the attitude in this home were nice, most of the interviewed women expressed their desire to have their own home and to live with their families. At least 20 women had children and families. Up to 10 women had regular contacts with their relatives.

Part of the residents usually helped the staff with the laundry, the kitchen, cleaning of the rooms and the yard. Ten to fifteen women picked hips and sold them in the town of Dryanovo.

The staff told the delegation about rare cases of violence between the residents – about five cases annually. In these cases usually the staff removed the residents to another room.

4.4. Recommendations on the Ministry of Labour and Social Policy facilities

1. The Bulgarian government should take urgent measures to improve the living conditions and hygiene of the social care homes for mentally disabled adults. It should consider either substantially improving the conditions in the home in Batoshevo or closing it down, as at present the mere placement in this home constitutes inhuman and degrading treatment.
2. A court procedure should be put in place for placement in social care institutions for people under guardianship, as at present the procedure allows for arbitrary placements and does not respect the international standards for treatment of persons deprived of their liberty.
3. The government of Bulgaria should consider developing a programme of deinstitutionalisation of social care for mentally disabled adults through programmes that discourages placement of children in social care institutions and through establishing facilities and types of care that are akin to family environment.
4. The quality of care in the institutions for mentally disabled people should be substantially improved with regard to all aspects of their life.
5. The quantity and quality of the food in the social care homes for mentally disabled adults should be improved.
6. Medical care in the social care homes should be improved. A 24-hour access to qualified medical care (including psychiatric care) should be made available on the premises of the social care institutions.
7. Prolonged seclusion or restraint should be prohibited on the premises of the social care institutions. Seclusion or restraint should be used only for short periods of time, as part of a

treatment plan and when directed and supervised by a physician. All such measures should be recorded in a special journal.

8. A meaningful programme of activities should be organized in all social care institutions for all residents on the basis of a careful assessment of their individual needs.
9. The right to access to information, religion, sexual life and contacts with the outside world should be ensured for all residents of the social care institutions.
10. The government of Bulgaria should take urgent measures to improve personal security in the social care institutions for mentally disabled. It should take measures to eradicate any physical abuse of persons placed in institutions by the staff or by other residents.
11. Staff in the social care institutions should be trained to understand and to attend the specific needs of the residents of the social care institutions for mentally disabled.
12. The government of Bulgaria should establish an effective system of inspections of social care homes and should allow for permanent and unannounced visits of NGOs to these institutions for the purposes of human rights monitoring.

Summary of recommendations

Recommendations on the Ministry of Justice facilities:

1. The IHF delegation recommends that the government of Bulgaria take steps to fight corruption in the prisons. All inmates need to have better material conditions, without the exchange of any favours or financial contributions. All inmates must be given proper beddings (mattresses, blankets, sheets, pillows) and appropriate clothes and underclothes, which should be washed at regular intervals. Inmates must be provided basic articles of personal hygiene items and should be allowed to keep reasonable number of personal belongings.
2. The Bulgarian authorities should reform the prison system by providing more diversified forms of custody and should allow for placement in individual and small-group cells and dormitories according to the prisoner's choice, which however, should allow for common activities during the day and should not result to forms of custody akin to solitary confinement.
3. Urgent steps should be taken to improve the material conditions in the cells, especially those for life-sentenced prisoners and disciplinary cells. The cells should be larger, with better access to natural light, heating, ventilation, beddings and furniture. The inmates should be ensured access to outdoor exercise together with other inmates in order to improve human contact.
4. The IHF delegation recommends that more resources should be allotted to the Belene and Lovech prisons in order to provide inmates with enough medicines, food, furniture, beddings, etc.
5. The IHF delegation recommends that the pre-trial detention facility in Nova Zagora is taken out of service.
6. The IHF delegation strongly recommends that the staff and the authorities of the prison make use of all means at their disposal to prevent inter-prisoner violence and intimidation. The authorities must ensure assistance to the victims, and conduct prompt and impartial inquiries.
7. Existing procedures for dealing with cases of torture and ill-treatment should be reviewed in order to ensure that whenever injuries recorded by a doctor are consistent with allegations of ill-treatment, the information is brought to the attention of the relevant prosecutor.
8. Medical services in the institutions of the Ministry of Justice should be integrated with the national health care system. Doctors and other medical staff should be given independent status and supervised only by medical authorities to allow the fulfilment of their duties as medical professionals.
9. The IHF delegation would like to recall that in view to protect medical confidentiality, all medical examinations of persons deprived of their liberty must be conducted without the presence of guards or prison officers.
10. Special measures should be taken to increase the quantity of inmates engaged in activities in the prisons. All possibilities regarding the engagement in purposeful activities of the detainees in the investigation detention facilities should be explored.
11. The IHF delegation recommends that positive measures should be taken in order to improve the conditions for visits. The duration of visits should be extended and the wire nettings that separate inmates from the visitors should be removed. A timetable of the visits should be

organized in a way that would avoid overcrowding of the visit room. This would improve the communication and atmosphere of the visits.

12. The Bulgarian system should envisage and arrange for long-term and spousal visits to the inmates and should provide for appropriate establishments for this.
13. Muslim prisoners should be allowed additional visits on their religious holidays.
14. For those visitors who do not speak Bulgarian the prison administration should find an interpreter to enable communication between relatives. Prisoners should not be required to pay for the interpretation of their conversations with their relatives.
15. The IHF delegation recommends that the Bulgarian authorities repeal the law that requires censorship of prisoners' correspondence. Correspondence should be checked on an individual basis with a judicial warrant only when there are indications of breach of the security and threats to the rights of others. Special measures should be taken to guarantee the confidentiality of prisoners' correspondence with their legal defenders.
16. Disciplinary confinement and all administrative isolation should be imposed by an independent body with due process guarantees. The prisoners should have the right to appeal those measures effectively.
17. One hour of outdoor exercise is a minimum standard and the IHF delegation recommends that measures should be taken in order to guarantee this to all prisoners – both remand and sentenced, and in all facilities, including the investigation detention facilities.
18. The Bulgarian authorities should consider involving prisoners sentenced to life imprisonment in more activities and should allow them more human contact. A special programme for activities should be envisaged for this category of prisoners to compensate for their isolation.
19. Sanitary facilities in the prisons should be thoroughly renovated. The IHF delegation recommends to the authorities to guarantee the access to running water in each cell.
20. It is seemingly a general practice in Bulgaria – the IHF delegation could see it in the Sliven prison – to charge inmates for the medicines they take in the prison. The authorities should take urgent measures to stop this outrageous practice and the human rights organisations in Bulgaria and in other European countries should campaign against it.
21. The government of Bulgaria should establish a system of regular and effective inspections to the places of detention. Bulgaria should consider ratifying the Optional Protocol to the UN Convention against Torture.
22. The Bulgarian authorities should allow for NGO visits with a possibility for private interviews in pre-trial detention facilities for the purposes of human rights monitoring.

Recommendations on the Ministry of Health Facilities

1. The procedure for civil commitment to a psychiatric institution for active treatment in Bulgaria should be brought in line with the international standards. More specifically, it should envisage:
 - a. Appearance in person before the court under a specific procedure for determination of the legality of his/her detention shortly after the initial placement;
 - b. Participation of a lawyer from the moment of detention and obligatory representation

- during the entire proceedings, including the appeals. A system of adequate legal aid should be envisaged for the patients who are not able to pay lawyers' fees;
- c. Conducting of the court hearings for involuntary hospitalisation according to the due process standards, including a possibility of the committed to appear before the court in person, to present an alternative expertise, to have sufficient time for the preparation of his/her defence and to cross-examine witnesses.
2. The hospital authorities should clearly explain the reason for transferring a patient from one psychiatric hospital to another.
 3. The law and the practice in Bulgaria should envisage a procedure to seek informed consent for treatment from the involuntary patients also, as well as a procedure to evaluate the capacity of the patient to give an informed consent for treatment. Advanced directives should be incorporated in law as legitimate forms of expression of a specific will.
 4. Forms of treatment in the hospital should be diversified and should include occupational, art, sports and group therapy, in which all patients should be involved. Treatment should make use of the modern anti-psychotic drugs, which should be made available and accessible to the patients.
 5. A clear and precise complaints procedure should be made available to all patients.
 6. The government of Bulgaria should ensure improvement of the material conditions and of the quality of the food in the Ministry of Health facilities. It should ensure that patients in the Karlukovo Psychiatric Hospital are placed in decent material conditions and that the hygiene standards are improved.
 7. Patients in the closed wards should be allowed to spend sufficient time for outdoor exercise.
 8. The staff should make sure that patients are not subject to physical abuse from other patients or from orderlies. All signs of physical abuse by officials should be reported to the relevant authorities, investigated and prosecuted.
 9. Patients should not be restrained in front of other patients. Mechanical restraint should be avoided. The record about the restraints should contain information about the circumstances and the reason for the measures.
 10. Long-term seclusion of patients should be prohibited. The situation with the permanently isolated patient in the men's rehabilitation ward should be urgently reconsidered.
 11. The hospital staff should be better rewarded materially and morally for their work.
 12. The government should encourage regular inspections, including by human rights NGOs, to the hospital that would bring up quality recommendations and should monitor their fulfilment.

Recommendations on the Ministry of Education and Science facilities

1. The Bulgarian government should seriously reconsider the future of the schools for delinquent children as they deprive the students from a family environment and hardly serve the purposes of rehabilitation of the juvenile delinquents.
2. The procedure for placement in the schools for delinquent children should be further reformed and brought in line with international juvenile justice standards.

3. The Ministry of Education and Science and other institutions should carry out a thorough inspection of the Special Educational Boarding School in Gabrovtsi, and take a decision about its future.
4. Inhuman material conditions and ill treatment should not be allowed to exist in the Special Educational Boarding School in Gabrovtsi and in the other institutions for delinquent children in Bulgaria.
5. The educational process in the Special Educational Boarding School in Gabrovtsi and in the other institutions for delinquent children in Bulgaria should be improved and brought in line with the national educational standards.
6. The Bulgarian government should offer a meaningful programme of activities and rehabilitation to the students of the Special Educational Boarding School in Gabrovtsi and in the other institutions for delinquent children in Bulgaria.

Recommendations on the Ministry of Labour and Social Policy facilities

1. The Bulgarian government should take urgent measures to improve the living conditions and hygiene of the social care homes for mentally disabled adults. It should consider either substantially improving the conditions in the home in Batoshevo or closing it down, as at present the mere placement in this home constitutes inhuman and degrading treatment.
2. A court procedure should be put in place for placement in social care institutions for people under guardianship, as at present the procedure allows for arbitrary placements and does not respect the international standards for treatment of persons deprived of their liberty.
3. The government of Bulgaria should consider developing a programme of deinstitutionalisation of social care for mentally disabled adults through programmes that discourages placement of children in social care institutions and through establishing facilities and types of care that are akin to family environment.
4. The quality of care in the institutions for mentally disabled people should be substantially improved with regard to all aspects of their life.
5. The quantity and quality of the food in the social care homes for mentally disabled adults should be improved.
6. Medical care in the social care homes should be improved. A 24-hour access to qualified medical care (including psychiatric care) should be made available on the premises of the social care institutions.
7. Prolonged seclusion or restraint should be prohibited on the premises of the social care institutions. Seclusion or restraint should be used only for short periods of time, as part of a treatment plan and when directed and supervised by a physician. All such measures should be recorded in a special journal.
8. A meaningful programme of activities should be organized in all social care institutions for all residents on the basis of a careful assessment of their individual needs.
9. The right to access to information, religion, sexual life and contacts with the outside world should be ensured for all residents of the social care institutions.

10. The government of Bulgaria should take urgent measures to improve personal security in the social care institutions for mentally disabled. It should take measures to eradicate any physical abuse of persons placed in institutions by the staff or by other residents.
11. Staff in the social care institutions should be trained to understand and to attend the specific needs of the residents of the social care institutions for mentally disabled.
12. The government of Bulgaria should establish an effective system of inspections of social care homes and should allow for permanent and unannounced visits of NGOs to these institutions for the purposes of human rights monitoring.

Annex

List of delegation members (in alphabetical order)

Andrzej Rzeplinski, *Helsinki Foundation for Human Rights in Poland*

Antonia Papadopoulou, *Greek Helsinki Monitor*

Brigitte Dufour, *International Helsinki Federation for Human Rights*

Desislava Simeonova, *Bulgarian Helsinki Committee*

Ferenc Köszeg, *Hungarian Helsinki Committee*

Filipina Negrievska, *Helsinki Committee for Human Rights in the Republic of Macedonia*

Dr. Georgi Bankov, *Bulgarian Helsinki Committee*

Irina Sergeeva, *Moscow Helsinki Group*

Krassimir Kanev, *Bulgarian Helsinki Committee*

Lamija Muzurovic, *International Helsinki Federation for Human Rights*

Mila Boyanova, *Bulgarian Helsinki Committee*

Natasa Novakovic, *Helsinki Committee for Human Rights in Serbia*

Sasko Todorovski, *Helsinki Committee for Human Rights in the Republic of Macedonia*

Slavka Kukova, *Bulgarian Helsinki Committee*

Stanimir Petrov, *Bulgarian Helsinki Committee*

Victoria Kuhn, *Association for the Prevention of Torture*

Vjolca Mora, *Helsinki Committee for Human Rights in the Republic of Macedonia*