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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: Creditanstalt-Bankverein 0221-00283/00, BLZ 11 000

Extract from the IHF report

***Human Rights in the OSCE Region: Europe, Central Asia and North America,
Report 2005 (Events of 2004)***

Czech Republic¹

IHF FOCUS: ill-treatment and police misconduct; conditions in prisons and detention facilities; rights of persons with disabilities; rights of seniors; national and ethnic minorities; migrants and refugees (integration).

The main human rights concerns in the Czech Republic were related to the judicial system, prisons, the situation of Roma and Sinti minorities, the treatment of seniors and mentally disabled people, and the integration of foreigners into Czech society.

Judicial reform remained in stagnation – no balanced consensus was achieved regarding the question of the division of responsibilities between the judiciary and the Ministry of Justice with regard to the administration of courts. This raised questions about the independent operation of the courts. Unreasonable delays in judicial proceedings continued, and the European Court for Human Rights (ECtHR) found on several occasions that the Czech Republic had violated article 6 (fair trial within a reasonable time) of the European Convention on Human Rights and Fundamental Freedoms (ECHR).²

The organization and conditions in most Czech prisons continued to fall short of European standards. The central problems in prisons included overcrowding; inadequate medical care; a persistent system of collective accommodation of prisoners; lack of work and other meaningful activity; inadequate access to legal assistance; and lack of physical security. The Czech Helsinki Committee (CHC) expressed concern that the health conditions of convicts and remand prisoners were steadily deteriorating. In addition, cooperation between non-governmental prison monitors and the Prison Service Directory deteriorated.

The police force and police control mechanisms were still in need of organizational and systemic changes and new legislation was necessary to redefine police practices according to EU standards. A new version of the Law on Police Service was adopted in 2003, but its coming into force was postponed. Ill-treatment and other misconduct by the police continued.

Discrimination and violence against Roma continued to be widespread, particularly in the fields of employment and housing. Immigrants to the Czech Republic generally faced numerous obstacles to integration, including in the areas of employment, health care, realization of their political rights, treatment by the Foreigners Police, and access to Czech citizenship.

¹ Based on a report by the Czech Helsinki Committee to the IHF.

² For more information on the situation of the judicial system and court proceedings, see IHF, *Human Rights in the OSCE Region: Europe, Central Asia and North America, Report 2004 (Events of 2003)*, http://www.ihf-hr.org/documents/doc_summary.php?sec_id=3&d_id=3860.

The CHC paid special attention to the situation of senior citizens, a target group whose protection was clearly insufficient and outdated. Another vulnerable group was mentally disabled persons - their confinement in net and cage beds constituted inhuman and degrading treatment and was at the focus of both national and international attention in 2004.

III-Treatment and Police Misconduct

No new legislation was adopted to redefine police practices according to EU standards. A new version of the Law on Police Service was adopted in 2003, but it will come into force only at the beginning of 2006 (not in January 2005 as previously scheduled). This means that urgently needed personnel changes in the police force were also postponed. Moreover, police conduct continued to cause concerns.

The CHC carried out some 30 fact-finding missions in police field offices and police cells.

The findings of the CHC missions indicated that there had been an increase in the number of unjustified arrests and detentions of people mistaken by the police to be wanted criminals. Many of these incidents also involved police violence. While the CHC noted that mistakes by the police can be understandable in some individual cases, it underscored that it is absolutely unacceptable that police officers use violence against suspects. If people are mistakenly arrested, they must receive adequate compensation for the harm they have suffered and the police officers must be sanctioned, the CHC noted.

The CHC received 12 complaints concerning misconduct by the police in 2004.

- A case in which a Belarusian refugee was assaulted by police officers at the Old Town Square in Prague continued in 2004. In July the 2003, two police had – without identifying themselves as policemen and without any obvious reason – asked him what he was doing in the square, pushed him over several times, and taken him to a police station. At the police station the policemen threatened him to initiate judicial proceedings against him if he complained about the ill-treatment in late November 2004, the officers were charged with abuse of public authority and grievous bodily harm.
- In another case, a young man and his father were assaulted by police officers on their way from a graduation ceremony because the police mistook the son for a person against whom an arrest warrant had been issued.

The lack of an independent body to investigate alleged cases of police misconduct was a serious hindrance in efforts taken to stop police violence and other forms of misconduct. The Police Act stipulates that any misconduct must be examined by the Inspection of the Ministry of the Interior, effectively putting police officers in charge of investigating alleged abuses by their fellow officers.

Conditions in Prisons and Detention Facilities

In 2004, significant changes to laws dealing with the prison system were adopted. An Amendment (No. 52/2004 Coll.) to the Act on the Service of the Term of Imprisonment (No. 169/1999 Coll.) and the Act on Custody (No. 293/1993 Coll.) were passed and they brought about important changes. For example, some prisoners were exempted from the mandatory paying of costs related to their accommodation in prison (e.g. those who were unemployed or under 18) and regulations were introduced to safeguard the prisoners' rights to free practice of their religion. In addition, it was decided to extend departments, which focus on the re-socialization of prisoners prior to their release and to facilitate contacts between foreign prisoners coming from the same countries. Moreover, it was decided that measures be taken to ensure education, training and leisure time activities to detainees, and that detained mothers of small children held in custody can keep their children with them.

As of 30 October, Czech prisons housed 18,473 inmates, 15,091 of whom were convicted prisoners and 3,384 remand prisoners.

The CHC carried out 26 visits to prisons in 2004, covering 18 different prison facilities. It was not granted access to Pankrác prison under the pretext that the prison administration wanted to protect the prisoners' personal data. Another setback was that, after almost a year of hesitation, the head of the Prison Service rejected the proposal of the CHC to carry out a survey to establish the ethnic background of the prison population. The reason for this proposal was to investigate the veracity of the estimations that almost 25% of the Czech prison population was of Romani origin. The CHC noted that to establish this fact would be of significance for the further formulation of policies and priorities of Czech society and penal justice.

From January through October, the CHC received 1,031 complaints from prisoners, including 198 hoping for a transfer to another prison, 102 concerning their trial, 101 on medical care, and 54 on their safety in prison.

The CHC found that the most significant problems in 2004 were overcrowding; inadequate medical care; a persistent system of collective accommodation of prisoners; lack of work and other meaningful activity; insufficient physical security; and inadequate access to legal assistance.

The Penal Code amendments (adopted in 2002), particularly those to Act No. 265/2001 Coll., which limited the duration of investigation custody had very practical implications; the Prison Service increased capacities for holding convicted prisoners and reduced capacities for pre-trial detainees. Due to the growing number of prisoners, the Prison Service reduced, as unrealistic, the per capita cell space from 4.5 square meters (as decided in 2003) to 4 square meters, but even this was not implemented in practice.

While some prisons showed only a 10-percent overcrowding, the situation in several other prisons was more dramatic. This problem also had an adverse effect on the establishment of new specialized departments in prisons such health care centers, special departments for mentally ill or disabled persons, anti-alcohol and anti-drug programs, etc.

The standard form of housing was accommodation in large dormitories (8 – 20 persons). This caused problems, especially in terms of personal safety, as the Prison Service was not in the position to provide sufficient supervision at night. Moreover, such accommodation did not provide for necessary privacy.

While prisoners were supposed to undergo specific treatment programs developed individually for them by various specialists (psychologists, educational experts, physicians, etc.), it appeared that such programs were offered on paper but not implemented in practice.

Employment of prisoners increased slightly in 2004, from 40% to approximately 48 % of the whole prison population. Positively, both the Prison Service and the Czech government considered the employment of prisoners to be one of their main priorities in their prison policy. However, in the CHC's opinion, authorities failed to take sufficient steps to address the problem. Particularly, according to the CHC, greater efforts must be taken to make the employment of prisoners more attractive and less risky to entrepreneurs. Another problem concerning prison employment was the lack of unambiguous legal regulations that would explicitly stipulate the scope of rights and obligations of employed prisoners, particularly regarding performance-based remuneration.

In July, new provisions came into force to regulate the use of money received by prisoners from the outside world. While in the past, prisoners were allowed to use this money only after paying their debts for the trial, to compensate any damage that they may cause to the Prisons Service, etc., the new regulation now allows them to use freely 50% of that money, regardless of any unpaid debts. Prisoners need such money to buy, for example, hygienic products, coffee and cigarettes. However, the new regulations were one of the reasons that triggered unrest in prisons in July 2004 because the inmates

were not properly informed about their content. The amended act also introduced an exemption from the dues that prisoners had to pay to the Prison Service for the term of imprisonment; convicts who had not been offered a job opportunity without any fault on their own part were exempted. The obligation to pay had earlier encouraged criminality among prisoners, therefore, the CHC promoted a total abolishment of such payments.

Lack of physical security was one of the most serious problems in Czech prisons. The fact that most prisoners were accommodated in large dormitories facilitated inter-prisoner brutality.

- In one case, two convicts housed in one cell in the prison of Valdice reported independently that they had been physically attacked and sexually abused by other convicts accommodated in the same cell with them. Both victims were collectively accommodated in a severe regime department of the prison. Despite repeated incidences of harassment, no measures were taken to protect them. Both convicts were first transferred to a so-called crisis department, but they were returned to the old unit soon after that. Their application for transfer to another prison for safety reasons was denied, in the first case because the victim was homosexual, and in the second case because the victim was alleged to be homosexual. Prison officers reportedly stated simply that such incidents are common practice in prisons. The prison also failed to take necessary measures against the alleged offenders – the prosecution was terminated due to lack of evidence.

The conditions of the unit in Valdice where the incidents had taken place were especially severe. The number of prisoners held in one cell was about 15, and the inmates were locked up in their cells almost all day. They were only marginally involved in treatment programs and specialist care (e.g. psychological care) was rarely available.

The CHC received information, which indicated that prison staff treated inmates inhumanely in two prisons – there were reports of blackmailing, physical attacks and sexual abuse. The allegations were in the process of being verified as of the end of 2004.

In 2004, the Prison Service established a new department for prisoners who were regarded as dangerous or potentially dangerous. While the CHC agreed that a separate department will indeed help prevent disturbances, it also criticized that the restrictions posed on the rights of inmates held in such cells were excessive and that some pre-emptive acts allowed by the staff were punishable under the Criminal Code. It also urged that the regulations for prisoners be adjusted on a case-by-case basis, that remedy measures against transgressions by prison staff be guaranteed, and that a maximum term be set for the placement of prisoners in such a department.

No court review was generally available for prisoners subject to disciplinary measures, even in cases in which they were ordered to stay up to 20 days in isolation.

Both convicted and remand prisoners had the right to medical care within the scope and subject to the terms and conditions set out in the Act on the National Health Care. In contrast to other citizens, they did not have the right to free choice of a physician, clinical psychologist or health care facility. Prisons had medical care facilities and there were prison hospitals in the prisons of Brno and Prague Pankrác. If adequate medical care was not available in these facilities, the Prison Service could make use of civilian specialists with whom it had special contracts.

Most complaints from prisoners to the CHC concerned medical check-ups and the lack of avenues to remedy inadequate medical care in prisons. Prisoners also asked for assistance when seeking to be released for health reasons. The CHC's ability to help them was impeded by the fact that physicians working at prison health care facilities strictly refused to provide the necessary information, even when the patients themselves asked for it. As of the end of the year, Czech authorities were preparing a new regulation that will explicitly stipulate the unrestricted right of the patient or his/her legal representative or legal successor to access detailed and specific information on the health condition of the person, including medical documentation.

The CHC expressed concern that medical care provided in prisons was inadequate in some cases and that the health condition of convicts and remand prisoners was steadily deteriorating. For example, in

one case a patient's sight was permanently damaged by a long-term application of drops containing corticoids, and the patient also suffered from a lack of dental care.

A specific question related to the medical care in prisons is the intention to transfer prison medical care from the Prison Service (under the Ministry of Justice) to the competence of the Ministry of Health. The CHC welcomed the plan hoping that this move would increase the independence of prison medical staff from prison administration and the Prison Service and thus better guarantee an objective approach to medical care of prisoners in all cases and hinder any interference that is not based on medical necessity.

Rights of Persons with Disabilities

Cage Beds

New regulations on the use of net- and cage-beds for mentally disabled persons brought about improvements in their treatment. The use of such beds came under heavy criticism in June 2004 when writer H. Rowling made a statement about holding children in hospitals and orphanages in net- or cage-beds. He also urged the Czech government to stop the usage of these measures as unfit for modern mental medicine. As a response to Rowling, the minister of health prohibited the use of net- and cage-beds in psychiatric hospitals. However, he was immediately criticized by the president of the republic who called medical experts for a special meeting. The meeting found that the use of net- and cage-beds was appropriate in specific situations.

The public debate clearly showed that the usage of – not only cage or netted beds – all restraint measures for patients were not regulated appropriately in Czech law and that the situation required a prompt solution.

As a result of public debate, the Ministry of Labor and Social Affairs issued an internal directive, which regulated and limited the usage of cage and netted beds to absolutely necessary cases only, such as direct aggression or other dangerous behaviour by the patient that would otherwise be uncontrollable. The ministry also started the preparation of an appropriate methodical directive for social centers and improved their funding to enable usage of other less negative immobilisation measures.

The legislative situation, however, had not changed as of the end of 2004, as the above-mentioned directive has no legal power but only serves as an internal measure for the social centers and their employees. The Ministry of Labor and Social Affairs has drafted amendments to the social security act, which deals with the usage and control of the netted and cage beds. The draft amendments define the conditions for usage of the beds, and empower the ombudsperson to oversee implementation.

While being an important step in the right direction, the draft amendments only deal with patients in social centers, not with those in hospitals. The usage of net- and cage-beds in hospitals continues to be regulated only by the prohibition of the minister of health as an internal measure that does not have the power of law. Moreover, the regulation is not sufficient. For example, it provides for no independent preventive control and the persons whose personal freedom is limited have no possibility to file a complaint. Also, the lack of sanctions for any infraction of new rules makes them only a half-hearted solution.

Net-beds and cage-beds are relics of the Austro-Hungarian medical tradition to handle overly aggressive patients who cannot be controlled. The Czech health system has traditionally used this kind of technical equipment to control persons not only with mental disabilities, but also in situations in which the lack of personnel has made it difficult to deal, for example, with old people in social care centers etc. These measures were generally found more appropriate for struggling with aggression than the use of other physical measures such as a strait-jacket or medical treatment. However, the widespread use of net and cage-beds has also included situations that are neither based on medical

diagnosis nor threatening to patients or staff. Very often they have been used simply to avoid hiring additional staff or trying to adopt other more humane – but more expensive – technical measures to control patients. Net and cage-beds have been used in some institutions with no control in terms of time – a person’s freedom of movement has been known to be restricted in this way for up to ten or more hours at a time. Such treatment constitutes inhuman and degrading treatment.

Rights of Seniors

The Czech Republic’s policy on senior citizens is spelled out in the *National Programme for the Preparation for the Ageing for the Years 2003 – 2007 in the Czech Republic* (hereafter, the national program).

At the September conference entitled “Aging in the Czech Way,” the Seniors’ Council of the CHC presented the results of its analysis of the implementation of the national program and called upon the government to launch a dialogue on the issue with the Ministry for Labor and Social Affairs and the deputy prime minister. A positive result of the conference was that it initiated discussions on this issue with ministries in charge of issues related to seniors’ rights.

The CHC stated that the government had so far failed to implement adequately the national program, and in the cases in which it had, the implementation of the goals has been only formal, with very little practical result.

Among other things, the central legal problems were that Czech legal provisions and practices failed to provide support for seniors’ daily life in their natural social environment, offered seniors poor quality of social services, failed to take the aging into consideration in professional life, as well as failed to inform seniors properly about social services available to them and provide them with adequate pensions.

The government had failed to create sufficient anti-discrimination tools in the form of legislation and did not use the already available instruments to protect seniors. The transposition of European instruments to Czech legislation remains incomplete. For example, an anti-discrimination law is necessary, among other things, to establish bodies that would provide protection against discrimination.

Czech law also directly discriminates against the elderly in many ways. For example, retired people who provide help for their families do not have the right to a financial remuneration that is awarded to younger family members who do the same. The criminal law provision on physical assault is indirectly discriminatory in that it requires a senior citizen’s consent for the initiation and continuation of the criminal prosecution of a perpetrator, who in many cases is his/her relative or person attending to him/her. Consent to prosecution has to be repeated twice in the course of the process.

In addition, there were no declared state programs in place to train state administration employees in gender mainstreaming, or to raise awareness among judges and policemen of the specific problems facing senior citizens.

The state spent several times more on the residential care of seniors than to support their daily life in their natural social environment. The quality of social services offered to seniors was not of acceptable standards. Czech law does not provide for special provisions dealing with elderly users of social services and fails to provide them with the necessary assistance when they apply for services. In practice, municipal authorities often rejected seniors’ applications due to problems caused by impaired communication. In addition, applications for services were rejected on the grounds of the applicant’s low standard apartment. Because the authorities fail to inform seniors about their rights and help them to access them, it is necessary for NGO’s to make information on social services available to seniors.

One example is the manual produced by the CHC that focuses on the protection of rights for consumers of social services.

Urban planning also failed to respect aging as an integral and natural part of life. In the field of housing, municipalities did not provide any advantages to investors who develop various types of integrated housing, such as community or protected housing, which are decisive for the maintenance of social cohesion. The CHC called for housing with barrier-free access and economic affordability. Comprehensive social services linked to seniors' natural social environment would enable them to lead a content life.

In the field of employment, there were no comprehensive programs to support and motivate employers and employees in improving adaptability and flexibility during a professional career. The National Employment Action Plan consists of rigid legal regulations that are helpful neither for employers nor for employees. In the remuneration of employees, people older than 60 received the same salary as younger, less experienced employees, for the same work. The Directive No. 3 of the European Employment Strategy has not been properly implemented.

No general agreement was achieved on the pension system and its basic principles. The public was falsely led to believe that the payment of pensions should be seen as a "present" from the national budget generally funded by taxes. It was not clearly stated that the pension system is a social insurance system, the funding sources of which reside in the paid premiums. In 2003-2004, the pensions were not even raised to the level set by law, a fact that further extended the gap between wages and pensions.

The EU concept called "policy of active ageing" (PAA) has not been implemented in the Czech Republic. This concept stresses the basic fact that a relatively good health is the basis for aged people to lead an active life. Good health, in turn, can be maintained only if seniors are able to care for themselves properly. PAA places an emphasis both on preventive measures and the fact that the health care systems must prepare themselves for increasing numbers of people requiring long-term medical care. The PAA requires the establishment of a system that will be capable of providing such long-term medical care. The gradual implementation of the PAA involves a principle precondition – the way in which old age is perceived and the method in which seniors are treated must be changed both on the institutional and individual level.

It is necessary to re-define the basic elements for the creation of a modern system of social work and services. The basis for this must be new legal regulations that allow for the fulfillment of this new system. In addition, educational programs must be in place to facilitate older employees and seniors' access to modern technology. As of 2004, there were no comprehensive subsidy programs to support the resolution of this problem.

National and Ethnic Minorities

*Roma and Sinti*³

The European Commission against Racism and Intolerance (ECRI) published its third report on the Czech Republic in June. It expressed deep concern regarding the deplorable situation of Roma at the local level. According to the report, Roma communities continued to suffer from social and economic disadvantage, aggravated by changing economic conditions, discrimination and a lack of willingness by local officials and communities to adopt the necessary measures to improve their plight.

³ Unless otherwise noted, based on ECRI, *Third Report on the Czech Republic*, adopted on 5 December and published on 8 June 2004, http://www.coe.int/T/E/Human_Rights/Ecri/1-ECRI/2-Country-by-country_approach/Czech_Republic/Czech_Republic_CBC_3.asp.

The ECRI noted that there had been few detectable improvements since ECRI's second report in 1999. Instead, Roma communities were increasingly marginalized by, among other things, the fact that their communities were pushed out of Czech towns into ghetto-like neighborhoods.

According to ECRI, discrimination against Roma in both the public and private housing market continued, and even accelerated. ECRI cited various methods used by local authorities to distinguish Roma from other people in the allocation of public apartments, resulting in further discrimination against Roma. As a response to evictions and the housing problems faced by Roma, municipal authorities often offered families substandard housing on the outskirts of cities, thus leading to their physical ghettoization. Many such Roma families were housed in "bare flats" (*holobyty*) built for "socially inadapted people." Living conditions in such flats were often so poor as to pose a health risk to their inhabitants.

The ECRI noted that while central authorities appeared to be willing to take measures to improve the situation of Roma, the majority of local authorities seemed not only to hinder the realization of such as politically costly, but also attempted to reap political gains through exploiting racism and taking actions that exclude Roma from local communities. This was all the more worrisome as local authorities had jurisdiction over most fields of life influencing the daily existence of Roma communities, especially in the fields of housing, social services, education and health care, the ECRI noted. Moreover, the recent reform of the public administration made it even more difficult for the central authorities to ensure local implementation of national policies, such as the "Roma Integration Policy Concept."

The ECRI also expressed concern that Roma children continued to be sent to special schools designed for retarded children. While the Ministry of Education had developed a standardized test aimed at improving the assessment of a child's mental level, these tests were not mandatory. In addition, ECRI pointed to the worrisome fact that a disproportionately high number of Roma children had reportedly been removed from their families and placed in state institutions or foster care. It also voiced concern over reports of harassment of Roma children by law enforcement officials, including ill-treatment, placing them in detention and coercing them into confessing to minor crimes resulting in a criminal record.

Violent attacks against Roma were also frequent in 2004, and police often failed to act adequately. In its May 2004 conclusions on the Czech Republic, the United Nations Committee against Torture raised concern about the persistent occurrence of acts of violence against the Roma and the alleged reluctance on the part of the police to provide the Roma with adequate protection and to investigate such crimes.⁴

In addition, it appeared that courts were slow to hand down appropriate sentences to perpetrators of violent attacks on Roma.⁵

- On 5 January, the Jeseník First Instance Court ordered three-year suspended sentences to three youths who, in June 2003, had seriously injured two Roma. The youths had knocked at the door of Jan Ziga (27) and Lydie Zigovala (21), who was pregnant at the time, and impersonated police officers. As they were let in, they hit Lydie Zigovala with a cobblestone in the eye, and attacked Jan Ziga with broken bottles, cutting his face and chest. Lydie Zigovala lost the sight in the injured eye. On appeal, the Olomouc Appeals Court ordered a retrial of the case. Two weeks after the court's decision, several neo-Nazis insulted the Ziga couple again.⁶

⁴ UN Committee against Torture, *Conclusions and Recommendations of the Committee against Torture: Czech Republic*, 13 May 2004, http://www.ohchr.org/tbruc/Czech_Republic.pdf.

⁵ Information from the Czech Helsinki Committee, December 2004.

⁶ ERRC, *Suspended Sentences for Perpetrators of Violent Attack on Roma in Czech Republic*, News Roundup: Snapshots from Around Europe, updated on 4 June 2004, <http://www.errc.org/cikk.php?cikk=1864&archiv=1>.

The European Roma Rights Center (ERRC, IHF cooperating organization) reported that Romani women in the Czech Republic were at risk of being sterilized without being fully informed and sometimes even without their consent. According to the ERRC, in some cases consent was not provided at all prior to the operation, which was performed during delivery or shortly before delivery of a baby, during advanced stages of labor or in circumstances in which the mother was in great pain and/or under intense stress. In some cases, officials had reportedly put pressure on Romani women to undergo sterilization by using financial incentives or threats to withhold social benefits. In other cases, explicit racial motives appeared to have played a role during doctor-patient consultations.⁷

From the 1970s to the 1990s, Romani women were programmatically sterilized in the former Czechoslovakia under policies aimed at reducing the "high, unhealthy" birth rate among Roma. It was believed that the practice ended in the mid-1990s. Criminal complaints filed with Czech and Slovak prosecutors on behalf of sterilized Romani women in each republic were dismissed in 1992 and 1993.⁸

Migrants and Refugees

Integration

Immigrants in the Czech Republic faced numerous obstacles to integration, including in the areas of employment, health care, realization of their political rights, inadequate treatment by the Foreigners Police, and access to Czech citizenship.

Access to public health care services remained seriously restricted for foreign children with temporary residence in the Czech Republic. Only minors with a permanent residence permit were fully covered by the public health insurance, which guarantees full compensation of medical care for serious illnesses. Other minors, who often had been living in the country with their parents for many years, needed private health insurance paid for by their parents. However, private health insurances did not cover the same full health care as the public health insurance system, and excluded automatically the most expensive treatments. A draft law on public health insurance for foreign children was proposed by the government in February 2004 but it was rejected by the Chamber of Deputies as too expensive.

The employment situation for foreigners improved after a new law came into force, providing for more flexible regulations. For example, it allows foreigners to change employment without requiring them to leave the country for a period of time, as the previous law prescribed. Also, the new regulations provide effective rules to control and sanction employers who hire foreign employees without work permits rather than sanctioning the employees.

A very serious problem concerning foreigners in the Czech Republic was the operation of the Foreigners Police in enforcing the law on residence of foreigners. Foreigners complained about rigid procedures, rude behavior, preference of routine negative decisions rather than helping the uninformed foreigners, and poor legislation.

The law on residence does not provide for clear criteria for the issuing of residence permits but vests the police with extensive discretionary powers to decide on them. Such broad powers were not controllable even by administrative courts (it is only possible to complain to the Ministry of Interior about decisions by the police). Even in cases of permanent residence request by a foreigner who has a spouse and child who are both Czech nationals, the foreigner must wait for the decision abroad with the possible outcome that authorities declare that he/she has no legal right to obtain a residence permit.

⁷ ERRC, "Clarifying Positions: Coercive Sterilisations of Romani Women in the Czech Republic," 16 September 2004, <http://www.errc.org/cikk.php?cikk=2014>.

⁸ Ibid.

Another problem was acquiring Czech citizenship. The application procedure was not transparent, the legislation was vague and the Ministry of Interior officials enjoyed almost absolute discretionary powers in deciding whether or not to grant citizenship, making the procedure unpredictable. Even in cases in which the applicant had direct family ties in the Czech Republic, the ministry was able, without giving any reason, to reject a request for exemption from the condition of a five-year permanent stay to be eligible for citizenship.

The right to participate in political life was not fully granted in legislation – permanently residing foreigners had only the right to participate in municipal elections, not in regional elections, despite the fact that regional political representatives have direct political impact on the outcome of public issues at the municipal level. In addition, permanently residing foreigners were not allowed to establish political parties and they were not allowed to execute all political rights e.g. to participate in municipal referendums.

Positively, the Ministry for Labor and Social Affairs – which is the main coordinating agency for the integration of foreigners – launched a program for immigration, but it deals just with limited nationals who represent only a fraction of all foreigners.