



The Inevitable Rise...New Prisons, New retributive



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Introduction

International Standards for Prisons and Inmate Care

International charters and conventions focus on protecting prisoners and detainees from violating their basic rights, foremost of which is their right to life and their right to physical, psychological and mental health. The Universal Declaration of Human Rights, adopted by the United Nations in 1948, embodied rights related to the importance of treating every human being in a manner that preserves his human dignity and his right to decent treatment. The declaration emphatically affirmed in Article 25 that *“every person has the right to a standard of living sufficient to ensure the health and well-being of himself and his family in terms of food, clothing, medical care and necessary social services”*.

The International Covenant on Civil and Political Rights, which was approved by the United Nations General Assembly in 1966 in Article 10, stipulates that “all persons deprived of their liberty shall be treated with humanity that respects the inherent dignity of the human person”.

The International Covenant on Economic and Social Rights, which was approved in 1966, referred to the prisoner’s right to health in Article 12, which states “the right of every human being to enjoy the highest attainable standard of physical and mental health, and to include the measures that states parties to the covenant must take to ensure the exercise full of this right are those measures necessary for:

- Prevention, treatment and control of epidemic, endemic, occupational and other diseases.
- Creating conditions that would secure medical services and medical care for all in the event of illness.
- The charter of the World Health Organization also stipulates the right of the individual to his health in the best conditions, regardless of his gender, religion,



political beliefs, social or economic conditions, given that the right to health is one of the basic rights of the individual.

The right of prisoners and detainees to be provided with the necessary medical care was confirmed in the Standard Minimum Rules for the Treatment of Prisoners adopted by the First United Nations Conference on the Prevention of Crime and the Treatment of Offenders, which was held in Geneva in 1955, and approved by the Economic and Social Council in May 1977 on the prisoner's right to health care and the necessity of providing his medical services.

Rule 22 on Medical Services provides that *“every prison shall have the services of at least one qualified physician, having some knowledge of psychiatry. The medical services shall be organized in a manner closely related to the local or national public health department. to include a branch of psychiatry diagnosing mental anomalies and treating them when necessary”*.

The same rule emphasized *“the necessity of transferring prisoners who require specialized care that they'd be transferred to specialized prisons or to civilian hospitals. When the treatment services provided by hospitals are available in prison, their equipment, tools and pharmaceutical products must be adequate for the purpose of providing medical care and treatment. necessary for sick prisoners, and to include a staff of employees with appropriate professional qualifications, and indicated that every prisoner should be able to seek the services of a qualified dentist”*.

Thus, we find that the rule (22) concerned itself with the prisoner, starting with his psychological state and the necessity of having a doctor to take care of him even his teeth, which must be preserved. Rule (24) states that “the doctor should examine every prisoner as soon as possible and for a period of time after entering prison, and then examine him thereafter whenever necessary, in order to discover any physical or mental illness that he may have and to take all necessary measures to treat him and isolate prisoners suspected of in the fact that they have contagious diseases and the identification of physical and mental deficiencies which may constitute an obstacle to the rehabilitation and determination of the physical capacity for work of each prisoner.

Rule 25 also clarifies that “(1) the physician should be entrusted with the observation of the physical and mental health of the sick and he shall meet



daily with all sick prisoners, all those who complain of a disease and any prisoner to whom he especially draws his attention.

(2) The physician shall report to the director whenever it appears to him that the physical or mental health of a prisoner has been or will be damaged as a result of his continued imprisonment or as a result of any condition of such imprisonment”.

Rule (26) stipulates that the physician should pay attention to examining the living conditions of prisoners in general and patients in particular, and advise the prison director on: (a) the quantity, quality and preparation of food, (b) the extent to which health and hygiene rules are followed in the prison and among prisoners; (c) The condition of the sanitary facilities, heating, lighting and ventilation in the prison, (d) The quality and cleanliness of prisoners’ clothing and bedding supplies, (e) The extent to which the rules relating to physical education and sports are adhered to, when the organizers of these systems are not specialized”.

The rule was not limited to specifying the role of the doctor only, but also obligated the prison director to take into account the reports and advice given to him by the doctor in accordance with the provisions of Articles (25) and (26). If he does not agree with him in his opinion, or if the proposed recommendations are outside the scope of his competences, he must immediately submit a report of his personal opinion, accompanied by the opinions of the doctor to a higher authority.

Rule (23) indicated in the part on discipline and punishment that: “(1) It is not permissible at any time to punish a prisoner with solitary confinement or by reducing the food given to him, except after the doctor has examined him and testified in writing that he is able to bear such punishment. (2) The same shall apply to any other punishment likely to harm the prisoner’s physical or mental health.” It also stressed the need for the doctor to visit prisoners subject to such punishments daily, and to advise the director to stop or change the sentence if he deems it necessary for reasons of physical or mental health.

Rule 32 stipulates that tools for restricting freedom, such as chains, handcuffs and shackles should never be used as means of punishment. In addition, chains or handcuffs may not be used as instruments of restraint. As for other freedom-restricting devices, they are only used in special circumstances, including:



“medical reasons”, as directed by the doctor, or by order of the director, if other means fail to restrain the prisoner to prevent him from harming himself or others or from causing material losses. . In such case, the director shall immediately consult with the physician and report the matter to the higher administrative authority.

Rules (49) and (52) emphasized the importance of a prison to include a sufficient number of staff and doctors to serve the prisoners. Article (49/1) stipulated that the staff should include, as far as possible, a sufficient number of specialists, such as psychiatrists, psychologists and social assistants. The rule (52/1) also required that in prisons that are so large that they require the services of one or more full-time doctors, the residence of at least one of them must be inside the prison or in close proximity to it and the same rule indicated that for other prisons, it is necessary the doctor may make daily visits and make his stay close enough to the prison so that he can attend without delay in cases of emergency, in accordance with Article.(2/52)

The Minimum Rules for the Treatment of Prisoners not only set general rules for application to prisoners and detainees, but also set special rules that apply to categories of prisoners who have been convicted under any circumstances and in any case. Rule 62 stipulates that “the medical services in the prison institution (and they include the doctor in the first place) must try to detect any ailments or illnesses, physical or mental, in the prisoner and treat them so that they are not an obstacle to his rehabilitation. To provide the prisoner with all necessary medical, surgical and psychological services. Rule (63/1) stipulates that "the full implementation of these principles requires individualization of treatment," and thus requires the introduction of a flexible system for classifying prisoners into categories. Accordingly, it is advisable to distribute these categories to separate institutions in which each category can find the treatment that suits it. The same rule indicated that in the case of closed-door prisons, the number of prisoners in each of them should not be so numerous as to impede the individualization of treatment.

The provision for the care of insane and mentally abnormal persons in Rule 82 included the following: “(1) A person shall not be held in prison if he appears to be mentally unstable, but arrangements must be made for his transfer to a mental hospital as soon as possible. (2) The injured shall be placed With diseases or other mental abnormalities under observation and treatment in specialized



institutions under good management (3) Such persons shall, during their stay in prison, be placed under special medical supervision (4) The medical or psychological administration of prisons shall ensure the treatment of all other prisoners who They need such treatment.

Thus, we find that the physician plays a major role in organizing and supervising the health care of prisoners and detainees.

Constitutional and legal guarantees in Egypt for the treatment of inmates

The relationship between the citizen and state agencies is regulated within the constitutional and legal framework. The Egyptian constitution and the various laws and executive regulations have been keen to take care of the rights of inmates inside prisons in all judicial cases, in accordance with international standards and international conventions that lay down good conditions for taking care of their rights inside prison.

-1 In the Egyptian constitution

Article 55: “Anyone who is arrested, imprisoned, or has his freedom restricted must be treated in a manner that preserves his dignity. Therefore, it is humanly and healthily appropriate, and the state is obligated to provide the means of accessibility for persons with disabilities. Violating any of that is a crime whose perpetrator is punishable according to the law. The accused has the right to remain silent. Every statement that proves that it was made by a detainee under the weight of any of the foregoing, or the threat of something from it, is wasted and unreliable.

Article 56: “Prison is a reform and rehabilitation house. Prisons and places of detention are subject to judicial supervision, and everything that contradicts human dignity or endangers his health is prohibited in them. The law regulates provisions for reforming and rehabilitating convicts, and facilitating a decent life for them after their release.

2-In the Code of Criminal Procedure



Article (140): “The prison warden may not allow any of the authorities to communicate with the detainee inside the prison except with a written permission from the Public Prosecution.”

Article (141): “The Public Prosecution and the investigating judge in the cases he is delegated to investigate may in all cases order that the imprisoned accused not communicate with other prisoners and that no one visits him, without prejudice to the right of the accused to always contact his defender without anyone present.”

The old Egyptian prison system

Egyptian prisons have gone through several developments over different eras. All prisons are in order of three degrees, and Law No. 396 of 1956 on the organization of prisons stipulated four types of prisons. The following deals with the most prominent developments that occurred :

-**1-Limans**: in the past, in which hard labor sentences were executed, not less than three years and not more than 15 years, except in special cases stipulated by law. And according to the latest amendment under Law 106 of 2015: Sentences of life imprisonment for men are implemented in Liman, and the iron shackle may not be placed on the feet of the convict unless there are special circumstances related to his escape, based on an order issued by the Director General of the Prisons Authority.

2- Public prisons: in the past, the sentences were executed on those sentenced to prison terms, and the prison sentence is placing the convict in a public prison, and employing him inside or outside the prison in the work assigned by the government for the period of his sentence, and that period may not be less than three years and not more than fifteen years except in the cases stipulated by law.

. More recently: Sentences are executed against some persons in a public prison who are sentenced to imprisonment, women who are sentenced to a hard or life prison sentence, and men sentenced to life or hard labor who are transferred from prisons for health reasons, or when they reach the age of sixty, or have spent half the sentence for them, or Three years, i.e. the two periods are less, during which their behavior was good. The Assistant Minister for the Prisons Service Sector issues a decision to form a committee to assess the prisoner’s



authority to transfer him from the liman, and if his behavior deviates, he may return to the liman.

Also, those sentenced to imprisonment for a period exceeding three months, unless the remaining period at the time of the issuance of the judgment was less than that, and they were not previously held in a public prison.

-33-Central prisons: In the past, punishments were carried out on persons not mentioned in the two previous articles or on persons who were subject to physical coercion in implementation of financial provisions and were executed in accordance with the provisions of Articles 511 to 523 of the Code of Criminal Procedure to collect the amounts arising from the adjudged crime It is issued to the government against the perpetrator of the crime, and it is with simple imprisonment, and its duration is estimated for one day. Also, detainees are placed in pretrial detention in central prisons, provided that they may be placed in a public prison that was closer to the prosecution and the central prison narrowed them down. As for recently: the punishment is carried out in a central prison on persons not mentioned in the previous two articles, and on persons who are subject to physical coercion in implementation of financial provisions, provided that they may be placed in a public prison if it is closer to the prosecution or if the central prison narrows them.

4- Private prisons: by virtue of a decree issued by the President of the Republic, the categories of prisoners to be deposited therein, how they are treated, and the conditions for their release are specified. It is worth noting that no decision was issued by the President of the Republic to establish private prisons.

Criticisms of Egyptian prisons

Egyptian prisons have faced a number of criticisms, as many international organizations and human rights reports have identified several weaknesses facing Egyptian prisons and their dilapidated infrastructure. The following is a presentation of the most prominent criticisms leveled at Egyptian prisons by international and human rights organizations.

Egyptian prisons suffer from a poor infrastructure; Due to the old age of these prisons, especially in health facilities and in terms of lighting and ventilation. The



number of latrines is not commensurate with the number of detainees and lacks hygiene, and latrines may not be available inside the detainees' places, which may contribute to spreading diseases among them or suffocating them in these vital services. Likewise, Egyptian prisons suffer from insufficient attention to educational activities inside prisons, lack of attention to the quality of education in line with the desired goals, and failure to modernize prison libraries.

Egyptian prisons suffer from shortcomings in providing health services to prisoners. Prison clinics usually lack hygiene or preparation with all medical devices and equipment, and also lack comprehensive medical examinations. Prison clinics suffer from their inability to order immediate health care, including emergency cases at the discretion of guards and other prison officials who may ignore the health problems of detainees, and not provide medicines or accept medicines sent by families to the patient.

Some reports suggested that Egyptian prisons suffer from defective detention conditions; This is because prisons, wards and cells are overcrowded with a large number of prisoners in one room without organization; This negatively affects the physical and mental health conditions of the prisoners. In addition, places of detention, wards and cells suffer from a problem of hygiene, which forces prisoners to use sanitary ware together, such as towels and shaving tools, in addition to the spread of insects and rodents, which contributes to the spread of epidemics and infectious diseases.

Reports have also indicated that overcrowded Egyptian prisons serve as a recruiting ground for militant groups on the Islamist jihadist spectrum, with prisoners often forced to share their prison locations with Islamic State supporters and members of other Islamist militant groups, making it easy for such groups to promote their radical ideology.

How did the Egyptian state improve the prison system?



Since the announcement of the new national strategy for human rights, Egypt has witnessed the development and promotion of human rights in all fields and sectors, especially the Egyptian prison sector. Egypt witnessed the opening of many new prisons developed in the American style. The new prisons aim to provide decent living, respectable medical and human care, and provide humane and humane treatment for inmates. The name of the Prisons Authority of the Ministry of Interior was changed to the “Community Protection Sector” instead of the “Prisons Sector,” and the name “Prisoner” was changed to “Inmate.”

The Wadi Al-Natrun prison complex in Beheira Governorate and the Correction and Rehabilitation Center (Badr) in Ismailia Governorate were inaugurated. The announcement of the new prison complex coincided with a campaign of releasing detainees from the civil movement, and the Egyptian state’s initiative to develop Egyptian prisons came due to the deterioration of the infrastructure of some prisons and their being unfit for human life.

After the reform and rehabilitation centers being built by the Ministry of Interior, 15 public prisons have so far been abolished, and the centers were built according to the finest architectural systems and the use of modern technology, and were provided with all modern medical devices that keep pace with the times, to provide social and health care for all inmates.

1-Wadi El Natroun Rehabilitation Center

The Wadi El-Natrun prisons area is located on the outskirts of the Wadi El-Natrun depression and the entrances to Sadat City from the southwest side of the Buhaira Governorate, on an area of 475 acres, and it consists of four prisons: (Wadi El-Natrun 1, Wadi El-Natroun 2, Liman 430, Liman 440, and the number of its inmates are about 13,500. It was established in September 1994 during the era of President Hosni Mubarak, and the inmates were transferred to it from the “Istikbal Tora” prison. It included three wards with 54 cells. It was located at the industrial entrance to Sadat City at the 92nd kilometer on the desert road. The second, “Abi” Industrial Zaabal” is located on the northwestern edge of Sadat City, at the 97th kilometer of the desert road, and it consists of seven wards.

2-Badr Rehabilitation Center



The Badr Reform and Rehabilitation Center was established on an area of 85 acres for short-term inmates. 3 public prisons - not yet defined - will be closed after the actual operation of the center. The center includes 3 rehabilitation centers. The medical center has a capacity of 175 beds, two operating rooms, a catheterization room, 18 intensive care units, 11 clinics, and 4 dialysis units. In addition to the main reception building, the mosque and church, the court complex, service facilities, and the workers' rest area. The new center, after the "Reform and Rehabilitation Complex in Wadi El Natroun", includes three sub-centers within the community protection sector.

The advantages of the new reform and rehabilitation centers

Generous accommodation:

In its development of prisons, the Egyptian government has been keen to provide the necessary spaces for inmates where they can practice various activities such as exercise. The Badr Center includes 3 sub-centers that have been prepared to receive inmates who spend short periods or whose circumstances do not allow them to work in the productive sites of the reform centers, where the focus is on their professional rehabilitation in various fields and the refinement of their hobbies related to handicrafts and marketing for them. Its design took into account the provision of an appropriate atmosphere in terms of ventilation, natural lighting, and appropriate spaces in accordance with international standards, in addition to providing places for religious rites and places that allow guests to practice their hobbies.

The health

The new prisons are witnessing a great development in the medical field, as both centers are equipped with modern medical equipment and a hospital equipped with the highest technology. Where the Wadi Al-Natrun Center contains a central hospital equipped with the latest medical equipment and devices in all specialties with 300 beds, next to specialized clinics, 4 operating rooms for all specialties, intensive care rooms with 28 beds, isolation rooms, laboratories, analyzes and radiology department and a kidney dialysis unit. 16 state-of-the-art washing machines, a pharmacy, and a counseling center for AIDS and addiction patients under the supervision of the United Nations Office on Drugs and Crime. While the Badr Center for Correction and Rehabilitation witnessed



the creation of a women's health center that includes the latest diagnostic devices, and contains a medical center equipped with the latest medical equipment and devices, in addition to clinics.

Court Complex

The Egyptian government has been keen to develop and increase the number of courts in the Wadi Al-Natrun Center and the Badr Center for Reform and Rehabilitation. A court complex was established inside the Wadi Al-Natrun Center that includes 8 courtrooms for up to 800 people to allow for public hearings to try inmates and provide a great deal of security. And a detention area that includes 6 sub-centers, with adequate ventilation, good lighting, and large areas, in addition to places for holding religious rites, classrooms, entertainment areas and playgrounds, in addition to entertainment areas for children of inmates, and vocational and technical training centers.

The Badr Center for Reform and Rehabilitation also contains a court complex, which was established to achieve the highest levels of security. It includes 4 courtrooms that are administratively separate so that public hearings are held for the inmates who are being tried in them, and a safe environment is achieved for a fair trial in which the inmate enjoys all his rights, and the hassle of moving to the different courts.

Production area

In developing prisons, the Egyptian state was keen to achieve the greatest benefit for the inmates, as a rehabilitation and production area was established; It consists of regions; Open crops - greenhouses - livestock and poultry - factories and production workshops, and in the outer area there are outlets for selling products, in addition to displaying them for sale in exhibitions, organized by the community protection sector, provided that the material return from the sale is allocated to the inmate who designed the product, and the return is directed according to his wish.

the library



Where the rehabilitation centers include central libraries, in order to ensure the awareness and culture of the inmate and to empower him with the latest books in various fields.

The following table shows the dates of some prisons that the state will demolish after including their inmates in the rehabilitation and reform center:

N	السجن	تاريخ التأسيس
1	Cairo Appeal Prison	1901
2	Liman Tora	1887
3	Damanhour Prison	1908
4	Labor camp prison in the lake	2011
5	Minya General Prison	2017
6	Old Damanhour Prison	1908
7	Alexandria	1910

Necessary legal changes

To keep pace with the wave of progress and development in the Egyptian prison system, the state worked to amend some laws regulating Egyptian prisons. The last amendments came to Law No. 396 of 1956 on Regulating Prisons. The text of the amendment issued by Law No. 6 of 2018 states: “Any person who has been finally sentenced to a penalty restricting freedom may be released if he spends half the sentence in prison and his behavior while in prison calls for To trust that he will correct himself, so long as his release does not endanger public security, and the period spent in prison may not



be less than six months, and if the penalty is life imprisonment, it is not permissible to release unless the convict has spent at least twenty years.

Law No. 19 of 2020 was also issued to amend some provisions of Law No. 396 of 1956 regarding the organization of prisons, and Article No. 182 of 1960 in the matter of combating drugs and regulating their use and trafficking, where a new article was added with No. (52 bis), which states:

The provisions of conditional release contained in this law do not apply to those convicted of committing any of the crimes stipulated in Law No. 10 of 1914 regarding gathering, and Law 182 of 1960 regarding combating drugs and regulating their use and trafficking, except for the felony stipulated in Article 37 of it. The Anti-Money Laundering Law promulgated by Law No. 80 of 2002, and the Anti-Terrorism Law promulgated by Law No. 94 of 2015.

The amendment also stipulated the abolition of the second paragraph of Article (46 bis a) of Law No. 182 of 1960 in the matter of combating drugs and regulating their use and trafficking, which stipulated that criminal proceedings in the offenses stipulated in this law that occur after work shall not expire with the passage of time. Except for the felony stipulated in Article (37) of this law.

Conclusion and recommendations

Developing prisons and transforming them into reform centers and complexes is an important step on Egypt's path to developing and promoting human rights, as the Egyptian state is trying to work to provide human rights in all sectors because of the criticism that is always directed at the state in the field of human rights. The Egyptian state's efforts were not limited to developing Egyptian prisons only. President Sisi launched a national strategy for human rights that aims to develop state policies and directions in dealing with human rights-related files to enhance respect for all political, economic, social and cultural rights.



Egypt worked to get rid of the old prisons that date back to old times before the adoption of minimum rules, some international conventions and the Universal Declaration of Human Rights. These prisons were among the legacies of imperialism, and therefore state agencies were forced to eliminate anything that might harm its reputation abroad.

Despite the launch of the national strategy and all the efforts made by the state to promote human rights, the international community did not stop criticizing the national strategy for human rights, describing it as a mechanism to cover up existing human rights violations that the strategy did not specifically address, and that the main objective of that strategy is Responding to international criticism directed at Egypt in international forums. Why did you not find the reform and rehabilitation centers, with their positives and improvements, of the same yield? Is it really that its large area and its distance from urban areas and residential overcrowding constitute an entry point for criticism?

Finally, we recommend paying attention to a system for examining convicts, whether from a medical, psychologically, mentally or socially, and this requires that the examination and classification work be carried out by a central body that has a sufficient number of highly qualified specialists.

We also recommend allowing the visits of the families of inmates to be constantly recorded in rehabilitation centers, and facilitating the monitoring and visits of non-governmental organizations to the reform center, to confirm the state's keenness on continuous care of the inmates' residency conditions, and that this inmate will leave the centers to participate in the development of the state.



