

Women in Prison: Armenia

Analysis from the National Preventive Mechanism









Armenia

UNCAT Ratification OPCAT Ratification 13 September 1993 14 September 2006

National Preventive Mechanism (NPM)

Human Rights Defender of the Republic of Armenia

NPM legal framework NPM operationalisation

Constitutional Law on the Human Rights Defender (14 January 2017) Resolution of the National Assembly ratifying the OPCAT (31 May 2006)

Since 2008

NPM structure NPM composition

Specific unit within the Human Rights 1 head, 3 staff + 3 external experts (3 Defender's Office women in total)

Facts and Figures

Prison population

Total prison population

2,473

Women in prison (total)

74 | 3%

Source: National Preventive Mechanism, September 2024

Women in prison - Characteristics

Foreign women

15

Source: National Preventive Mechanism, September 2024

Prisons for women

Total number of women's prisons

1

Women-only prisons

11

Source: National Preventive Mechanism. September 2024

II. Recommendations

Body searches

+ Take steps to properly carry out the search of the cells and personal belongings of women deprived of their liberty by female officers.

Access to mental healthcare

+ When providing psychiatric care and medical services to women deprived of liberty, the Prison Administration must ensure to obtain their written informed consent. In the event that the person submits a request to refuse or stop treatment, the necessity of initiating involuntary treatment should be carefully reviewed and discussed in accordance with applicable laws.

¹ Abovyan penitentiary is the only women's prison in the country. The same prison facility is also designated for juvenile offenders who are kept separate from the female prison population.

Pregnant women

+ Provide for necessary conditions for the separation of pregnant women from other

III. Detention issues

Ensuring the rights of women deprived of their freedom within the criminal justice system is of paramount importance. This issue is particularly sensitive because they require special treatment. Women in detention are especially vulnerable to risks such as victimisation, sexual violence, inadequate access to gender and age-specific healthcare, and a lack of stable contact with family members. In this context, it is essential to recognize that women face unique challenges while incarcerated. These challenges require a focus on their specific needs, including:

- + Access to necessary medical services, particularly those tailored to their gender and age.
- + Psychological support to help them cope with trauma, mental health issues, and the emotional strain of incarceration.
- + Adequate conditions of detention that prioritize safety, hygiene, and respect for dignity.
- + Opportunities for education and employment to promote rehabilitation and reintegration into society.

Addressing these special needs is critical to ensuring that women in detention are treated humanely and fairly, with their rights fully respected.

Personal hygiene and sanitary facilities

Bathing and maintaining personal hygiene are crucial for the physical and mental well-being of persons deprived of their liberty, including women. Given the specific hygiene needs of women, it is essential to ensure that they are provided with adequate facilities and opportunities to shower frequently. Proper hygiene conditions contribute to their overall health and dignity while in detention.

During private conversations with prison administration and inmates, NPM representatives observed that individuals in solitary confinement are only allowed to bathe once a week, typically on Fridays. Inmates expressed their grievances to the Human Rights Defender, stating that bathing is strictly scheduled for certain days of the week. If an inmate is unable to bathe on the designated day due to illness or other reasons, they are not allowed to make up for the missed bath and must wait until the following Friday. This rigid schedule leads to frustration and discomfort for women deprived of their liberty, as they are denied access to essential hygiene on other days.

In connection with the mentioned, the NPM expresses deep concerns and urges to follow the European Prison Rules (rules 19.4 and 19.7) and, taking into account the climatic features and thermal conditions of the region, to create adequate opportunities for showering or bathing. Moreover, if possible, it recommends to organise it every day, at least twice a week (if necessary, more often), based on the goal of maintaining general hygiene. At the same time, it is necessary to provide special measures that take into account the specific hygienic needs of women.

Cell searches

During 2023, women detained in the "Abovyan" penitentiary institution submitted complaints regarding cell searches conducted by male staff members. Women expressed concerns that, during these searches, male correctional officers had access to their personal belongings, including clothing, underwear, feminine hygiene products, and intimate accessories, which they found to be humiliating.

Furthermore, women deprived of liberty reported that, on some occasions, the officers did not handle personal belongings with sufficient care. Personal items were reportedly thrown on the floor, bed, or shelves, leading to contamination and damage to their possessions.

The NPM urges the penitentiary administration to implement gender-sensitive protocols for cell searches. Searches should be conducted exclusively by female staff members to safeguard the privacy, dignity, and emotional well-being of women deprived of liberty. In addition, correctional staff should undergo specific training to ensure that personal belongings, particularly intimate items like clothing and hygiene products, are handled with respect and care during searches. Mishandling of such items is unacceptable and contributes to the humiliation and distress of detainees. Clear guidelines on how to handle belongings during searches should be developed and enforced accordingly.

Access to mental healthcare

According to Article 16, Part 1, of the Law "On Medical Assistance and Services to the Population," written consent from an individual is a mandatory requirement for any medical intervention. However, exceptions are outlined in Article 24 of the same law, which allows for medical interventions without written consent in circumstances where there is a threat to human life or in the case of diseases that pose a risk to public health or the environment, as determined by the Government in accordance with the law.

A psychiatrist is involved in the department's work, treating individuals with mental health conditions only after obtaining their initial consent. However, document reviews reveal that when a person deprived of liberty provides a written refusal of treatment or verbally refuses to take regular medication, the possibility of interrupting or stopping treatment, or initiating an involuntary treatment procedure, is neither discussed nor considered. Additionally, no informed written consent is obtained from the individual for resuming treatment after they have refused or completed the drug treatment prescribed by the psychiatrist.

Thus, the process of properly obtaining informed consent from individuals deprived of their liberty who have mental health conditions, as well as the oversight of its implementation, is not adequately maintained. This lack of proper consent procedures raises concerns about compliance with legal and ethical standards regarding the treatment of individuals in situations of vulnerability in detention.

In correctional facilities, medical interventions continue to be performed on individuals deprived of their liberty without obtaining their written informed consent, which is impermissible and constitutes a violation of the law and applicable standards. Therefore, it is necessary to:

- + Ensure protection of medical confidentiality for persons deprived of liberty, in accordance with the legislation's defined requirements.
- + Perform medical interventions in penitentiary institutions only after obtaining the written informed consent of the individuals deprived of liberty.

Risk of self-harm and suicide

In accordance with the applicable legal norms², the assessment of the risk of suicide and self-harm must be conducted by the responsible duty officer (or, if unavailable, an appointed person) immediately after the person is transferred to the penitentiary, but no later than within 24 hours. Furthermore, if an average or higher level of risk of suicide or self-harm is identified during this initial assessment, a psychologist (or, in their absence, a social worker) must perform a more in-depth evaluation of the risk of suicide and self-harm within 48 hours.³

All persons deprived of their liberty must receive social, psychological, and legal support from the moment they are admitted to a penal institution. ⁴ The implementation of appropriate psychological interventions is particularly crucial during the initial phase of incarceration, when the individual is in the quarantine department. Psychological consultations during this period are essential for helping individuals adapt to the penitentiary environment and for assessing the risk of suicide or self-harm. If necessary, preventive measures should be taken based on these assessments to ensure the safety and well-being of the person.

In response to the cases of death and suicide recorded in penitentiary institutions, the staff of the Human Rights Defender as the NPM initiated discussion procedures on their own accord. As part of these procedures, official letters were sent to the Ministry of Justice of the Republic of Armenia, the Ministry of Health of the Republic of Armenia, and the Prosecutor General's Office of the Republic of Armenia, seeking appropriate actions and responses.

IV. Women in special situations of vulnerability

Pregnant women

According to the Government Decision No. 1543-N1 of 3 August 2006, "detainees and convicts who are pregnant or accompanied by a child under the age of three are housed in detention facilities or correctional institutions in a manner that minimizes their contact with other detainees or convicts".⁵

Government's Decision N 543-N of 13 April 13 2023, outline certain aspects of the detention conditions for pregnant women, women with a child under the age of three, and underage detainees in penitentiary institutions.⁶ However, these provisions do not adequately address the creation of an environment tailored to their specific need.

Abovyan Penitentiary does not provide for special conditions for pregnant women or women with children under the age of three. During the monitoring visit⁷ of the Abovyan penitentiary in March 2022, the NPM had found that there were three women with children under the age of three, two of which were held in solitary confinement facilities and one in the general area. In addition, similar to the general conditions of the prison, the mentioned areas did not have adequate conditions.

The NPM strongly recommends that pregnant women be housed separately from the general inmate

² Paragraph 319 of the appendix to the Government's Decision N 543-N, 13 April 2023.

³ Clause 321 of the Government's Decision N 543-N, 13 April 2023.

⁴ Sub-item 7 of item 22, item 26, and item 1 of Annex 1 of Order No. 279-N, 13 July 2016, issued by the Minister of Justice of the Republic of Armenia.

⁵ Annex, item 79.

⁶ Clauses 52-64 and 222 of Appendix.

⁷ Annual Report on the Activities of the Human Rights Defender of the Republic of Armenia as the National Preventive Mechanism During the Year 2022, Available at: https://www.ombuds.am/images/files/de7b953bbd6b9b10476ebf91c300f0f2.pdf

population. This separation will ensure that they are protected from any potential risks posed by other inmates and can access the specialised care and support they require during pregnancy.

This report is part of the Global Report on Women in Prison.

Access the full report here: www.apt.ch/global-report