



The Department for the prevention of torture - NPM

Statement of principles regarding the treatment applied to persons deprived of liberty during the state of emergency established due to the coronavirus pandemic (COVID-19)

Being aware that the exceptional situation Romania faces in the context of the coronavirus pandemic requires the implementation of firm measures to combat the spread of COVID-19, measures that affect the general population and, in particular, the persons deprived of liberty (in psychiatric hospitals, residential centers for elderly persons, children and adults with disabilities, penitentiaries, preventive detention and arrest centers, migrant centers, institutionalized quarantine facilities),

Given that no exceptional circumstance, whatever it may be, does not justify torture or cruel, inhuman or degrading treatment,

Recalling that any person deprived of liberty must be treated with humanity and with respect for his human dignity,

Recalling that all parties involved in ensuring the living conditions and treatment applied to persons deprived of liberty must permanently keep in mind the legal provisions as well as the national and international standards regarding the observance of fundamental rights and the prohibition of torture and other ill-treatment, the codes of ethics, as well as the guidelines of the World Health Organization (WHO) to fight the pandemic,

Considering the position of similar monitoring bodies at international level (UN Subcommittee on Prevention of Torture – SPT and the European Committee for the Prevention of Torture – CPT),

The Department for the prevention of torture in places of detention (National Preventive Mechanism) within the People's Advocate institution formulates a set of principles that must be respected by all relevant authorities responsible for the persons deprived of liberty, in order to prevent any acts of torture or cruel, inhuman or degrading treatment:

- 1. All necessary measures must be taken to protect the health and safety of all persons deprived of liberty as well as of the staff involved.
- **2.** All persons deprived of liberty must receive medical care at standards equal to those existing in the community.

Particular attention should be paid to groups of people at risk, such as the elderly and those with pre-existing diseases. The competent authorities must ensure that there are no difficulties in treating persons deprived of liberty in hospitals (especially those in the public health system) and that, when appropriate, persons deprived of liberty benefit from intensive care services.

Also, the persons deprived of their liberty must receive sustained psychological assistance.

- 3. The necessary staff, as well as their training, must be provided in order to ensure the safe fulfilment of their duties.
- **4.** In order to respect social distance, but also in view of the increased risk of contamination for certain groups of persons, alternative methods of deprivation of liberty should be considered, when

possible, especially in overcrowded places; In the case of reintegration into the family of the elderly or the persons with pre-existing diseases, there must be ensured the possibility of community care.

5. Any restrictive measure taken during the state of emergency must respect human dignity, the principles of legality, necessity, proportionality, non-discrimination and be limited in time. Persons deprived of liberty should receive detailed information on these measures, in a language they understand and in a manner appropriate to their level of understanding.

Fundamental rights, such as the right to adequate accommodation conditions, the right to sufficient and nutritionally balanced food, daily access to the outdoors, must be guaranteed.

Likewise, the possibility of petitioning should be ensured for persons deprived of their liberty.

- **6.** Prohibition of visits must be compensated by supplementing access to means of communication such as telephone, internet and video calls.
 - 7. Access to justice for non-voluntary admitted patients should be ensured.

The observance of the sanitary protection measures should not prejudice the right of the non-voluntary admitted patients to be heard by the court and to contact a lawyer (public defender or private attorney).

- **8.** Patients discharged from psychiatric units in the context of the measures taken during the state of emergency must have access to outpatient care. The possibility of treatment in the outpatient system is also necessary considering that the isolation at home can have a negative impact on the persons with mental disorders.
- 9. Any admission in psychiatric hospitals without the patient's consent must comply with the legal provisions regarding non-voluntary hospitalization (there must be a court decision in this regard). It should also be borne in mind that non-voluntary hospitalization does not represent the authorization of treatment without the free and informed consent of the patient.
- 10. The fundamental safeguards against the ill-treatment of persons detained by law enforcement (informing a third party, access to a lawyer, access to a doctor independent of the place of detention) must be fully respected at any time and under any circumstances. These safeguards must also apply to the persons placed into institutionalized quarantine sites.

Bucharest, April 13, 2020