

**Mandates of the Working Group on discrimination against women and girls; the Special Rapporteur on the right to food; the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment; the Special Rapporteur on violence against women, its causes and consequences; and the Special Rapporteur on the human rights to safe drinking water and sanitation**

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Excellency,

We have the honour to address you in our capacities as Working Group on discrimination against women and girls; Special Rapporteur on the right to food; Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment; Special Rapporteur on violence against women, its causes and consequences; and Special Rapporteur on the human rights to safe drinking water and sanitation, pursuant to Human Rights Council resolutions 41/6, 32/8, 42/16, 43/20, 41/17 and 42/5.

In this connection, we would like to bring to the attention of your Excellency's Government information we have received concerning the serious human rights violations that women detainees face in Al-Qanater prison and the deplorable conditions of their detention, which could amount to gender-based discrimination and violence as well as torture, cruel, inhuman and degrading treatments.

According to the information received:

Al-Qanater prison is a women detention facility in Cairo Governorate where women detainees are reportedly subjected to several violations, including gender-based violence and inhuman and degrading treatments, from the moment of their transfer to the facility. Women detainees are transferred to the prison in the back of a van with no windows, light or ventilation, while sitting on the floor covered in urine and rotten food. Pregnant and nursing women are also transferred the same way. Upon arrival at the detention facility, the detainees are taken to the New Arrivals ward (al-Irad), a small room with 9 beds with no ventilation, where they are held for eleven days before they are allocated their prison cells. It is reported that in al-Irad, detainees cannot receive visits, exercise or even take a shower or brush their hair.

*Lack of separation based on the reasons of detention*

Following the first eleven days in the New Arrivals ward, the detainees are moved into one of the twelve main detention wards. Article 82 of the Prison Regulations Law of 1956 (herein after "Prison regulations") stipulates that detainees should be separated according to several criteria, such as the type of crime, the duration of the sentence, the criminal risk, and the detainee's age. However, in 2014, the Ministry of Interior issued decree 3320/2014, adding that classification of prisoners must take into consideration the prison's capacity. It

is alleged that, relying on this decree and due to overcrowding, detainees are not separated based on the type of crime. Consequently, prisoners detained on politically motivated charges are often housed in the same cells with prisoners convicted for common criminal offences, which leads to increased risks of abuse of the former by the latter.

*Forced nudity, invasive body searches and sexual harassment*

Women detainees in Al-Qanater are allegedly subjected to regular naked body searches. Former inmates reported that during these searches, they are forced to stand naked in front of one another and go through vaginal searches performed by female wardens. One former inmate recounted that the warden picked up a plastic bag from the floor and wore it in her hands to inspect the detainee's body cavities in a very humiliating manner. Two of the prison wardens were reportedly known for sexually harassing detainees during body searches. After being subjected to sexual harassment by one of them, a detainee complained to the chief of investigation of the prison, who did not take the necessary measures to halt the violation or hold the perpetrator accountable. The Prison regulations do not prohibit or make any reference to sexual and gender-based violence against inmates and there are no mechanisms for reporting sexual and gender-based violence, denying victims' access to remedy.

*Torture, cruel, inhuman and degrading treatments*

Detainees who are deemed to have broken the prison's rules are often subjected to punishment at the hands of the ward's disciplinary officer, called "Nabatshia". There are two consistent types of punishment, the "tashreeda" and the "tagreeda". The "tashreeda" consists of taking the detainee out of her ward, after stripping her from all her personal belongings, and putting her in another ward, where she is forced to spend the day in the bathroom, and sleep there, until the chief of the investigation orders her to return to her ward. It is reported that one detainee was subjected to this form of punishment for 12 days. The "tagreeda" consists of stripping the detainee of all her clothes and personal belongings, which are later burnt as a punishment for breaking the prison's rules. It is alleged that a woman detainee underwent the two types of punishment because she started a food strike to protest against the inhuman conditions of detention.

Prolonged solitary confinement is also used as a mean of punishment. Detainees who break the prison's rules are taken to one of the three solitary cells in the so-called "disciplinary ward", despite this type of confinement being prohibited by article 44 of the Prison regulations. Each cell has the length of 180 cm and width of 160 cm, with no ventilation. Urination is allowed once per day, and a bucket is kept inside the cell for urination at other times. Detainees in solitary confinement receive only one meal per day.

On 22 November, several inmates went on hunger strike to protest against violent attacks led by prison administration during a search of the wards and the tashreeda to which two inmates were subjected for refusing to move to the "drugs ward".

### *Lack of personal hygienic items*

Women reported being denied adequate water for basic hygiene, and unable to wash themselves or their clothes. They are allegedly not provided with soap, toilet paper, tooth paste or other basic cleaning items. It is further reported that the prison does not provide sanitary pads free of charge, which are instead sold in the prison canteen at twice the market price and are of poor quality. Due to its high price and low quality, some inmates rely on getting sanitary pads during family visits. However, those who do not receive visits or cannot afford to buy sanitary pads are forced to make rudimental pads out of fabric or do without them.

### *Overcrowding and unsanitary conditions*

Al-Qanater prison is extremely overcrowded and does not provide detainees with a single bed for each. The New Arrivals ward provides only nine beds but can house from 30 up to 90 inmates. In all other wards, the beds, with a width of 80 centimetres each, are occupied by two women. This has decreased the sleeping space of each detainee to several inches, barely allowing them to sleep on their sides. Moreover, the overcrowding of wards has forced most inmates to sleep on the floors and inside the bathrooms. In wards 1 and 2, at least 560 detainees share 120 beds, which is four times more than its capacity can fit. In the ward allocated for sick detainees, ward 10, at least 175 women share 50 beds. It is reported that single beds are only allowed to those who can pay. Overcrowding has also worsened the ventilation in the wards. The windows inside the wards are made of iron and covered with wire, which does not allow enough fresh air inside. With detainees smoking and cooking where they sleep, the temperature inside the wards raises significantly and the lack of ventilation reportedly causes breathing problems. Overcrowding has also led to a significant reduction of the visits' time. In order to allocate the requests for visits by an increasingly high number of detainees, the prison administration has reduced the duration of visits for all detainees who entered in 2019 to 10 minutes, with the exception of al-Irad ward, which does not allow visits at all.

The prison is not regularly cleaned and the cleanliness of the wards does not meet the minimum sanitation standards. It is reported that the prison wards, where detainees spend 22 hours of their day and keep their food and personal belongings, are full of snakes, mice, cockroaches, bugs and geckos. Moreover, it is alleged that in the prison hospital, medical tools are not disinfected. One former inmate recounted that several detainees became infected with the Hepatitis C and B viruses, due to the non-disinfection of tools in the dental clinic.

### *Access to appropriate health care*

It is reported that health services in Al-Qanater prison are extremely poor. The prison hospital has only one resident doctor, who specializes in gynecology. Other specialized doctors, such as an ophthalmologist, dentist and dermatologist come once a week. However, no psychiatrists, physiotherapists, neurologists,

nor doctors specializing in emergencies are available to inmates. One of the persistent reported problems is the prison's lack of mental health specialists and the lack of understanding about how to support detainees experiencing mental health distress. It is recounted that in one case, a detainee who was having a panic attack that made her body shiver for hours, was reportedly tied to the bed with a rope instead of being provided with appropriate mental health care.

#### *Deprivation of food and poor quality of drinking water*

It is reported that in Al-Qanater prison, detainees are provided with grossly inadequate quantity and poor quality of food while in detention. According to the accounts of former inmates, detainees are provided with just one box that contains a few food items which are inadequate in quantity and quality, and sometimes two inmates get to share one egg and a piece of bread. Most detainees rely on the food they receive from their families during the visits. Food can also be bought in the prison's canteen but items cost double the price in the market.

Water inside the prison is reportedly not clean and not suitable for drinking or bathing. It is dark in color and full of worms and small fish, which suggests that it is not desalinated and comes directly from the Nile. The poor quality of the water has caused many skin problems and hair loss. Some detainees resort to washing themselves with mineral water, if they can afford to buy it.

#### *Pregnant and nursing women detainees*

The poor conditions of detention mentioned above persist in the ward allocated to pregnant and nursing women and have a particularly serious impact on their health and wellbeing. The ward where these women are housed is reportedly the most overcrowded, and although its capacity should not exceed 50 detainees, it often holds between 130 and 150 detainees plus their children, forcing most detainees to sleep on the floor. Nursing mothers and pregnant women receive the same poor quality food as other detainees, and in very low quantities, which can impact the ability of mothers to breastfeed babies and result in starvation and malnourishment of their new-borns. They are forced to use the same dirty, non-distilled prison water as other inmates, putting their lives and their children's lives at imminent risk. Pregnant women are denied pre-natal and post-natal care. In one case when an inmate suffered intensive bleeding during her pregnancy, the prison administration allegedly did not take any measure to give her prompt medical care. Instead, the State Security Prosecution refused to accept her lawyer's request to allow her to receive the medication required by her health condition. The denial of health care and access to medication for pregnant and nursing women, and their children is a systematic practice in Al-Qanater prison. It is reported that, due to the inhumane conditions in the mothers and nursing women's ward, many women detainees decide to leave their children behind with the authorities or secondary caregivers.

While we do not wish to prejudge the accuracy of the information received, we would like to express our grave concern over the reported poor conditions of detention of women detainees, the denial of adequate health care, including sexual and reproductive healthcare and services, adequate quantity of food and safe drinking water

and sanitation and the allegations of sexual harassment and violence during body searches and other forms of cruel, inhuman or degrading treatment or punishment, some of which may amount to torture.

We express our serious concerns about the lack of gender-specific measures that meet the needs of women detainees, the denial of access to facilities and materials required to meet women's personal hygiene needs, including sanitary pads of good quality provided free of charge, and the failure to meet basic standards in terms of food and accommodation, as outlined by the UN Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) and the Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules). The failure to develop and implement such policies may amount to discrimination against women, and thus fall within the scope of the Convention on the Elimination of All Forms of Discrimination against Women.

We are also particularly alarmed by the lack of redress mechanisms and accountability for victims of sexual violence, as well as the lack of specific health services and psychological support. Finally, we would like to express our concern on the high number of pregnant and lactating women detainees and their conditions of detention. In that regard, we would like to remind your Excellency's government that, when sentencing or deciding on pretrial measures for a pregnant woman or a child's sole or primary caretaker, non-custodial measures should be preferred where possible and appropriate, with custodial sentences being considered when the offence is serious or violent (Bangkok Rules, preamble n.9).

In connection with the above alleged facts and concerns, please refer to the **Annex on Reference to international human rights law** attached to this letter which cites international human rights instruments and standards relevant to these allegations.

As it is our responsibility, under the mandates provided to us by the Human Rights Council, to seek to clarify all cases brought to our attention, we would be grateful for your observations on the following matters:

1. Please provide any additional information and/or comment(s) you may have on the above-mentioned allegations.
2. Please specify which measures your Excellency's Government has adopted or is planning to adopt to ensure that the accommodation provided meets all requirements in relation to safe drinking water and clean water for washing, minimum floor space, lighting, heating, ventilation and beds.
3. Please explain what human rights compliant alternatives to detention exist, in particular for pregnant women, and whether they are employed on a regular basis.
4. Please provide details regarding efforts to address allegations of inadequate access to healthcare, including reproductive health service and information, by women held in detention facilities, and measures to

mitigate the risk of exposure to infection and the necessity of adequate mental health care.

5. Please provide detailed explanation of any measures being taken to ensure that pregnant women are provided with appropriate medical care including ante-natal care and assistance during childbirth; that conditions of detention do not jeopardize the health and lives of pregnant women and their babies after childbirth, and that adequate emergency health care is available for high risk pregnancies or where pregnancy complications develop.
6. Please indicate any measures are being taken to address sexual harassment and gender-based violence in prison and what accountability mechanisms are available for detainees who want to file a complaint and obtain redress.
7. In particular, please specify any measures taken to investigate allegations of torture and other cruel, inhuman or degrading treatment or punishment, to prosecute those responsible and to provide victims with redress and rehabilitation. If no such measures have been taken, please explain how this is compatible with the international human rights obligations of Egypt.
8. Please provide explanation on the allegation of use of prolonged solitary confinement and what disciplinary alternatives are available.

We would appreciate receiving a response within 60 days. Passed this delay, this communication and any response received from your Excellency's Government will be made public via the communications reporting [website](#). They will also subsequently be made available in the usual report to be presented to the Human Rights Council.

While waiting for your response, we urge your Excellency's Government to take all necessary measures to promptly investigate all allegations of gender-based violence and sexual harassment, torture, cruel, inhuman and degrading treatments, halt their re-occurrence and immediately ensure the availability of appropriate health care services and medical treatment, food, clean water and personal hygiene products to all women detainees.

In accordance with our mandates, we follow closely the fate of the women detainees in Al-Qanater.

Please accept, Excellency, the assurances of our highest consideration.

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## **Annex**

### **Reference to international human rights law**

In connection with above alleged facts and concerns, we would like to draw the attention of your Excellency's Government to article 10 of the International Convention on Civil and Political Rights (ICCPR), ratified by Egypt on 14 January 1982, which provides that all persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person

We would like to remind your Excellency's Government of the absolute and non-derogable prohibition of torture and other cruel, inhuman or degrading treatment or punishment as codified in articles 2 and 16 of the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (CAT), which Egypt acceded to on 25 June 1986. In relation to the allegation of prolonged solitary confinement, we also wish to refer to principle 7 of the Basic Principles for the Treatment of Prisoners, adopted by the General Assembly in resolution 45/111, which states that efforts addressed to the abolition of solitary confinement as a punishment, or to the restriction of its use, should be undertaken and encouraged. Moreover, we would like to refer to the report by the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment (A/66/268), in which it is stated that the use of prolonged solitary confinement in itself violates the absolute prohibition of torture and other ill-treatment, furthermore due to the prisoner's lack of communication, and the lack of witnesses, solitary confinement enhances the risk of other acts of torture or ill-treatment. Further, article 25 of the African Commission on Human and Peoples Rights Guidelines on the Conditions of Arrest, Police Custody and Pre-Trial Detention in Africa calls on States to ensure that the use of solitary confinement is restricted. The UN Standard Minimum Rules for the Treatment of Prisoners ("Mandela Rules") adopted unanimously by the UN General Assembly (A/RES/70/175) set international standards for disciplinary measures that may be imposed on prisoners. This includes Rule 43, stating that under no circumstances may disciplinary sanctions amount to torture or other cruel, inhuman or degrading treatment or punishment, which includes prohibition of corporal punishment or the reduction of a prisoner's diet or drinking water, or collective punishment.

Forced nudity is a recognized form of sexual violence which can also amount to torture or to cruel, inhuman or degrading treatment or punishment prohibited by article 7 of the International Covenant on Civil and Political Rights. The United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (hereinafter the Bangkok Rules) adopted by the General Assembly in resolution 65/229 and the Mandela Rules, specify that cavity searches are to be conducted only when absolutely necessary, in private, by health professionals or, at a minimum, by appropriately trained staff, of the same sex as the prisoner. The Bangkok Rules provide that "[e]ffective measures shall be taken to ensure that women prisoners' dignity and respect are protected during personal searches..." (Rule 19) and that "[a]lternative screening methods, such as scans, shall be developed to replace strip searches and invasive body searches, in order to avoid the harmful psychological and possible physical impact of invasive body searches" (Rule 20).



The Working Group on Discrimination against Women and Girls stressed that “(n)ot only the causes but also the consequences of deprivation of liberty for women are gendered, because they experience their confinement in specific ways and are often at risk of heightened gender-based discrimination, stigma and violence. How women experience this deprivation will also differ, not only as a result of gender dynamics but also because of characteristics, such as age, (dis)ability, race or ethnicity or socioeconomic status, that combine to produce distinct forms of discrimination and vulnerability” (A/HRC/41/33).

We would like to underline that the Bangkok Rules stress that the principle of non-discrimination requires States to address the unique challenges that women prisoners face. It further takes into account their gender-specific needs and provide comprehensive standards for the treatment of women prisoners and offenders. Rule 5 of the Bangkok Rules states that, “(t)he accommodation of women prisoners shall have facilities and materials required to meet women’s specific hygiene needs, including sanitary towels provided free of charge and a regular supply of water...”.

With specific regard to the detention of pregnant women, we would like to draw your Excellency’s Government’s attention to Rule 64 of the Bangkok Rules which states that a preference for non-custodial treatment for pregnant women, and which also require adequate hygienic conditions and physical and psychological health services for pregnant women. We would particularly also like to call Your Excellency’s Government’s attention to the Convention on the Elimination of all Forms of Discrimination against Women, ratified by Egypt on 18 September 1981, which provides that States Parties shall take all appropriate measures to ensure women’s access to appropriate services in connection with pregnancy, confinement and the post-natal period and adequate nutrition during pregnancy and lactation (art.12), as well as to enjoy adequate living conditions, particularly in relation to housing, sanitation, electricity and water supply, transport and communications (art.14).

In terms of the specific challenges that women offenders face, the Bangkok Rules affirm that “violence against women has specific implications for women’s contact with the criminal justice system”, and that violence against women may be a cause of women’s involvement in criminal offences and subsequent imprisonment. The Special Rapporteur on Violence against Women, its causes and consequences stated that “States have a duty to address the structural causes that contribute to women’s incarceration and to address root causes and risk factors related to crime and victimization through social, economic, health, educational and justice policies. Member States have been called upon to develop gender-specific sentencing alternatives and to recognize women’s histories of victimization when making decisions about incarceration. In addition, States have an obligation under international human rights law to act with due diligence to prevent, respond to, protect against, and provide redress for all forms of gender-based violence” (A/68/340).

In relation to the allegations of inadequate access to health care, we would like to draw your attention to article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR), ratified by Egypt on 14 January 1982, which protects the right to health. Accordingly, States have the obligation to refrain from denying or

limiting equal access for all persons, including prisoners or detainees, to health preventive, curative and palliative services (Committee on Economic, Social and Cultural Rights, General Comment 14, para. 34). Furthermore, the Mandela Rules establish States' responsibility to provide health care for prisoners (Rules 24 to 35). In particular, prisoners are entitled to the same standards of health care that are available in the community, free of charge and without discrimination (Rule 24.1); women shall have access to special accommodation for all necessary prenatal and postnatal care and treatment and arrangements shall be made wherever practicable for children to be born in a hospital outside the prison (Rule 28), and prison administrations shall not sanction any conduct of a prisoner that is considered to be the direct result of his or her mental illness or intellectual disability (Rule 39.3). The Bangkok Rules add that "gender-specific health-care services" should be provided to women prisoners (Rule 10).

In relation to the denied access to safe drinking water and sanitation, we would like to refer your Government to article 11 of the ICESCR, which recognizes the right of everyone to an adequate standard of living, including food and housing, and to the continuous improvement of living conditions. This article must be read in conjunction with article 2.2 of the Covenant, which provides for the exercise of any right under the Covenant without discrimination of any kind.

We recall the explicit recognition of the human rights to safe drinking water by the UN General Assembly (resolution 64/292) and the Human Rights Council (resolution 15/9), which derives from the right to an adequate standard of living, protected under, *inter alia*, article 25 of the Universal Declaration of Human Rights, and article 11 of ICESCR. In its General Comment No. 15, the Committee on Economic, Social and Cultural Rights clarified that the human right to water means that everyone is entitled to sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic uses. Furthermore, the UN General Assembly (resolution 70/169) and the Human Rights Council (resolution 33/10) recognized that water and sanitation are two distinct but interrelated human rights. In particular, we recall explicit recognition that "the human right to sanitation entitles everyone, without discrimination, to have physical and affordable access to sanitation, in all spheres of life, that is safe, hygienic, secure, socially and culturally acceptable and that provides privacy and ensures dignity, while reaffirming that both rights are components of the right to an adequate standard of living".

Water services must be physically accessible for everyone within or in the immediate vicinity of all spheres of their lives, particularly at home, but also in educational institutions, the workplace, prisons, and public places. In its General Comment No. 15, the Committee on Economic, Social and Cultural Rights clarified that prisoners and detainees must be provided with sufficient and safe water for their daily individual requirements, taking note of the requirements of international humanitarian law and the Mandela Rules (General Comment no. 15, para 16(g)). The Mandela Rules stipulate that "drinking water shall be available to every prisoner whenever he or she needs it." (Rule 22.2); that "prisoners shall be required to keep their persons clean, and to this end they shall be provided with water and with such toilet articles as are necessary for health and cleanliness." (Rule 18.1); that, "in order that prisoners may maintain a good appearance compatible with their self-respect, facilities shall be provided for the proper care of the hair and beard." (Rule 18.2)