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**GOOD INTENTIONS  
ARE NOT ENOUGH**  
THE STRUGGLE TO  
REFORM LIBERIA'S  
PRISONS

**AMNESTY  
INTERNATIONAL**





## “I want to run a prison that is habitable, that human beings can live in with dignity”

Government official, July 2011

Liberia’s government, still struggling to rebuild the country after a 14-year internal armed conflict, has stated its determination to improve the prison system. However, conditions in Liberia’s prisons are so poor that they violate basic human rights. Prison inmates are crowded into dark, dirty cells, without adequate food, sanitation or health care. Some suffer permanent damage to their physical or mental health as a result. Most have not been convicted of any crime. The vast majority are people living in poverty, without access to lawyers and with few financial resources.

Amnesty International delegates visited four prisons in Liberia, some more than once, in 2010 and 2011. The problems they found include:

- severe overcrowding in some prisons
- grossly inadequate health services
- inadequate food and drinking water
- lack of adequate light, ventilation and time outdoors
- poor hygiene and sanitation
- lack of basic necessities such as clean bedding and toiletries.

It is true that some of these resource problems are also experienced by the general population in Liberia. However, prison inmates are under direct state control and completely dependent on the state to meet their most basic needs. Irrespective of resource constraints, the government must put in place a system that ensures the basic human rights of those in its custody. In all circumstances, the government has a clear and binding obligation not to expose prison inmates to conditions that constitute cruel, inhuman and degrading treatment. If continued international assistance and co-operation is necessary for the government to meet its human rights obligations, the government should seek such support.

Amnesty International notes that the issue of prison conditions was raised during the Universal Periodic Review of Liberia in November 2010.

Amnesty International delegates visited Monrovia Central Prison, Gbarnga Central Prison, Sanniquellie Central Prison and Zwedru National Palace of Corrections. Numerous inmates spoke to the delegates about access to justice and prison conditions. Amnesty International also

consulted government officials, correctional officers, ex-prisoners, Liberian NGOs, international NGOs and UN bodies. To respect the confidentiality of interviewees, their names have been withheld or changed. To protect their identity, faces of inmates are not shown in photographs.

Amnesty International presented its findings and requested feedback from the Bureau of Corrections and Rehabilitation within the Ministry of Justice in August 2011. Amnesty International welcomes the four-page detailed response from the government, which has been taken into account in this document.

Amnesty International would like to thank all of those who shared their story, and the Liberian government for allowing access into the prisons.





**Top:** The walls in Monrovia Central Prison are covered in drawings and messages, most written in a black powder made from grinding the contents of used batteries. There are few windows, and even fewer lights.

**Right:** A blanket is the only privacy provided for the bathroom in a cell holding boys under 18 years old at Gbarnga Central Prison (Bong County), July 2011. Gbarnga Central Prison is the only prison to be run by a female superintendent.

**Cover:** Liberia's prisons are dilapidated, dark and dirty. Monrovia Central Prison, April 2011.

*"All persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person."*

Article 10(1) of the International Covenant on Civil and Political Rights, ratified by Liberia in 2004



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*“Overcrowded and unhygienic prison conditions, together with lack of access to decent food, medicine, fresh air, daylight, and communication with the outside world soon amount to cruel, inhuman or degrading treatment, even in the absence of any physical violence.”*

Former UN Special Rapporteur on Torture, Manfred Nowak, Journal of Human Rights Practice, 2009

## THE PRISON SYSTEM

Liberia's prisons are managed by the Bureau of Corrections and Rehabilitation which is under the authority of the Ministry of Justice. There are 15 prison facilities in Liberia.

Rules and guidelines on the treatment of Liberia's prisoners are set out in the 1973 Criminal Procedure Code and the 1989 Prison Rules and Regulations. A draft National Prison Reform Act has been approved by the House of Representatives and is currently pending before the Senate. The proposals in the draft Act include rehabilitation of inmates and a semi-autonomous Bureau of Corrections and Rehabilitation.

The Human Rights Unit of the Ministry of Justice investigates complaints of human rights abuses within the justice systems. While they only have restricted legal powers, they do frequently monitor prisons and report to the Minister of Justice. Many other prison monitors such as ICRC, Prison Fellowship and Rescue Alternatives Liberia, also receive and report complaints of prisoners. Amnesty International heard from inmates and prison staff about an informal system of complaints within the prisons.

So-called “Five Star Generals” (prisoners responsible for the inmates in their cells) receive and report complaints to prison guards. Whether or not this system works, it is no substitute for a proper regulated confidential complaints mechanism.

## POSITIVE STEPS

Since the end of the armed conflict in 2003, the government has made significant progress in its efforts to overcome the legacy of conflict. Donors, NGOs, and the peacekeeping forces of the UN Mission in Liberia (UNMIL) have worked closely with the Liberian authorities to rebuild the criminal justice system. The President, Minister of Justice, and other key government officials have stated that they are committed to change and are trying to implement sector-wide reform.

The Ministry of Justice has allowed frequent prison visits by national and international NGOs (including Amnesty International), prison monitors and UN bodies. In December 2010 the UN Sub-committee for the Prevention of Torture visited many places of detention. The Committee's findings and recommendations are confidential, but the government could opt to make its report public to ensure that recommendations are addressed adequately.

In July 2011 President Ellen Johnson-Sirleaf announced the roll-out of an ambitious 10-year National Health Policy and Plan. To the credit of the Ministry of Health and Social Welfare, prison health services are incorporated into the cornerstone of the policy – the new Essential Package of Health Services (EPHS). It includes a physical and mental health assessment upon entry into the prison; inspection of skin diseases; voluntary pregnancy testing; health inspection of premises; distribution of insecticide treated mosquito nets; fumigation of facilities; ensuring availability of hygiene items; provision of first aid supplies; and identification, treatment and prevention of communicable diseases and others.

The inclusion of prison health services into the EPHS is a welcome development, but immediate action is needed to improve conditions, including access to health care, for Liberia's prison inmates.



Across the country's prisons, new building work and renovations are taking place. At Monrovia Central Prison, however, many people suggested that repairs are a waste of resources – a new site is needed. One official told Amnesty International, “I don't want to put any more money into that place. What we need to do is build a new prison.” This sentiment was shared by many of the staff there. The Ministry of Justice has bought 31 acres of land outside Monrovia for a new central prison, which could alleviate overcrowding. However, it alone will not address the systemic changes needed within the prison service to ensure inmates' basic human rights or reduce the high percentage of pre-trial detainees who languish in prison.



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**Inmates at Monrovia Central Prison can move in and out of their cells, though this is at the discretion of correctional officers.**

The government, NGOs and the UN are trying to reduce the large number of pre-trial detainees through reforms such as a Magistrate Sitting Program (MSP), also known as the Fast-track Court, which has led to the release of roughly 2,000 inmates accused of misdemeanours since it started in 2009. The Ministry of Justice is also piloting a parole and probation system in Monrovia and Gbarnga with the aim of extending it to all 15 counties. Yet, as one Liberian NGO worker told Amnesty International: "For every prisoner they release, they bring in five."

Poor prison conditions and prolonged pre-trial detention are among the factors behind unrest in Liberia's prisons. There were 10 attempted prison escapes in 2010. Disturbances also occurred at prisons in Monrovia, Kakata, Gbarnga and Buchanan, according to UNMIL (UNMIL Secretary General's 22nd progress report to the Security Council). Order was restored once officials agreed to address inmates' demands, which included an end to pre-trial detention and provision of medical care.

### **DARK, DIRTY AND CRAMPED**

Cells are cramped, dirty and poorly lit. In most, a single small window high up the wall serves as the main source of light and fresh air. Some inmates complained of impaired vision, which they attributed to the darkness of the cells even in the daytime.

Prisoners also complained of mosquitoes, cockroaches and other insects in their cells.

### **JUSTICE SYSTEM FAILURES**

*"When you commit a crime you are supposed to be judged but here there is no judgment."*

Male detainee in Monrovia Central Prison

An estimated 1,500 to 1,700 people are currently held in prison in Liberia. Of these, only about 300 have been convicted of a criminal offence. The rest are in prison on remand, awaiting trial due to the backlog in the justice system. Roughly 80 per cent of prison inmates are pre-trial detainees. The judiciary does not have the capacity to hear cases in a timely manner and this is compounded by numerous factors including inadequate police investigations, too few public defenders, lack of transport and court room facilities, corruption, refusal of witnesses to testify and a culture of

involving the police in petty disputes. Prisoners are typically detained for months, and sometimes even years, before they are brought to trial.

The backlog has led to severe overcrowding in some of Liberia's prisons. This has a serious effect on the health and safety of the prisoners and on the working conditions of prison staff. Monrovia Central Prison holds roughly half of the country's total prison population. While the prison is officially able to accommodate 374 inmates, not all of the cells are in use because of damage to doors from previous escape attempts or long-standing wear and tear. Its actual capacity is therefore less than 374, but at the time of Amnesty International's most recent visit in July 2011, it was holding 839 prisoners, more than twice its capacity.

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*Top:* Cell Block D, built during the Second World War, is the worst block in Monrovia Central Prison, July 2011.

*Above:* No prisons in Liberia have running water. In Monrovia Central Prison, inmates place their water bottles through the cell windows so that they can be filled by inmates who are allowed to go outside.

*Left:* A hammock improvised from sacking and slung high above the floor in a crowded cell. Prisoners have been injured by falling in their sleep. Cell Block D, Monrovia Central Prison, July 2011.



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A 17-year-old boy told Amnesty International, “Roaches come out of the toilets.” Detainees in Gbarnga Central Prison said that rats often entered their cell and ate their food. A 16-year-old boy in Gbarnga Central Prison said, “There are plenty of mosquitoes and no blanket to cover up at night. It’s hard to sleep because they bite you all night long.” Given the high prevalence of malaria and other insect-borne diseases across Liberia, these conditions have serious implications for prisoners’ health.

*“Every prisoner shall, in accordance with local or national standards, be provided with a separate bed, and with separate and sufficient bedding which shall be clean when issued, kept in good order and changed often enough to*

*ensure its cleanliness.”*

UN Standard Minimum Rules for the Treatment of Prisoners, Rule 19

In Monrovia Central Prison, up to eight men routinely sleep in cells approximately 2 x 3 metres in size (Block D). They sleep sitting up or in shifts because of the lack of space. Some have created makeshift hammocks out of sacks slung 3 to 4 metres above the ground. Prisoners and prison staff reported that people sometimes break their ribs or dislocate their shoulders from falls sustained while sleeping.

Many inmates throughout Liberian prisons do not have beds or even mattresses on which to sleep. Almost all prisoners complained of body aches because they had to sleep on the floor, which is worse in

**Some sentenced prisoners in Monrovia Central Prison have beds on which to sleep, but their mattresses are filthy and thin from use, April 2011.**

the rainy season when the floor is cold or damp. The lack of blankets also keeps the prisoners cold at night. Although the prisons received a donation of beds in 2007 and 2009 from Prison Fellowship, a Christian NGO, staff at Monrovia Central Prison stated that they had to be removed from the men’s block holding pre-trial detainees because of the risk that their iron frames could be used in riots or breakouts. Where foam mattresses are available, they are in pieces and not cleaned routinely or even between use by different prisoners.

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**Top:** Time out of doors is precious for people held in dark and cramped prison cells, but staff shortages mean that many are not spending sufficient time outdoors. Inmates with special privileges are allowed out to perform tasks, such as collecting water, every day.

**Above:** The cells holding boys do not have beds or even enough foam mattresses. Where there are mattresses, they are damaged and dirty. Monrovia Central Prison, July 2011.

The amount of time prisoners spend outdoors varies between prison and category of prisoner. Convicted prisoners are allowed time outside more frequently than pre-trial detainees. Correctional officers told Amnesty International that due to the shortage of staff, many prisoners do not have the standard one hour a day of exercise required by Liberia's own laws and recommended by the UN Standard Minimum Rules for the Treatment of Prisoners.

Under Chapter 34 Section 12 of Liberia's Criminal Procedure Code, "Every prisoner who is not employed in outdoor work shall have at least one hour of suitable exercise in the open air daily if the weather permits." However, several groups of boys under 18 years old in Monrovia Central Prison reported only going outside for a "sunbath" once a week. Staff there said that prisoners do not go outside on Monday, Wednesday or Friday unless they have visitors.

In prisons where overcrowding is not a problem, prisoners spend more time outdoors. For example, at Gbarnga Central Prison, inmates go outside every day for one hour unless it is raining.

The prison authorities for the most part separate prisoners by category: pre-trial, sentenced, women and children. However, many children under 18 years reported being kept in police cells with adults.

## SANITATION AND HYGIENE

*"You gotta use the toilet amongst your friends. It's embarrassing. You eat and use the bathroom in the same cell."*

Male sentenced prisoner in Monrovia Central Prison

*"It's not easy using the toilets. We have diseases now because of the toilets. When I sit on the toilet, hot air comes up. It smells and it causes rash. I am not the only one with rash down there. Everyone does."*

Male pre-trial detainee in Gbarnga Central Prison



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Lack of sanitation facilities and clean running water is a challenge all across Liberia. In the prisons, however, the effects are particularly serious because of overcrowding and restrictions on freedom of movement.

The smell of sewage is strong in many of the cells and there is little or no privacy. Because of a shortage of staff to escort them to communal latrines, many prisoners have to defecate and urinate in buckets or bottles. In cell block D in Monrovia Central Prison, detainees said that between 4pm and 8am there is no one to take them to the latrine. When Amnesty International visited, the indoor communal latrines were filthy and dark. The strong stench was overwhelming and the floors were flooded with dirty water.

Almost all prisoners interviewed by Amnesty International complained of rashes on their groin and upper thighs. They believe this was due to the “heat” that came out of the toilets because of backed-up sewage. One detainee explained that gas was building up in the latrines, and it was irritating his skin. More likely, according to health professionals at John F Kennedy Hospital who have treated many inmates from Monrovia Central Prison, skin diseases are a result of scabies, fungus, ringworm and poor hygiene – problems compounded by the lack of toilet paper and soap.

*“I bathe every day, but no soap. I feel dirty and have rash between my legs from the heat in the toilet.”*

Female prisoner sentenced to life imprisonment

**There are only two manual water pumps for more than 800 inmates in Monrovia Central Prison. Prisoners take turns collecting buckets or jerry cans of water and taking them to the cells, April 2011.**

Lack of running water compounds the problems of sanitation and hygiene. According to staff, prisoners receive a 5 litre jug of water every day per cell. At Monrovia Central Prison, prisoners also use a makeshift pulley system to lower empty water bottles out of their cell windows to be filled at the two hand pumps by other prisoners working outside. The distribution of water in the cells is also of concern. Inmates fill dirty buckets with water that sits stagnant in their cells. They drink from used

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**Top:** The communal bathrooms at Monrovia Central Prison are dark, wet and dirty. There isn't enough water for the inmates to bathe with any regularity, and there is no plumbing.

**Above:** The latrines in the cells for boys under 18 at Monrovia Central Prison are dirty and offer no privacy. Many complained that cockroaches come out of the toilets.

cups and bottles, which they fill by dipping into the communal water, which can further spread disease.

The International Committee of the Red Cross is working with the Liberian government to improve water and sanitation at the prison.

*"The food is bad...the drinking water is salty. It is no good. It comes from the dirty sea right here on the edge of Monrovia. Look at the garbage in the sea here. We drink water contaminated with this."*

Male former inmate of Monrovia Central Prison

The Ministry of Justice noted that water all over Monrovia sometimes seems to be a little salty, but has been proven to be "medically harmless".

## FOOD

*"Every day dry rice. No soup."*

An inmate at Monrovia Central Prison

Many prisoners complained of insufficient food and the poor quality of what they do receive. The majority of prisoners interviewed said they only eat once a day, usually around lunchtime, despite assurances from some staff that meals are served twice daily. According to the Ministry of Justice, inmates are provided adequate meals twice a day and receive more food than the average Liberian would have for a day. Meals generally consist of rice and soup. However, at Monrovia Central Prison many inmates reported eating plain rice only, which they call "dry rice".

Under Liberia's own laws, "Each prisoner shall be provided with good and wholesome food, properly prepared under sanitary conditions, and in sufficient quantity and reasonable variety." (Chapter 34, section 10, Criminal Procedure Code).

According to the Ministry of Justice, prisons receive an allocation of rice purchased in



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bulk for the prison system and an allowance for other foodstuffs distributed according to prison population. However, Amnesty International was told by prison staff that supplementary food is provided when the individual prison's operational budget allows, when it is grown on site, brought in by prisoners' families or bought with the prisoner's own money (Monrovia Central Prison has an on-site canteen with limited supplies).

Health experts interviewed by Amnesty International also expressed concern over the lack of vegetables and protein incorporated in the soup. Many prisoners complained of symptoms commonly associated with malnutrition such as weakness, tingling or numbness of the extremities, loss of vision and muscle

wasting. Prisoners with family members nearby who visit have a definite advantage when it comes to obtaining food and other supplies.

### GROSSLY INADEQUATE HEALTH CARE

*"From the time I was there, there is something wrong with my eye. Look, you can see. I am afraid I am getting blind. My eye was not itching before. My eye was scratching and itching in there, that's the problem I got in there. They never took me to JFK (hospital). Nothing. Nowhere. They were going to go to the hospital but they said no gas for the car to go."*

Male former prisoner from Monrovia Central Prison

**Monrovia Central Prison, April 2011. Many prisoners complain of not getting enough food, and that the food they do get is of poor quality.**

Monrovia Central Prison is the only prison in Liberia with an on-site clinic staffed by a qualified clinician. However, the clinic lacks essential drugs and basic supplies. In some other prisons, where space allows, makeshift temporary sick bays have recently been organized to enable a visiting clinician to offer care in a dedicated space. However, most of the time correctional officers act as the first line of care, despite lacking the medical knowledge necessary to assess and treat ill prisoners. In addition, most prisons do not even have first-aid supplies.

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**Top:** Monrovia Central Prison is the only prison in Liberia with an on-site clinic staffed by a qualified clinician but it lacks essential medicines and enough staff to treat prisoners adequately.

**Above:** Although a notice outside the clinic at Monrovia Central Prison advertises free medical care, most prisoners complained that when they visit the clinic they are sent back to their cells without receiving any drugs. Many prisoners in the cells who were very ill did not go to the clinic.

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David was arrested for trying to steal a car radio. He says that during his arrest, police beat him on the arms and head with sticks. He was taken to Monrovia Central Prison to await trial. While Amnesty International delegates were visiting he arrived at the clinic with an open fracture (bone protruding from the skin) of his left arm, which was visibly deformed, swollen and infected. He complained of

pain but was not in any visible distress. He said he had told prison warders about his arm but had not been referred to the prison clinic for eight days. Following an assessment, he was referred to the local hospital but it was unclear when he would be transferred. As a result of these delays, he was at high risk of serious infection and permanent disability.

Moses, 23 years old, came from Guinea with a friend to Liberia in search of work. While working in a mechanics shop, he was accused of stealing a car radio, which he denies. He was detained in Monrovia Central Prison pending trial. He says, "I spent one year six months in Monrovia Central Prison and I went blind six months ago (in prison). No pain or itching. Just going blind. Not once I was allowed to go out into the sunshine. Just in the hallway sometimes or shower... after one year four months they brought me outside in the sun because I tried to kill myself. They brought me to the superintendent and the pastor and I tried to forget this idea. One time they carry me to JFK (John F Kennedy Hospital) for my eyes. I got tablets for three days. But the medicine didn't help. I asked so many times to go to the hospital. They said no. For me to go even that one time it was not easy." Since his release, he has been unable to venture far from the prison. He has no family in the area and survives through the charity of those around him. He says he has not spoken to his family in over two years.

Prisons struggle to provide medical care because of a lack of drugs and trained staff. Correctional officers told Amnesty International they do not have enough vehicles to drive prisoners to hospitals. In most prisons this means primary healthcare provision is extremely limited: common conditions such as malaria, skin infections and eye problems are often not treated; prisoners are transported mainly for emergencies and even then immediate transfer is not always possible. Screening, diagnosis and treatment of illnesses are grossly inadequate.

Adding to the difficulty in identifying and treating ill prisoners is the lack of initial

medical assessments upon admission. Without this it is impossible to determine the risk of communicable diseases or the treatment needs of incoming prisoners. A basic health assessment of prisoners at time of entry is required by Liberian law (Chapter 34, Section 8 of the Criminal Procedure Law). Such assessments would also distinguish between pre-existing illnesses and those contracted during incarceration. A more comprehensive system of record keeping and data management would allow for data analysis and improvements in health service delivery.



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*“The hard thing was heat and mosquitoes. There are no screens. No bed nets. You get bitten so much. So many people get sick.”*

Woman former inmate

Prisoners are exposed to an extremely high risk of communicable diseases while incarcerated, which also poses health risks for the wider community. There is no HIV testing in prisons and while the infection rate of HIV in Liberia is reportedly low compared to many other African countries, prison populations often have higher HIV rates than the general population. Unquestionably, HIV-positive inmates have gone unidentified and untreated.

One prison health expert told Amnesty International that while most correctional officers know how to identify cases of

**The women’s cells at Monrovia Central Prison are less crowded than the men’s cells. Women complained of a lack of clean water and soap, as well as lack of privacy in the toilets and for bathing.**

tuberculosis (TB), they were often unable to isolate affected inmates due to limited space. Implementation of the treatment regime recommended by the World Health Organization is also difficult due to resource constraints.

Many inmates appeared to have red, infected eyes. They also complained of itching eyes and several prisoners and former prisoners complained of impaired vision, which they said began in prison.

Others complained of having malaria, which is very common throughout the country.

## PRISONERS WITH ADDITIONAL NEEDS

Women, juveniles and individuals with mental disability are some of the groups that face particular risks in prisons and have distinct health and social needs.

Approximately 50 women are held in Liberia’s prisons. There are no separate women’s prisons, but women are held in blocks or cells separate from the men. Female correctional officers supervise the women’s block.

Overcrowding is not as pervasive as in the men’s blocks, and women are allowed more

Simeon, who seriously injured a woman with a metal pole, is held in Gbarnga Central Prison. Visibly agitated and incoherent, Simeon is clearly mentally ill, though no one was able to provide a diagnosis. Correctional staff said they tried to restrain him, but decided to leave him alone. He is in a cell by himself because of the threat he poses to others. Other inmates complained that Simeon's constant shouting at night kept them awake. They were worried that they too would "go mad" if they continued to stay in prison. An international NGO is reportedly trying to help Simeon by providing mental health services and medication.

## RECREATION AND REHABILITATION

*"I have no access to a radio. They took all our radios. It is unfair. I do not blame prison officials. They were following instructions. What do I do at night? There are no newspapers here. No books. No entertainment. People go mad."*

Male detainee in Gbarnga Central Prison

The majority of prisoners return to their communities after being released from prison. Rehabilitation during incarceration is an essential function of prisons to encourage successful reintegration of inmates into society.

Some facilities visited by Amnesty International offered skill-building activities to a limited number of convicted prisoners, including tie-dyeing, sewing, construction and agriculture. However, no prison has a formal education system and recreation possibilities are limited. Many inmates expressed frustration and boredom at lack of activities and opportunities for rehabilitation. At Monrovia Central Prison, the Carter Center has started a small library of approximately 60 donated books with one inmate working as a librarian.

One man in Monrovia Central Prison said, "You have so many children and they are left vulnerable when you are in prison. They don't teach you a trade to help you provide for your family when you leave."

## PRESSURES ON PRISON STAFF

The lack of capacity in the justice system is causing a severe strain on prison staff. The prison service is under-resourced and understaffed. According to the Ministry of Justice, 259 corrections officers currently work in the prisons. The target number of officers is 630, and the government continues to recruit and train new officers in order to meet this goal.

time outdoors. However, the distinctive needs of women are poorly addressed. For example, confidential voluntary pregnancy testing is not offered at any point during incarceration. A common complaint from female inmates and female correctional officers is the limited availability of sanitary materials. Amnesty International did hear of a few cases of pregnant inmates, but was unable to verify the information. According to those interviewed, the lack of capacity within the prisons to deal with the needs of pregnant inmates means they are simply released.

*"We're just here. Our parents don't know."*

16-year-old boy held in Monrovia Central Prison

Liberia has only one functioning court for minors and no separate rehabilitation or reformatory institutions. Many children under the age of 18 are tried in magistrates courts and held in adult prisons in separate cells. Amnesty International delegates met many child prisoners who had been in prison for four, five or six months without trial. According to Article 37 of the Convention on the Rights of the Child, ratified by Liberia in 1993, detention of children should only be as a "measure of last resort and for the shortest appropriate period of time."

Article 37 of the Convention on the Rights of the Child also guarantees the right of every child deprived of liberty to "maintain contact with his or her family through correspondence and visits." Yet some imprisoned children said that their parents did not know where they were. The reason for this was not clear. Others said that correctional officers had allowed them to use their cell phones to call their families.

Every child under 18 interviewed stated that they were not receiving any form of education, even if they had been in prison for months.

Mental health services in Liberia are virtually non-existent. Only one psychiatrist and one mental health hospital are available to service the entire country, while many Liberians are still suffering the psychological consequences of the conflict. Liberian Criminal Procedure Law guarantees assessment and treatment of people living with mental illness. However, the criminal justice system is incapable of handling cases appropriately where mental illness is a factor and people with mental illnesses are being incarcerated for crimes related to their disorder, such as attempting suicide. Additionally, the majority of correctional officers have no training or knowledge of mental health issues. For example, some correctional officers mistakenly identified epilepsy as a mental illness.

The harsh conditions in prisons and the anxiety and frustration caused by the agonizingly slow justice system lead to mental anguish for many prisoners. One health expert told Amnesty International that several prisoners had disclosed that they were suicidal or had attempted suicide.

A US-based NGO, the Carter Center, is working with the government to support mental health reform in Liberia and has been doing some work at Monrovia Central Prison. Mental health evaluations of prisoners are included in the Essential Package of Health Services, although it remains unclear how this will work in practice.



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Many correctional officers expressed regret at the situation of the inmates, but were faced with their own challenges of overwork, low pay and lack of essential resources. They told Amnesty International's delegates that they have no annual leave entitlement, and have only one day off a week. Pay grade is not well differentiated by position and skill and few career advancement opportunities exist for staff. Many of the officers are working as unpaid volunteers, which can contribute to inhuman detention practices because of lack of training and accountability.

Correctional officers are only provided with one uniform, so that when it gets dirty they wear their own clothes. Others choose to not wear their uniform. This makes it hard to distinguish between the prisoners and

the correctional officers. They also are exposed to diseases through contact with inmates and lack of protective and cleaning equipment.

## CONCLUSION

The Liberian government must take immediate steps to ensure that the conditions under which prisoners are held do not amount to cruel, inhuman and degrading treatment. All prison inmates should be held in sanitary and humane conditions which ensure their physical and mental integrity, and in accordance with Liberia's own Criminal Procedure Law and international standards, including the International Convention on Civil and Political Rights and the UN Standard Minimum Rules for the Treatment of Prisoners.

**Prisoner's hands on the bars in his cell door, Liberia, March 2011. Prison cells in Monrovia Central Prison have one small barred window on the door that opens onto a dark hallway, and one small window that looks outside.**

Children under 18 must be detained only as a last resort and for the shortest appropriate amount of time. If detention is necessary, they must be held separate from adults at all times.

Implementation of the prison health component of the Essential Package of Health Services launched in July 2011 would address many of the health care concerns raised in this document, but the Ministry of Justice needs to take further

steps to ensure the physical and mental health of inmates.

Reducing the number of pre-trial detainees in Liberia's prisons is essential to improving conditions and decreasing overcrowding. This requires the judiciary to implement a sentencing policy consistent with the principle that deprivation of liberty should be for the shortest possible time, and which includes alternatives to imprisonment. The judiciary should ensure that it reviews the legality and necessity of all detentions on a regular basis. Reform of the justice sector should also include increased resources for the criminal justice system; training for judges, prosecutors, defence counsel and investigators; and the establishment of juvenile courts throughout the country.

Amnesty International welcomes the recommendations made to Liberia by other states during the Universal Periodic Review of Liberia in November 2010. These included improving prison conditions; accelerating reform of the judicial system; and providing resources to key institutions in the criminal justice system and training for judges and other officials. Amnesty International urges the Liberian government to give effect to these recommendations and to keep the Human Rights Council informed of its progress.

## RECOMMENDATIONS

### To the Ministry of Justice:

- Take immediate steps to improve prison conditions including by:
  - providing clean water and adequate sanitation facilities;
  - working with a nutritionist to ensure that food is adequate;
  - guaranteeing all prisoners adequate time outside;
  - providing clean beds and regularly washed bedding to every prisoner;
  - establishing a dedicated health budget for each prison until the Essential Package of Health Services is fully implemented.
- Ensure adequate budget to the Bureau of Corrections and Rehabilitation, including by continuing to seek assistance and co-operation from the international community.
- Ensure that every child inmate under 18, whether pre-trial or sentenced, can begin or continue primary or secondary education.
- Provide recreation and rehabilitation opportunities for all prisoners.
- Recruit and train more prison staff and provide them with appropriate incentives and necessary resources, including uniforms.
- Make public the findings and recommendations of the UN Subcommittee for the Prevention of Torture after its visit to Liberia in December 2010.

### To the Ministry of Justice and Ministry of Health and Social Welfare:

- Ensure that the prison health component of the Essential Package of Health Services is implemented quickly, with adequate funding and staffing, and in consultation with stakeholders.
- Ensure that the mental health component of the Essential Package of Health Services is also carried out, including proper assessment and treatment of prisoners with mental illness.

### To the international community:

- Continue to work with the government of Liberia to support the Essential Package of Health Services, and to ensure that prison health services are fully incorporated.
- Where necessary support the Liberian government, including through the provision of technical assistance, to improve the living conditions in prisons.
- Continue to liaise with Liberia in seeking the full and prompt implementation of the recommendations made during the Universal Periodic Review of Liberia.

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**Amnesty International** is a global movement of more than 3 million supporters, members and activists in more than 150 countries and territories who campaign to end grave abuses of human rights.

Our vision is for every person to enjoy all the rights enshrined in the Universal Declaration of Human Rights and other international human rights standards.

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