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SUMMARY

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**PROGRAMME OF VISITS
TO PREVENT GENDER AND
SEXUAL ORIENTATION
DISCRIMINATION**

- The purpose of the project is to analyse the situation of women and the LGBTBI community in prison facilities based on NPM standards in this field. The aim is to allow female and LGBTBI community identities, as a whole and in their full complexities (culture, migration, age, marginalisation, violence, poverty, disabilities, mental disorders, drug addiction, maternity and parenting), to show through within the male-centred prison system and in an environment in which their rights are often, quite simply, not accounted for just because they are women or part of the LGBTBI community and, therefore, a minority. The main aim of this NPM project, within the framework of its wide-reaching role as guardian of the rights of individuals deprived of liberty, is to give these rights visibility and make society and the Administration fully aware of them through formulation of Recommendations [§ 478].
- External professionals from the fields of psychology and medicine with specialist training in matters of gender work alongside NPM personnel to develop and execute this role. This **interdisciplinary team** has come up with **specific and precise tools** (interview forms, methodologies for performing visits to prison facilities and for analysis of documents) in order to, first of all, identify and then use Recommendations and Suggestions to pinpoint essential aspects that seek to appropriately position these individuals and their rights based on the principle of equality [§ 479].
- In this sense, it has been confirmed that the reports issued by the NPM following the visits included in this project are delivering results. An indication that the content of these reports has served as the basis for the parliamentary non-legislative motion approved by the Spanish Parliament on 16 June 2020 illustrates this point. It states as follows:

The Spanish Parliament urges the Government to draw up a report within six months about the circumstances of female inmates in the State's prison facilities which, along with appropriate measures for incorporating gender with an intersectional perspective into prison service policy, shall be submitted to the Equality Committee of the Spanish Parliament [§ 480].
- In order to obtain a **global and precise overview** of the situation for women and LGBTBI individuals at the different types of facilities and at different stages of deprivation of liberty, **six visits** have been carried out to date over the last few years. These include Antoni Asunción

Hernández de Picassent prison facility (Valencia) (visit 101/2018) in 2018; Madrid I prison facility (visit 91/2019), Las Palmas I prison facility (visit 102/2019) and Las Palmas II prison facility (visit 104/2019) in 2019; and Ceuta prison facility (visit 88/2020) and Alcalá de Guadaira prison facility (Seville) (visit 102/2020) in 2020. The visits were organised taking into account **places** that complemented each other (different types of prison facility architecture, mixed facilities and facilities for women only, facilities with different numbers of detainees, standard units/open prisons, across different locations in mainland Spain, the islands and autonomous cities). During the visits, **utmost attention was paid to the parties in question**. This included detainees and staff at all levels working in the prison facilities. Furthermore, **the documentation gathered in each visit was also carefully analysed** [§ 481].

- This project follows the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders, commonly known as the Bangkok Rules, in addition to the Yogyakarta Principles on the application of international human rights law in relation to sexual orientation and gender identity, among other international standards [§ 482].
- Further to these visits, it was confirmed that many of the points included in the suggestions made over the years in light of the situations observed at the different prison facilities persist (health, treatment, committal documentation, the work performed by support staff, etc.). It was concluded that the deficiencies in question are **structural aspects of the prison system** in matters of gender and addressing them means taking a wider approach and using more powerful means. As such, these aspects should be treated as rulings in the form of Recommendations so that they can be given the global approach they deserve [§ 483].

1 Recommendations

- The Recommendations made further to the visits and the Administration's standpoint with regards to those Recommendations, both in terms of processing cases and practical implementation as confirmed during subsequent visits, are addressed below in four sections. Reading them may help to understand the lack of confidence that exists with regards to recognition of their part in society, and which often comes up during interviews with women and members of the LGTBI community [§ 484].

1.1 Prison detainee data

Data disaggregated by sex

- This Recommendation, which was made following the first visit to Antoni Asunción Hernández prison facility project in 2018, **was accepted by the Administration from the outset and, in subsequent visits, it was possible to confirm effective implementation.** This means that **it has been possible to gather statistical results**, without which **it would be impossible to tackle the project** [§ 485].

Inclusion of Roma women as a variable

- In 2019, during the visit to **Madrid I prison facility**, **it was confirmed that** there were 40 **Roma women** at the facility. **This information** was provided by facility management. It had to be collected from each of the social case files for women deprived of liberty further to a request by the NPM since this information **had not, up until then, been disaggregated.**

The lack of disaggregated data renders understanding the specific needs and vulnerabilities of Roma women impossible. As a result, it not possible to plan suitably designed or, quite simply, effective programmes on essential matters such as treatment at prison facilities, overall preparation, analysing and granting permits, relationships with families and addressing addictions, among others. This lack of disaggregated data means that it is impossible to provide the precise solutions that are required and that are suitably adapted to different health and social needs. This complicates the reinsertion process and leads to discrimination by omission. This is why the Recommendation was formulated. The Recommendation was **rejected** by the Administration on the grounds that it implies stigmatisation, and that this information is addressed in existing legislation and does not need to be used by the prison service administration in order to meet its obligations.

This point of view and refraining the Administration from meeting the obligation it was assigned by the Spanish Parliament to write a **report on appropriate measures for including gender with an intersectional perspective** in prison system policies is contrary to the criteria stipulated in the **Report on the evaluation of the EU Framework for National Roma Integration Strategies up to 2020-COM(2018)785 final**, in the **Declaration of the Special Rapporteur of the United Nations on questions of minorities in the conclusions to his official visit to Spain between 14 and 25 January 2019** and in rule 54 of the **Bangkok Rules**, among others.

Alcalá de Guadaira prison facility for women was visited in 2020 (visit 102/2020). It was observed that there were 20 Roma women at the facility. In other words, 20.4% of female inmates. The information provided by management was once again collected from social case files further to an NPM request. It was observed that this information was not previously disaggregated, as was the case in other prison facilities that were visited. Given the aforementioned lack of recorded data, the situation for Roma women was analysed during visits by comparing lists and using information provided in interviews by these women or by technical staff and civil servants. This analysis provides us with relevant data. For example, 85% of Roma women at the prison facility did not have any formal education at all or had not completed primary education. 100% of Roma women inmates were mothers. With regards to the offences themselves, the interviewees mentioned public health offences, theft in order to provide for their families and consumption of toxic substances. **The Administration's outright lack of understanding of Roma women's circumstances** renders treating them appropriately, both on a day-to-day basis and in terms of reinsertion, impossible. **Therefore, a renewed Recommendation was submitted following the visit to the prison facility** [§ 486].

Forms and records with inclusive language

- The purpose of this Recommendation is **to give female detainees a place and name**. It was submitted following the project's first visit (2018) and **accepted by the Administration but has not been implemented to date**. This failure to implement the Recommendation even persisted in women-only prison facilities such as Madrid I (2019) and Alcalá de Guadaira (2020). Therefore, it is repeated at each visit. There is surprising persistent use of non-inclusive language by entities that hold public responsibility for translating constitutional values such as equality into something as simple as a form or record recognising the existence of women in prison facilities [§ 487].

Inclusive language in committal dossiers

- It was observed in all the visits that the language used on documentation provided to detainees when committed was not inclusive and the information was not adapted to suit women's circumstances. It failed to account for their existence and for special requirements such as sexual and reproductive health or gender-based violence. Therefore, a Recommendation was made during the visit to Ceuta prison facility (visit 88/2020) and was reiterated during the visit to Alcalá de Guadaira prison

facility (visit 102/2020) [§ 488].

Distance between place of origin and prison facility: compensatory measures

- It was confirmed in the visits that, in comparison with men, women face more issues in terms of serving their sentences at facilities located close to their family, friends and loved ones. Furthermore, they have fewer material opportunities to serve the end of their sentences under a semi-liberty arrangement because there are insufficient suitable facilities close to their local areas. This is a clear indicator of inequality, which also has a negative impact on these women's right to health. The prison service administrative body is legally obliged to protect this right. Health and finances are disproportionately affected based on gender. Furthermore, being separated from their families makes the committal process for women particularly complicated since they often fulfil an emotional and care-giving role. This clearly has a negative impact on the biopsychosocial health of detainees. Furthermore, geographical distance makes family visits difficult and expensive [§ 489].

Video conference calls with families

- Like in all the other facilities that were visited, there were communication issues due to many female inmates' lack of financial resources, even if communication of this kind is key to their well-being and emotional health. A lack of income and the elevated cost of calls limits how many they can make. International female inmates (most of whom are from countries with low incomes) who do not receive visits, face additional financial and bureaucratic issues when keeping in touch with their families through international calls. Furthermore, the lack of mother and baby units means that, in most cases, women with children under the age of three have to serve their sentences in prison facilities far from the rest of their family. On the other hand, because of the pandemic, video conference calls were set up with family members although several detainees complained about facility discretion when assigning these calls. With regards to gatherings with families, female inmates were commonly told to 'wait' in 2020 as a result of the pandemic. In addition, they faced solitude, neglect, lack of affection and grief at not being able to fulfil their role as mothers. Managing affection is a prior requisite to the reinsertion processes.

The long distances from their places of reference faced by female inmates underpins the importance that the NPM gives to safeguarding **communication**. Suggestions such as the ones below have been made.

Suggestions were made at **Las Palmas II prison facility** (visit

104/2019) and **Ceuta prison facility** (visit 88/2020) with a view to encouraging use of **video conference** facilities with family members. Factors associated with the location of prison facilities (**isolated areas or across borders**, for example) need to be taken into account.

At **Madrid I prison facility** (visit 91/2019), it was suggested that steps be taken to insulate **phone booths** appropriately. Poorly insulated phone booths generate anxiety, frustration and can discourage inmates from using them, which is the exact opposite of what the Administration should aim to achieve. This Suggestion was rejected on the basis that it is a very complex redesign. The NPM insists that phone booths should be **private** because otherwise they do not fit the purpose they are designed for. Furthermore, it was observed on the visit that the prison facility was inflexible when issuing leave **permits** and that appeals made by female inmates were often approved by supervising prison judges. To this end, the Administration replied that this is mainly due to the elevated number of 'aliens' among female inmates and that the facility will be reminded of the need to account for individuals' roots when taking decisions [§ 490].

1.2 Prevention of gender and sexual orientation-based discrimination

Training for civil servants, technical staff and healthcare personnel

- Lack of training for civil servants and healthcare personnel on questions of gender has been observed since the first visit in 2018 (visit 101/2018). As a result, a Suggestion was submitted. The Administration replied that training on these matters is part of the induction training for access to the different professions. When information was requested, it was confirmed that the training sessions only addressed gender-based violence.

A Recommendation was submitted during the second visit made to Madrid I prison facility (visit 91/2019) further to a renewed observation that civil servants and caregiving staff at prison facilities for women **are not given specific and on-going training on equality and gender-based violence, gender identity and sexual orientation**. It is also essential in new and frequent profiles of violent offences against women, such as people trafficking. Lack of training on these matters was also observed in the **social care team**, in the resources institutional network and in the corresponding response protocols since there are no indications of training on matters of gender-based violence and gender perspective for healthcare personnel. In addition, it was observed during interviews **that not all professionals treat transexual individuals with respect**

and in a manner that is in line with their preferred gender. Therefore, **staff must be given training on sexual diversity and treatment of transexual individuals.** This was repeated during the interviews held at **Las Palmas II prison facility** at which **complaints were filed by transexual individuals** regarding the support provided by members of **staff covering technical, psychological and psychiatric issues, in addition to being treated in a way that does not take their situation into account.** Transexual individuals and women repeatedly agreed that they were not treated with respect during body searches and frisking.

During the visit to **Alcalá de Guadaira prison facility** (visit 102/2020), **it was observed that the documentation handed over by the facility categorised transexual detainees incorrectly.** During the interviews that were held, it was once again observed that civil servants, technical staff and healthcare personnel lacked training and transexual individuals complained about being treated with a lack of respect.

The Recommendation, which has been partially accepted by the Administration since it does not include healthcare personnel, has not been implemented [§ 491].

Psychological assessment and semi-structured interviews

- This **Recommendation has been accepted but not implemented [§ 492].**

Suicide Prevention Programme

- This Recommendation was formulated based on an earlier Suggestion (the visit to Las Palmas II prison facility), which was accepted but not implemented. It was made during the visit to **Ceuta prison facility** (visit 88/2020) on observing that, at all the prison facilities that were visited, the suicide prevention programme is arranged based on a suicide risk assessment scale that has been approved for all prison facilities. The scale is the same for men and women. Although the scale does address concerns about the outside world - children, dependent ascendants and dependent descendants - which tend to be one of the main emotional challenges for women on committal, **other matters of specific relevance to women were not explicitly referred to [§ 493].**

Prison support staff for the Suicide Prevention Programme

- Prison support staff play an essential role in appropriate operation of suicide prevention programmes. Prison staff performing this role should be given training on gender perspective and should be monitored by educators and/or psychologists and, given that it is a very emotionally demanding role, there should be rooms for letting off steam. This was pointed out by several members of support staff who, in meeting their professional obligations, have let their own physical and mental health suffer. They have not been compensated for this in any way [§ 494].

Psychiatric and psychological support

- At Madrid I prison facility (visit 91/2019) and Las Palmas II prison facility (visit 104/2019), **it was observed that the large majority of female inmates believe that the psychological support that is available is limited and of little use.** The prison service administration blames this on a lack of human resources. In addition, **the female inmates at Las Palmas II prison facility did not have access to the Programa de Atención Integral a Enfermos Mentales (PAIEM) [Programme for Integrated Care for Individuals with Mental Illness].** This was also the case at **Ceuta prison facility** (visit 88/2020) and in contrast to the case for male inmates. Further to a Suggestion to this end submitted to Las Palmas II prison facility, the Administration replied that, following the visit there had been some reorganisation and that women would have the option of participating in scheduled activities and excursions. Furthermore, once it had got under way, the results would be assessed and an opportunity for implementing a unit for the Programme for Integrated Care for Individuals with Mental Illness at the facility would be assessed. The NPM once again points out that female inmates have the same rights as male inmates to health and care within the framework of the Programme for Integrated Care for Individuals with Mental Illness and, where applicable, to the creation of a unit of this kind.

Once again, during the visit to **Alcalá de Guadaira prison facility** (visit 102/2020), **it was observed that there is no specialist psychiatric assessment and support, which is very important to women in the Programme for Integrated Care for Individuals with Mental Illness,** as stipulated in the prison facility administration's implementation protocol for this programme, or for female inmates under a long-term or recurrent prevention of suicide protocol. Therefore, a Recommendation was submitted [§ 495].

1.3 Gender-based violence

Protocols and semi-structured interviews

- In the meetings held with prison system management and care-giving teams, the institution was informed that the large majority of women have been victims of gender-based violence at some point in their lives. The following estimations were made Antoni Asunción Hernández prison facility 90%; Madrid I prison facility 70%; Las Palmas I prison facility 50%; Las Palmas II prison facility 60%; Ceuta prison facility 60%; Alcalá de Guadaíra prison facility 80%.

These are estimations since **this information is not systematically collected, despite the impact it has on women's physical, psychological and emotional health in life in general and in the rehabilitation and reinsertion processes. Gender-based violence is not directly assessed in any of the protocols that were reviewed (Personal Treatment Programme, committal interview, psychological report, social background), and it is not included in treatment programmes or on health information files.**

The Recommendation, which has not been implemented to date, was partially accepted by the Administration. It states that

on the whole, in the healthcare field, this inclusion is considered unnecessary because, as is the case in exterior public healthcare, assessing the appropriateness/need to collect and document it in clinical histories in certain cases is decided by the doctor providing care at that particular moment and, where applicable, the specialist doctor (psychiatric or other) in his/her field of speciality [§ 496].

- In line with what specialists in the field indicate, the **NPM believes** that experiences of gender-based violence have a significant impact on victims' physical and mental health and can have aftereffects such as functional limitations, post-traumatic stress and anxiety and they can affect rehabilitation and reinsertion processes. The failure to record the different types of gender-based violence detainees may have been subjected to, including psychological, physical, sexual abuse (aggression, abuse, prostitution) or also other types of violence (vicarious violence, structural violence), in a disaggregated manner, seriously limits responses from a healthcare point of view [§ 497].

Social case files in open prisons

- During the visit to **Las Palmas I open prison facility**, the following Recommendation was made based on the particular importance of having access to **precise knowledge that a female detainee may return to a situation in which she faces gender-based violence at home or from relatives when she is granted semi-liberty** and, to some extent, returns to her life on the outside. This information is not collected. The Recommendation was **accepted by the Administration** [§ 498].

The ‘Being a woman’ programme

- The **‘Being a woman’** programme, which is a treatment-based response to the reality of gender-based violence experienced by a large percentage of female inmates, **was not being implemented at Las Palmas II prison facility** at the time of the visit because of a staff shortage. There is no plan for it to start up again. At **Madrid I prison facility, it had to be suspended because there was a shortage of staff and, when the visit took place, only eight women were involved in it.** During the visit to **Alcalá de Guadaira prison facility** (visit 102/2020), it was observed that **the programme**, which, on paper, is broad and proposes raising awareness of and addressing the violence faced by women, **has not been appropriately developed since it does not include all the necessary sections, is not assessed, does not include participation of healthcare professionals or legal experts, does not have any links to community resources specialising in care for women and is not included in the Personal Treatment Programme for Women.** Therefore, a Recommendation was made [§ 499].

1.4 Health

- During the visit to **Alcalá de Guadaira prison facility** (visit 102/2020), matters of health were addressed and the Recommendations indicated below were made [§ 500].

Sensory defects and loss of functional capacity due to age

- A failure to assess sensory defects such as deafness that could severely affect a woman’s functional capacity and autonomy was observed. The need to articulate a response to health issues, (false teeth and dental occlusion, glasses for poor eyesight, presbyopia brought on by age, hearing aids and so on) that require financial input by the individual

since they are not covered by the public health system, also needs to be taken into account. Age and losses of functional capacity associated with age are an additional limiting factor. The age of female inmates is on the increase and the female inmate population is gradually ageing. No consideration is given to the limitations brought on by age and old age and, as such, there is a failure to suitably adapt recreational activities and destinations [§ 501].

Health diagnoses

- A lack of health checks for female inmates was observed during the visit. Despite having access to comprehensive information in medical and social records, in addition to the opinions of professionals with a great deal of experience in their field of work, there were no health checks suitable for providing female inmates with answers to their health requirements while committed. Based on observations and information gathered during the visit, mental health issues and drug addictions, gender-based violence (particularly sexual violence), obesity and excess weight, transmissible diseases such as HIV, hepatitis B and C, tuberculosis and high blood pressure, and type II diabetes stood out as prevalent. There were also a great number of pregnancies among adolescent girls and the women had more children than average [§ 502].

Health promotion activities

- There are no specific health and healthy lifestyle promotion programmes such as active lifestyles and physical exercise aimed at preventing obesity and excess weight, or a healthy eating programme, tobacco withdrawal programmes, anxiety management, healthy sleeping pattern programmes and programmes aimed at promoting violence-free lives, or information about sex and reproduction rights [§ 503].

Therapeutic alternatives to medication

- As is the case at other facilities such as Madrid I prison facility (visit 91/2019) and Las Palmas II prison facility (visit 104/2019), there was evidence of elevated consumption of medication that could be regarded as invisible addictions because they are prescribed drugs. As a result, a Recommendation was made [§ 504].

Periodic explanation of the Personal Treatment Programme

- As was the case in other facilities, it was observed that female inmates

are largely unaware of their Personal Treatment Programme and, when they are aware of it, nothing has been done to work on committing to their change objectives. This complicates taking an active and leading role in their sentence and reinsertion programme [§ 505].

Global insight into addiction withdrawal

- Addictions are one of the prevalent health issues. A significant number of female inmates confirmed during their interviews that the reason for their deprivation of liberty was linked to consumption of illegal substances. Consumption of these substances is directly linked to repeat offences, and, during interviews, detainees indicated that consumption continues as they serve their sentence and that it causes conflicts on the inside.

It is not possible to ascertain the percentage of Roma women with addictions based on medical histories since the Roma minority variable is not contemplated when data is collected. Based on the interviews that were held, it was confirmed that there are cases of this issue among Roma women in prison. Recognising this helps to keep key cultural aspects in mind for programmes dealing with addictions.

There were no units for therapeutic purposes at the facilities that were visited. Specific programmes addressing addictions to substances that are developed by external entities and that are not linked to health and psychiatric professionals at the facility are insufficient and female inmates do not rate their content and usefulness very highly.

Inmates in the mother and baby unit do not have access to the addictions programme.

There is no direct coordination with community services dealing with addictions in order to facilitate getting female inmates onto day release programmes. Likewise, there are no continuity to programmes for women who are committed and for women who progress or are released from prison.

The aforementioned Recommendation is complementary to the one made during the visit to **Ceuta prison facility** (visit 88/2020) [§ 506].

Equal opportunities and treating drug addiction

- During the aforementioned visit to **Ceuta prison facility**, it was confirmed that female inmates cannot access the drug addiction treatment programme. They only have access to the tobacco withdrawal programme. The female inmates who were interviewed as a group

indicated that a programme for addressing addiction issues is necessary. Drug addiction and withdrawal programmes for female inmates need to be suitably adapted to the differences and special circumstances of their gender. It is essential if they are to be treated equally and make full use of their right to access efficient withdrawal programmes. This was the basis of this Recommendation [§ 507].

- Furthermore, within the field of addictions, a significant link between treatment in ordinary regime and day release facilities was observed during visits to Las Palmas I and CP Palmas II open prison facilities.

At **Las Palmas I open prison facility**, the team of technicians explained that addictions are one of the main hurdles that individuals deprived of liberty face in terms of reinsertion and that they are often the reason behind many steps backwards in the prison system and cases of renewed offences. **Female inmates do not have access to an addiction support network. Men receive global treatment starting with the therapeutic unit in prison facilities and this continues through to day release with the support of the therapeutic community in Almogaren that specialises in addictions, and which has residential resources. Women are not given this opportunity in ordinary regimes at Las Palmas II prison facility or during day release at Las Palmas I prison facility.** The staff considers that this constitutes unfair and unequal treatment. They understand that it is because there are fewer women and because of the types of addictions they have (less social impact and not so closely linked to offences). As a result, instead of helping to open doors, the less conflictive and aggressive behaviour shown by women paradoxically limits their opportunities and generates an entirely unequal set of circumstances. The Suggestions made with regards to this were rejected. The passive nature and lack of planning associated with the process for reinserting female inmates back into society is striking. The alleged lack of resources should be resolved through a proactive policy to set up a therapeutic unit for addictions designed for female inmates in ordinary regime at Las Palmas II prison facility and access to suitable external resources for the treatment of addictions during day release, as is the case for the men.

The last Recommendation, which is being dealt with right now, is linked to the shop at **Las Palmas II prison facility**. As explained in the next epigraph, given that this recurrently affects women's health across several prison facilities, it should be the object of a Recommendation [§ 508].

Prison shop

- Female inmates request access to shower gel, face and body cream, nail varnish and acetone, among other items, for personal hygiene and care purposes. Sub-Saharan women also request specific products suitable for their hair and skin and, in prison facilities with a mother and baby unit, there is an additional request for baby products. Provision of sufficient quantities of personal hygiene products for female inmates is being addressed in order to determine if the Administration fully respects the provisions of article 5 of the Bangkok Rules [§ 509].

2 Suggestions

In addition to these matters for which Recommendations have been formulated, in 2020, numerous conclusions and Suggestions were processed, both with regards to the visits made within the framework of this project and with regards to other visits.

2.1 Access to work and treatment

- The way in which female inmates are treated with regards to this matter suggests that the perception the Administration has of them needs to be reassessed. It seems that the Administration considers them to be non-productive, even from a cognitive point of view. The restrictions they face in the day-to-day clash with the hope of a better future.

Barriers with regards to access to training and treatment for female inmates based on organisation of spaces at the prison facility and distribution of inmates was observed during the first visit to **Antoni Asunción Hernández prison facility** (visit 101/2018). A Suggestion aimed at adopting measures to resolve this was formulated. It was accepted and effective execution is currently being checked through supervision of how the case is being processed.

The Suggestion indicating that women should be instructed to access the sports facilities under the same conditions as male inmates was accepted by this prison facility.

Last of all, **gender-based discrimination indicators in terms of access to training workshops and destinations** was also observed in this visit and a Suggestion was formulated. It was accepted by the Administration.

Further to analysis of training course data at **Las Palmas II prison**

facility (visit 104/2019), it was observed that **women are suitably represented in terms of training for employment courses**. Most of them are mixed courses. However, there was some **sexism in the distribution** on certain courses: the surface and furniture in buildings and retail outlets cleaning course is for women only and the domestic plumbing and air-conditioning activities course and the painting auxiliary activities course is for men only. This simply sustains the concept of gender-based division of roles. Further to the corresponding Suggestion, the Administration replied that it will take steps to encourage participation in courses and will work on eliminating sexism of all kinds with regards to access to training courses. The NPM insisted in its reply that female inmates are already motivated since, during the numerous interviews that were held, they asked to participate in workshops such as bakery and maintenance in which they currently do not get involved. The NPM has insisted that, in fact, the Administration needs to begin by recognising the differences because, unless it does so, effective training under equal terms cannot be delivered.

During the visits to **Alicante II prison facility** (visit 78/2020), the female inmates who were interviewed at the facility said that they were discriminated against in comparison with male inmates since the men had access to more paid destinations and more activities.

During the visit to **Alcalá de Guadaira prison facility** (visit 102/2020), it was observed that occupational activities only take place in the female unit. There are no activities or occupations available to female inmates in the open prison unit or to those in the mother and baby unit. The activities that are available are very limited occupational activities that are not given much support and that are mainly linked to sewing (which encourages gender stereotyping) and painting tiles.

During the visit to **Ceuta prison facility** (visit 88/2020), it was observed that female inmates had limited access to training workshops and destinations [§ 510].

2.2 Spaces

- Assigned spaces are the framework within which individuals define their role in life and discover their social identity. Individuals perform all their bodily functions in them. Based on observations of a lack of connection between the actual spaces assigned to women in prison facilities and the corresponding legal mandate, the NPM has submitted Suggestions aimed at transforming the exclusion symbol often represented by the spaces assigned to female inmates. Furthermore, some thought should

be put into what is an appropriate space for serving a short sentence or one that is closely linked to subjective conditions, such as drug addiction.

Some of the specific findings in terms of spaces are indicated below [§ 511].

Lack of space

- During the visit to Murcia II prison facility (visit 100/2020), it was observed that female inmates cannot be committed to the ordinary regime unit. This is not possible at Murcia I prison facility, either. Therefore, if a woman is classed as a first-degree inmate or is in preventive custody and article 10 of the Ley Orgánica General Penitenciaria (LOGP) [General Prisons Act] is applied, she must necessarily move to another province. Therefore, it is suggested that the Administration ought to assign some of the sections of the closed prison unit to women [§ 512].
- During the Ceuta prison facility visit (visit 88/2020), it was observed that female inmates do not have places in the social insertion facility because there is a staff shortage. As such, the female inmates on day release have to share unit 9 with all the other female inmates, which is clearly discriminatory when compared with the situation for men. Their right to make the most of day release as a step forward towards reinsertion under the same conditions as men is not respected. The prison facility tries to compensate for this shortage of spaces by using control tags. However, devices of this kind are not always available, or they cannot be used because of certain circumstances, such as when the detainee does not have a home or resources outside of the facility. This situation puts women at a serious disadvantage and generates a lot of stress because it means that they miss out on their right to daily contact with their children and are fearful that they may even lose custody of them. By giving detainees semi-liberty outside the prison facility when it is not necessary or justified for them to stay at the facility, it is possible to protect their children from the long-lasting side effects of having a mother in prison, including ending up in the care system and eventually in prison themselves.

At the time of the visit to Ceuta prison facility (visit 88/2020), it was observed that female inmates were not suitably separated from each other on the inside. There were 15 female inmates (seven from Morocco and eight from Spain), five of whom were second degree inmates and ten of whom had not been assigned a category and were in precautionary detention. They are in unit 9, which has 72 places. Unit 10 is also assigned to women, and it is empty due to a lack of personnel and, therefore, there are no divisions on the inside. An analysis of the incidents indicated that

most of them consist of slight aggressions between inmates, insults and threats, passive resistance, failure to comply with rules and introduction of prohibited goods. There were no records of aggressions aimed at civil servants or of active resistance, possession of dangerous goods or other types of more serious incidents. This does tend to happen among male inmates. The number and intensity of the incidents is much lower compared with men. If the spaces on the inside were suitably divided up, this would decrease incidents even more. A Suggestion to this end was accordingly submitted [§ 513].

- None of the prison facilities on the Canary Islands, including Las Palmas II prison facility which has a 12% female population, over half of which are of reproductive age, have a mother and baby unit. This is a significant obstacle for women who wish to have children during their stay in a prison facility. Furthermore, this means that pregnant women have to be separated from their babies after birth, unless both can be transferred to peninsular Spain. This means uprooting individuals and it can even lead to older children being abandoned. This is why it was suggested that mothers deprived of liberty on the Canary Islands be provided with suitable facilities in which to serve their sentence with children under three if they are with them. The Administration replied that the scarcity of potential users means that, for the time being, opening a facility of this kind is not considered necessary. The NPM has insisted that the Suggestion refers to suitable facilities, not to opening up a new facility specifically for this purpose. A response to the Suggestion has been requested. The same Suggestion was made with reference to the Ceuta prison facility visit (visit 88/2020) [§ 514].

Size

- At the time of the visit, there were 480 female inmates in Madrid I prison facility. Out of these, 370 had individual rooms and the remainder had shared rooms. The cells are 2.97m long by 2.43m wide (7.22m²) and issues ventilating them were observed on several occasions. The minimum standard stipulated by the Committee for the Prevention of Torture is four metres square per inmate when cells are shared. The female inmates who were interviewed often referred to a lack of privacy because they were required to share cells and because they spend a lot of time in the little space they have. Therefore, it is suggested that female inmates be guaranteed an individual cell unless it is understood that they are better off sharing. Should this be the case, they should be guaranteed a minimum space of four metres square each. The Administration replied that, given architectural limitations, female inmates who wish to be alone should be transferred to an alternative facility if there are no vacant cells

available. This should be done wherever possible and taking relevant circumstances into account. The NPM insists that the Administration must respect established international standards on the minimum necessary space per person in cells.

It was observed that access to cells in this prison facility was limited by architectural barriers. There is a section of stairs in order to access cells and the shower is narrow and has a step for access which means it cannot be used by individuals with limited mobility or who are overweight. Further to a Suggestion aimed at improving this situation, the Administration widened the shower in two cells. This is entirely insufficient given the elevated number of individuals at the facility and the growing number of older women [§ 515].

- At Pereiro de Aguiar prison facility (visit 8/2019), it was observed that the yard in the female unit was small and that female inmates only have access to the main yard when they are participating in training courses. Again, at La Palma prison facility (visit 26/2019), the communal areas in the female unit are very small, which limits doing any physical exercise and helping individuals to relax, and communication with others and visual stimulation, which are an integral part of sustaining a person's physical and psychological abilities. This only adds to the feeling of being enclosed that one experiences when living permanently in this unit [§ 516].

Deficiencies in maintenance and safety measures

- Deficiencies in maintenance were observed in the female units in several prison facilities. For example, Madrid I prison facility (visit 91/2019), Melilla prison facility (visit 98/2019) and the open prison unit at Las Palmas I prison facility (visit 102/2019). Some female inmates indicated that they felt unsafe, particularly at night, and this was confirmed by prison staff. This feeling of insecurity was also observed during the visit to Antoni Asunción Hernández prison facility (visit 101/2018) and, therefore, suitable supervision was suggested in order guarantee fair and safe use of communal areas. This Suggestion was accepted by the Administration [§ 517].

Inaccessible spaces

- There are spaces with architectural barriers which make them inaccessible to female inmates. For example, the library or chapel, which are in the male inmate unit at La Palma prison facility (visit 26/2019). Or, for example, the library and activity spaces, such as the kitchen, which are

located outside the women's unit at Melilla prison facility (visit 98/2019) [§ 518].

- In terms of medical assistance, the women's unit at La Palma prison facility (visit 26/2019) does not have a doctor's consultation room and healthcare is provided in the civil servant's office, which is clearly unsuitable for this purpose. Female inmates are only transferred to the doctor's consultation room in the men's unit to deal with more serious issues and, according to the information provided, this does not happen very often. Again, at Melilla prison facility (visit 98/2019) and Ceuta prison facility (visit 88/2020), female inmates are not taken to the nursing unit when they have health issues because of a shortage of staff [§ 519].

2.3 Coercive means and isolation

- During the visit to Antoni Asunción Hernández prison facility (visit 101/2018), the management team indicated that weapons are not generally used during incidents involving women and that the incidents tend to be much less aggressive than ones among men. When incidents are over, it is easier to get women to reconcile than men.

However, detailed analysis of documentation about use of safety measures and coercive means provided for in article 72 of the Reglamento Penitenciario (RP) [Prison Regulations], which is available on the computer system used to record incidents, led to the conclusion that temporary isolation, validated straps and physical force are used to a greater extent on women than on men. Surprisingly, there are hardly any records of use of rubber batons and handcuffs, which is consistent with less aggression and less serious incidents among women. The fact that women are subjected to temporary isolation, entirely immobilised using straps and use of physical force to a greater extent than men indicates that these means are used as an informal means of punishment. This suggests that the Administration is not as ready to accept acts of insubordination among women.

Furthermore, it was observed that female inmates are much more commonly subjected to application of article 75.1 (restriction means adopted outside the prison regulations isolation guarantees system) and for much longer periods than male inmates. Therefore, a review of use was suggested. Continued pressure by the NPM has meant that the Administration has admitted to this discrimination and is reviewing the reasons for this difference in treatment [§ 520].