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Committee against Torture

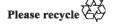
Concluding observations on the fourth periodic report of Belarus

Addendum

Additional information received from Belarus on follow-up to the concluding observations*

[23 October 2013]

- 1. The Permanent Mission of the Republic of Belarus to the United Nations Office and other International Organizations at Geneva presents its compliments to the Office of the United Nations High Commissioner for Human Rights and, with reference to the letter of 3 July 2013 from the Rapporteur on Follow-up (cc/jli/follow-up/CAT) requesting further information and some clarifications with regard to certain issues and recommendations contained in the concluding observations of the Committee against Torture (CAT/C/BLR/CO/4), has the honour to transmit relevant information prepared by competent Belarusian authorities and makes the following comment.
- 2. This information is provided by the Republic of Belarus in line with paragraph 34 of conclusions and recommendations, in which the Committee requested the Republic of Belarus to submit information on paragraphs 6, 11 and 14.
- 3. However the Republic of Belarus in the official commentary on the findings and recommendations of the Committee (CAT/C/BLR/CO/4/Add.1) did not accept for consideration some paragraphs, including paragraphs 6 and 11, because of their biased and politicized nature. For that reason the information presented therein relates to paragraph 14 only. Since the initial information on the paragraph 14 was provided by the Belarusian side to the Committee in November 2012, the current update covers the period from November 2012 to September 2013.
- 4. The Republic of Belarus does not feel itself obliged to provide information on the issues raised in the last two paragraphs of the abovementioned letter because in their content they go beyond the scope of the UN Convention against Torture.
- 5. The Permanent Mission avails itself of this opportunity to renew to the Office of the UN High Commissioner for Human Rights the assurances of its highest consideration.



^{*} The present document is being issued without formal editing.

Further information on the matters raised in the letter from the Rapporteur on Follow-up

- 6. The Republic of Belarus submits the following information in relation to paragraph 14 of the conclusions and recommendations made by the Committee against Torture following the presentation by Belarus at the Committee's forty-seventh session (11 and 14 November 2011, Geneva) of its fourth periodic report on measures taken to implement its obligations under the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.
- 7. In the period from November 2012 to September 2013, the following voluntary associations monitored the activities of the Belarusian bodies and institutions responsible for enforcing sentences and other criminal sanctions.
- 8. Representatives of the National Public Watchdog Commission attached to the Ministry of Justice visited holding facility No. 1 of the Ministry of Internal Affairs Penal Enforcement Department's administration for Minsk and Minsk province and holding facility No. 6 of the Department's administration for Brest province. Representatives of a local commission attached to the Mahilioù provincial executive committee's Central Justice Office visited the following Penal Enforcement Department correctional facilities in that province: prison No. 4, correctional colony No. 14, open prison No. 16 and correctional colony No. 19.
- 9. During the visits, of the voluntary association representatives did not note any violations of Belarusian law at the penal correction system bodies and institutions.
- 10. Over the period indicated, penal correction system bodies and institutions were also visited by representatives of other voluntary associations, including: the Belarusian Orthodox Church, the Roman Catholic Church, the Belarus Red Cross Society and Mothers Against Drugs.
- 11. The Office of the Procurator-General of Belarus received no requests from citizens, government bodies or other organizations for access by non-governmental monitoring mechanisms to places of detention. Accordingly, the procuratorial authorities carried out no checks in this regard.
- 12. Legislation governing the provision of psychiatric care has been in place since 1999, following the adoption of the first version of the Psychiatric Care and Patients' Rights Guarantees Act of 1 July 1999.
- 13. The adoption on 7 January 2012 of the Psychiatric Care Act was a considerable advance in the legal regulation of such care.
- 14. The main significance of the Act is in making psychiatric care as humane and democratic as possible and rendering it closer and, legally speaking, even equivalent to other types of medical care, where feasible. The Act is based on the idea that, in some circumstances, the specific nature of mental disorders makes it necessary and justified to apply psychiatric support measures independently, or even in spite, of the express wish of the patient at a given moment. Evidence for the application of such measures must be clearly defined, the number of patients restricted as much as possible and the measures themselves strictly regulated.
- 15. The Act states that a person is presumed not to have a mental disorder (illness) until the presence of a mental disorder (illness) has been determined on the grounds and in the manner established by law. To implement this principle, the Act provides in particular for: a mechanism for protecting patients' rights and legitimate interests; patients' rights and obligations when receiving psychiatric care; the rights and obligations of medical personnel

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providing psychiatric care; the rights and obligations of inpatients in psychiatry wards; and the rights and obligations of managers of psychiatry wards, which include establishing conditions for the exercise by patients of their rights under the Act and other legislation.

- 16. Pursuant to article 47 of the Act, the following sectoral standards regulating various aspects of psychiatric care were drafted by the Ministry of Health, considered by legal experts at the Ministry of Justice and approved:
 - Ministry of Health Decision No. 92 of 5 July 2012 approving instructions on the procedure for conducting psychiatric examinations of persons suffering from mental disorders (illnesses) and staying as inpatients in social service institutions;
 - Ministry of Health Decision No. 110 of 19 July 2012 approving instructions on the procedure for carrying out regular check-ups of patients suffering from chronic and prolonged mental disorders (illnesses) with serious, persistent or frequent acute symptoms;
 - Ministry of Health Decision No. 126 of 15 August 2012 approving the instructions on the procedure for providing emergency (urgent) psychiatric care;
 - Ministry of Health Decision No. 56 of 26 July 2013 approving instructions on the procedure for providing psychiatric care to inpatients and outpatients subject to compulsory safety and treatment measures following an order (decision) by a court.
- 17. All of these instruments are principally intended to protect the rights and freedoms of people suffering from mental disorders (illnesses).
- 18. In line with the relevant World Health Organization (WHO) recommendations, treatments like atropine shock therapy and insulin shock therapy have not been used in psychiatric practice in Belarus for a long time.
- 19. Over the past 10 years, psychiatric care in Belarus has chiefly been provided outside hospital settings, in line with WHO recommendations. The number of people suffering from mental and behavioural disorders admitted as inpatients to closed psychiatric health-care organizations has also fallen.
- 20. At the same time, the total number of people seeking psychiatric assistance has increased, attesting to the population's growing trust in psychiatric services.
- 21. Between 2010 and 2011, the total number of people receiving psychiatric care grew by 3.0 per cent, from 319,453 to 329,033; the number admitted as psychiatric inpatients dropped by 3.7 per cent, from 57,082 to 54,977. The proportion of patients admitted as psychiatric inpatients relative to the total number receiving treatment decreased from 17.9 per cent to 16.7 per cent.
- 22. Between 2011 and 2012, the total number of people receiving psychiatric care grew by 2.6 per cent, from 329,033 to 337,699; the number admitted as psychiatric inpatients dropped by 2.0 per cent, from 54,977 to 53,859. The proportion of patients admitted as psychiatric inpatients relative to the total number receiving treatment decreased from 16.7 per cent to 15.9 per cent.

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