



**Convention against Torture
and Other Cruel, Inhuman
or Degrading Treatment
or Punishment**

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Committee against Torture

**Information received from the Republic of Korea
on follow-up to the concluding observations on its
sixth periodic report***

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* The present document is being issued without formal editing.



I. Introduction

1. In accordance with the obligation to submit periodic reports under Article 19 of the United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (hereinafter “the Convention against Torture”), which the Government of the Republic of Korea ratified in 1995, the Government submitted its sixth periodic report to the United Nations Committee against Torture in July 2021. This follow-up report has been prepared to submit information in response to the recommendations made by the Committee following its consideration in July 2024.

II. Follow-up information on the concluding observations (CAT/C/KOR/CO/6)

Fundamental legal safeguards

A. Right to Legal Counsel

2. With regard to recommendation 13, under the Constitution of the Republic of Korea and the Criminal Procedure Act, when a suspect is arrested (or detained), his/her defense counsel or the person designated by the criminal defendant shall be notified, in writing without delay, of the name of offense, the time and place of arrest, the gist of charge, the cause for arrest, and the facts that he/she may appoint a defense counsel.

3. In addition, under the *Act on Execution of Sentences and Treatment of Inmates*, when a detained inmate is visited by a legal counsel in a criminal case, the time and frequency of visits shall be unlimited, the visit shall take place where no partitions to prevent contact have been installed, and a correctional officer may neither intervene in visits nor listen to or record the contents of the visits. These provisions aim to protect the inmate’s right to legal counsel. (For relevant provisions, see Annex <Table-1>).

B. Free Medical Examinations for All Persons Deprived of Their Liberty

4. All new inmates admitted to correctional facilities are provided with medical examinations without delay, and inmates who remain in custody also receive at least one periodical medical check-up per year, practically protecting their right to health through free medical examinations. In addition, when an inmate in custody requests medical treatment, a physician (medical officer) at the correctional facility provides care, and if specialized treatment or care is deemed necessary, the inmate is either transferred to an external medical institution, receives care from an external physician who visits the facility, or is provided with remote video treatments. (For statistical data on inmate medical examinations, see Annex <Table-2>).

5. Inmates may obtain copies of their medical records through the information disclosure procedure. Under Article 43 of the *Act on Execution of Sentences and Treatment of Inmates*, they are also free to submit relevant records to the prosecution either by mail or through their legal counsel during visits.

6. Furthermore, pursuant to Article 34 of the *Criminal Procedure Act*, in cases where detainees make a request to receive medical treatment from a doctor for reasons of disease, injury, etc., such requests are granted to the fullest possible extent. Also, the *Human Rights Protection for Detainees* displayed in detention centers explains that detainees may request medical treatment to a doctor, ensuring that they may request and receive such treatment any time.

7. In addition, under Article 31 (5) of the *Rules of Detaining and Escorting Suspects*, when detainees face financial difficulties in paying for medical treatment, the police inform them of available medical expense support programs and encourage their use, aiming to

protect the right to health of detainees. (For *Human Rights Protection for Detainees*, see Annex <Table-3>).

C. Installation of Closed-circuit Television and Audio & Video Recording Equipment in Interrogation Rooms of Juvenile Detention Centers and the Availability of Videotapes

8. Juvenile protection centers, which house protected juveniles according to protective dispositions decided by family courts, provide protection, education, and resocialization programs. These institutions are fundamentally distinct in both function and legal status from investigative authorities responsible for determining allegations of a criminal offense through criminal procedures.

9. While interrogation rooms in investigative authorities serve a legal function for securing statements and collecting evidence, the interrogation rooms in juvenile protection centers are not intended for determining legal responsibility. Rather, they are primarily used for educational purposes to identify disciplinary violations or behavioral problems of protected juveniles and to encourage behavioral improvement through counseling and guidance. Given this unique context, the introduction of video or audio recording equipment into such rooms may create an atmosphere similar to criminal interrogation and investigation, which could have adverse effects that are inconsistent with the educational objectives of these facilities, such as juveniles' psychological intimidation, restrictions on free expression, diminished effectiveness of counseling, and impediments to building trust.

10. Currently, juvenile protection centers ensure the fairness and credibility of the investigation process by managing investigation records, conducting internal monitoring, and providing staff training, under relevant regulations, including the *Enforcement Rule of the Act on the Treatment of Protected Juveniles*. The Government will continue to review the current system to ensure its alignment with international human rights standards and to further strengthen the human rights protection of protected juveniles.

Solitary Confinement and Provision of Adequate Medical Services to Inmates, Including Mental Health Care

A. Solitary Confinement

11. With regard to recommendation 17(c), solitary confinement is executed by designating general solitary wards as disciplinary cells. Inmates under such confinement are, in most respects, provided with treatment equivalent to that of general inmates, including access to outdoor exercise in principle, frequent health checks, and psychological counseling. (For relevant provisions, see Article 112 of the *Act on Execution of Sentences and Treatment of Inmates* and Annex <Table-4>).

12. In addition, the *Act on Execution of Sentences and Treatment of Inmates* limits the imposition of solitary confinement to a maximum of 30 days, and it is imposed only after an impartial and rigorous review conducted by the Disciplinary Committee that includes at least one outside member. (For relevant provisions, see Articles 108 and 111 of the *Act on Execution of Sentences and Treatment of Inmates* and Annex <Table-4>).

13. Furthermore, under Rule 45(2) of the *United Nations Standard Minimum Rules for the Treatment of Prisoners* (the Nelson Mandela Rules), no disciplinary measures such as solitary confinement are imposed when the act in question is deemed to have resulted from mental illness. (For relevant provisions, see Article 220 of the *Enforcement Rule of the Act on Execution of Sentences and Treatment of Inmates* and Annex <Table-4>).

14. To further protect the human rights of inmates undergoing disciplinary measures, the Government of the Republic of Korea amended paragraph 4 and 5 of Article 112 (Execution of Disciplinary Action) of the *Act on Execution of Sentences and Treatment of Inmates* on 4 February 2020 to ensure that even inmates subject to suspension of doing outdoor exercise

may do it at least once a week. In addition, in accordance with Article 112(6) of the same Act and Article 133(4) of the Enforcement Decree thereof, inmates subject to solitary confinement are receiving appropriate medical treatment; for example, a medical officer shall frequently check the health of the inmates before, during and after the execution of solitary confinement.

15. On 8 February 2024, paragraph 4 of Article 230 (Order of Execution of Disciplinary Actions) of the *Enforcement Rules of the Act on Execution of Sentences and Treatment of Inmates* was amended to prohibit the consecutive execution of two or more solitary confinement measures. Even in exceptional cases where consecutive confinement is permitted, the total duration shall not exceed 45 days. (For the relevant provision, see Annex <Table-4>)

16. In line with Rule 45(1) of the *United Nations Standard Minimum Rules for the Treatment of Prisoners* (the Nelson Mandela Rules), the Government of the Republic of Korea is currently reviewing the amendment of the *Act on Execution of Sentences and Treatment of Inmates* to ensure that the maximum duration of solitary confinement does not exceed 15 days.

B. Ensuring the Provision of Medical Services to Inmates

17. In relation to recommendation 17(d), the Government of the Republic of Korea has been making utmost efforts to recruit additional medical personnel by improving compensation, such as raising the annual salary and abolishing the wage ceiling for medical officers (physicians) working in correctional facilities since 2024. (For statistical data on medical personnel, see Annex <Table-5>)

18. Furthermore, to improve medical treatment for inmates, the Government of the Republic of Korea provides access to various specialized medical care such as referrals to outside medical clinics, visiting treatments, and remote video treatments. Beginning in 2025, psychiatrists from university hospitals have been dispatched to the Ministry of Justice's remote clinics to provide treatment for inmates to improve the quality of care and ensure adequate treatment for those with mental illnesses. (For statistical data on medical treatment for inmates in correctional facilities, see Annex <Table-6>)

Allegations of Torture and Ill-Treatment in the Military and Cases of Death, Including Suicides

19. In relation to recommendation 27(b), on 27 May 2020, the *Framework Act on Military Status and Service* was amended to allow bereaved families of soldiers who died in the line of duty to receive legal assistance from an attorney-at-law in the course of dealing with accidents resulting in death. This measure was introduced to ensure that bereaved families of soldiers who died in the line of duty can actually express their views in the course of dealing with accidents and to help clarify the exact cause of death.

20. On 1 July 2022, the *National Human Rights Commission of Korea Act* was amended to introduce the military human rights protection officer system. Under the amended Act, where any military personnel died while in service, the Minister of National Defense shall immediately notify the military human rights protection officer of such fact, and the officer may be requested to attend inquiries or investigations. This system has helped prevent human rights violations against military personnel, such as crimes related to cases of death of military personnel, and enhance the transparency of investigations into such deaths.

21. On 1 July 2022, the *Military Court Act* was amended to exclude crimes related to the deaths of military personnel from the jurisdiction of military courts, and investigations into such cases are now conducted by civilian investigative authorities rather than military investigative bodies. As a result, cases of death are no longer subject to the influence of the military chain of command, thereby making independent and impartial investigations possible, as well as thorough investigations and judicial proceedings against all parties involved, including commanding officers.

22. In addition, to prevent torture and ill-treatment within the military, all service members are required to complete training on human rights and military law. Perpetrators of torture or ill-treatment are subject to strict investigation and judicial proceedings, regardless of their rank or position.

Annex

Table 1

Relevant Provisions

Constitution of the Republic of Korea

Article 12

(5) No person shall be arrested or detained without being informed of the reason therefor and of his/her right to assistance of counsel. The family, etc., as designated by Act, of a person arrested or detained shall be notified without delay of the reason for and the time and place of the arrest or detention.

Criminal Procedure Act

Article 87 (Notice of Detention)

(1) When the criminal defendant is detained, his/her defense counsel shall be notified of the gist of facts concerning the name of offense, the time and place of detention, the gist of charge, and the cause for detention, and if the criminal defendant does not have a defense counsel, the person designated by the criminal defendant from among the persons referred to in Article 30 (2) shall be informed of the aforementioned facts of the case and of the facts that he/she may select a defense counsel.

Act on Execution of Sentences and Treatment of Inmates

Article 84 (Visit by Defense Counsel and Receiving of Correspondence)

(1) Notwithstanding Article 41 (4), a correctional officer may neither intervene in visits between an unsentenced inmate and his or her defense counsel nor listen to or record the contents of the visits: Provided, That the correctional officer may continue to monitor the unsentenced inmate at a visible distance.

(2) Time and frequency of visits between an unsentenced inmate and his or her defense counsel shall be unlimited.

(3) Notwithstanding the proviso to Article 43 (4), correspondence between an unsentenced inmate and his or her defense counsel shall not be monitored unless it is impossible for the correctional facility to verify whether the other party to correspondence is a defense counsel.

Table 2

Medical Examination Status of Inmates

(Unit: Persons)

Year	Category		
	Average Daily Inmate Population	Number of Initial Examinations	Number of Regular Examinations
2019	54,624	61,240	40,004
2020	53,873	55,766	40,248
2021	52,368	40,528	40,744
2022	51,117	41,058	38,019
2023	56,577	56,526	41,730
2024	61,366	58,567	44,776

- (Classification of Medical Examinations)

Initial Examination: Conducted for all new inmates

Regular Examination: Conducted for inmates at least once a year

※ Excludes inmates with less than 2 months remaining on their sentence and those admitted for less than 1 month as of the examination date, and those who refuse the examination.

- (Medical Examination Status of Inmates by Year)

Table 3

Human Rights Protection for Detainees

1. A detainee may request to appoint legal counsel.
2. A detainee may receive visits from persons other than legal counsel and may also receive documents or other items. (However, items deemed to pose a risk to the investigation or the security of the detention facility are prohibited. In the case of food or clothing, inspections shall be conducted in accordance with the applicable rules to check for the concealment of dangerous objects.)
3. Visits are allowed up to three times per day, for a maximum of 30 minutes per session. Visitation hours are from 09:00 to 21:00 on weekdays, and from 09:00 to 20:00 on Sundays and public holidays. (There are no restrictions on visits by legal counsel.)
4. A detainee may send and receive letters. Except for correspondence with legal counsel, the sending and receiving of letters may be restricted under the Act on Execution of Sentences and Treatment of Inmates.
5. If a detainee wishes to make special contact with family members or relatives, they may submit a request to the detainees' protection officer.
6. A detainee may request medical treatment for any illness that occurs while in the detention facility.
7. A detainee may consume personal meals within the limits of the money kept in custody.
8. A detainee may request to be accompanied by an infant under the age of 18 months.
9. A detainee may, at any time, request assistance from detainees' protection officers or supervisors either verbally or in writing, in case of any inconvenience or difficulty.
10. In the event of a human rights violation, a detainee may request consultation with the human rights protection officer (human rights hearing and inspection director) at police stations or the human rights protection officer at the Korean National Police Agency (Tel: 02-3150-2439), or may file a petition with the National Human Rights Commission of Korea.
11. Confirmed suspects and defendants, etc. who meet certain requirements may be eligible for free legal representation in criminal cases, provided by the Korea Legal Aid Corporation. (For consultation, please call 132 without area code or contact the relevant branch/local office 000-0000)
12. For any other necessary matters, please consult with detainees' protection officers.

Table 4

Relevant Provisions***Act on Execution of Sentences and Treatment of Inmates*****Article 108 (Types of Disciplinary Action)**

The types of disciplinary action shall be as follows:

13. Suspension of doing outdoor exercise for up to 30 days;
14. Forfeiture of rights for up to 30 days.

Article 111 (Disciplinary Committee)

(1) The committee shall be comprised of at least five but not more than seven members. The person on the second rank after the warden shall serve as the chairperson of the committee and members shall be appointed or commissioned by the warden, from among the directors of the competent agencies (in cases of branches, correctional officers of

Grade VII or in higher rank) and outside personnel, who have much knowledge and experience in correction. In such cases, the outside members shall be at least three.

Article 112 (Execution of Disciplinary Action)

(5) A warden shall permit an inmate to do outdoor exercise at least once a week even where the suspension of outdoor exercise under subparagraph 13 of Article 108 is imposed or outdoor exercise is restricted under paragraph (4).

(6) In cases of executing the dispositions provided for in subparagraph 13 or 14 of Article 108, each warden shall have a medical officer check the health of an inmate and also confirm the health status frequently while the disposition is executed.

Enforcement Rules of the Act on Execution of Sentences and Treatment of Inmates

Article 220 (Investigation Period)

(1) Where there is sufficient reason to suspect that the act subject to disciplinary action was caused by a psychiatric condition of the inmate concerned, the warden shall take necessary measures, such as medical treatment or expert counseling, prior to proceeding with the disciplinary procedures.

(2) Where, as a result of the investigation into the act subject to disciplinary action, it is found that the act was caused by a psychiatric condition of the inmate concerned, the warden shall not request the disciplinary committee to impose disciplinary action on the grounds of such act.

Article 230 (Order of Execution of Disciplinary Confinement)

(4) No more than two solitary confinement penalties shall be executed consecutively: Provided, That this shall not apply where the total period of two or more solitary confinement penalties does not exceed 45 days.

Table 5

Status of Medical Personnel

(Unit: Persons)

Year	Category										Remarks (Public Health Doctors)
	Total		Medical Officers (Doctors)		Pharmaceutical Officers (Pharmacists)		Nurses		Medical Technicians*		
			Quota	Actual	Quota	Actual	Quota	Actual	Quota	Actual	
2019	277	243	116	89	16	12	111	110	34	32	71
2020	283	252	117	92	16	13	115	113	35	34	91
2021	301	271	117	90	16	14	133	132	35	35	94
2022	358	293	118	83	16	14	188	161	36	35	93
2023	358	316	118	83	16	14	188	183	36	36	93
2024	351	320	117	94	16	15	182	175	36	36	86

* Medical Technicians: Radiologic technologists, pathologists

Table 6
Status of Medical Treatment for Inmates in Correctional Facilities
 (Unit: Persons, Cases)

<i>Year</i>	<i>Category</i>				<i>Treatment by Outside Doctors</i>
	<i>Average Daily Inmate Population</i>	<i>Number of Treatments within Correctional Facilities</i>	Visiting Treatments	Remote Video Treatments	Referrals to Outside Medical Clinics
2019	54,624	9,182,902	63,057	22,554	39,824
2020	53,873	9,260,367	54,890	24,088	37,101
2021	52,368	7,812,087	50,189	28,501	39,176
2022	51,117	6,861,741	52,171	39,957	41,243
2023	56,577	7,448,490	58,598	49,129	48,349
2024	61,366	8,299,530	56,425	49,868	49,175

※ The number of treatments within correctional facilities includes surgeries, medical treatments, consultations, hemodialysis, and medication provided by medical officers.