

Policy Brief on Liberia's Prison Healthcare System

Weak Medical Healthcare for Liberia's Prisons, a Complicated Challenge to Liberia's Criminal Justice System (CJS)

Introduction:

The Liberian courts inadequate adjudication of cases on the dockets contributes to prison's overcrowdings, which along with other factors contributes to the weak Medical Healthcare for Liberia's Prisons¹. This local evidence-based policy brief is based on 5 years of project intervention by RHRAP with focus on CJS reforms. It provides resourceful and credible information; and essential recommendations to policymakers, likeminded Civil Society Organization (CSOs) and the public for the improvement of prison's healthcare system in Liberia. This document should be seen as an effort in evoking Collaborative Problem-Solving Mechanism that will help various actors to carryout collaborative interventions at various levels. This collaboration may lead to a trickle-down effect on the rule of law and the protection of fundamental human rights in Liberia. It also seeks to contribute to the ruling party (Congress for Democratic Change-CDC)'s policy framework "The Pro-Poor Agenda for Prosperity and Development (PADP) 2018-2023-which aims to build a society where justice, rule of law and human rights prevail".²

Findings and recommendations of this document came out of an extensive work with prisons and police withholdings cells in Gbarnga, Bong County; Voinjama, Lofa County; Sanniquellie, Nimba County; Kakata, Bodinway in Margibi County, and rural Montserrado County. RHRAP implemented these projects and authored this report under its **Justice Sector's Reforms** program with funding from the National Endowment for Democracy (NED), the European Union (EU) and the Liberia Professional Development and Anti-Corruption (LPAC/USAID).

For the past 4 years, RHRAP program activities have been strongly focused on improving the CJS through capacity building of the Police and Corrections Officers³. It assessed the prisons and police withholding sites, facilitated legal representations for prolonged pretrial detainees, enhanced communication links with inmates and their lawyers and families and provided medications for inmates⁴. RHRAP collaborated with partners including likeminded organizations in organizing cohesion building events (County and National Levels Dialogue Forums) at community, county and national levels where discussions were centered on the promotion and protection of fundamental human rights and the rule of law. Findings and recommendations from these meetings were brought up to county level meetings while recommendations from county meetings informed the organizing of national level dialogue meetings that were usually attended by likeminded CSOs, representatives from national and international organizations, police, relevant Government Ministries and Agencies, embassies, etc.⁵. RHRAP's program also enhanced the capacity of Religious, Community and Traditional Leaders on how the CJS works starting from arrest-

¹ RHRAP Report on Courts and Police Withholdings April 2020 under the project "Promoting Justice and Judicial Sectors Accountability" Project Report on Magisterial Courts and Police Withholding Cells monitoring - a USAID funded project through the Liberia Professional Development and Anti-Corruption Program in Liberia LPAC. RHRAP Human Rights Report October 2020 "Findings on the prisons, Courts, and Police Withholdings in Bong, Lofa & Montserrado Counties" support by the National Endowment for Democracy (NED).

² <https://mk0globalnapshvllfq4.kinstacdn.com/wp-content/uploads/2019/01/liberia-national-development-agenda-pro-poor-agenda.pdf>

³ <https://newspublictrust.com/in-margibi-45-police-and-correction-officers-trained-in-sgbv-womens-rights/>

⁴ <http://heritagenewslib.com/index.php/health/item/1655-rhrap-shed-provide-medical-drug-supplies-to-prisons>

⁵ On December 18, 2020, RHRAP organized a national dialogue forum with the Theme: "Identifying Structural Solutions for Prison's Health" which was held in commemoration of the Universal Health Coverage (UHC) Day. This report can be provided through open request to RHRAP.

detention-parole under the Liberia's Criminal Justice System⁶. RHRAP collaborated very closely with the human rights departments and the Bureau of Correction and Rehabilitation (BCR) at Ministry of Justice by attending monthly meetings where monthly reports gathered from prisons, police withholding cells across the country are discussed.

Problem Statement

The Criminal Justice System (CJS) of Liberia is inadequately prepared to provide and deliver good healthcare within the 16 prisons and numerous detention sites (Police withholding Cells) across the country.

Healthcare provision for Liberia's Prisons is fast degenerating into chaotic situation if not already. In recent years, there have been outbreaks of various diseases within the prisons some of which have led to the death of inmates across the various prisons⁷. *"Conditions of prisons across Liberia have reached life-threatening stage due to food shortages, gross overcrowding, inadequate sanitary environment, and inadequate medical care"* according to the 2019 United States Human Rights Report on Liberia. Despite the outbreaks of various diseases leading to the death of several inmates before this report was published, there has not been adequate and well-informed findings on the medical situation of prisons including various kinds of diseases affecting inmates. With RHRAP engagements with the Bureau of Correction and Rehabilitation (BCR), who heads prisons affairs in Liberia at the Ministry of Justice (MOJ), we have not seen a policy on prison's healthcare systems. With the lack of clear and functional policy on prison healthcare system in Liberia, there is an urgent need to develop a unique healthcare policy for prison's operations as a first step in the promotion of healthcare for Liberia's prisons. Although over the years, RHRAP has been told by some employees of both the Health Ministry and the Ministry of Justice that there exist a Memorandum of Understanding (MOU) between the Ministry of Justice and the Ministry of Health to provide healthcare to inmates, such document has not been seen or made available. It cannot be argued that the low capacities of Liberia's prisons structures to accommodate the huge influx of inmates is causing overcrowdings which leads to poor hygienic conditions and outbreaks of various diseases. *"Living conditions in prisons are damaging to the physical and mental well-being of inmates and in many cases constituting to poor health. Toilets are blocked and overflowing or simply nonexistent, with no running water facility. As a result, diseases are widespread. Sanitation, lack of sufficient food and medicines fall short of UN standards for the treatment of prisoners. Prisons are in bad shape and the facilities are operating below the minimum standards required for prisons and prisoner's management. The structures are not up to date and the sanitary conditions are appalling"*.⁸

Lengthy prison monitoring over the years informed us that overcrowding is also a contributing factor to the wide spread of infectious diseases in Liberia's prisons. Based on the years of RHRAP engagements working with various prisons, the following are contributing factors to prison overcrowding: Slow adjudication of cases on the court dockets, low capacity of prisons (inadequate prison cells, the lack of Alternative Disputes Resolution (ADR) system, inactive or weak parole system and in some cases, excessive fines imposed by courts which are usually unaffordable by the accused thus landing them in jail. However, reducing prison overcrowdings cannot only be done by legal representation especially with the fast spread of COVID 19. It requires various mechanisms such as the reduction in prison admission.

⁶ With funding supports from the National Endowment for Democracy (NED), the European Union, LPAC/USAID various reports of activities implemented can be obtained upon request.

⁷ <https://frontpageafricaonline.com/front-slider/inside-bong-prison-cells-causes-of-two-inmates-deaths-remain-unknown/>

⁸ <https://inchrliberia.com/index.php/our-reports/report-on-prisons-and-prisoners>

“Reduction in admissions may be the simplest strategy that would show quick results because of the high turnover in jails (Prison Policy Initiative). This can be achieved by using discretionary powers such as:

- Police reducing the number of arrests, particularly for what they determine to be “petty offenses.”
- Prosecutors refusing to prosecute certain offenses and consent to release on one’s own recognizance
- For minor cases, prosecutors can defer prosecution, dismiss charges outright, or instead refer defendants to social services or other alternatives to incarceration or detention.
- Courts can vacate “bench warrants” (warrants for unpaid court fines/fees and for failure to appear for hearings) so that law enforcement can focus on public safety concerns⁹.

Contributing factors to poor prison’s health

Academics and practitioners are conducting various studies aimed at preventing the spread of COVID 19 in prisons. In the case of Liberia, this may be very useful in promoting effective healthcare within the Criminal Justice System (CJS). Liberia needs to comply with not only national but international human rights instruments that have been signed and ratified by the state in promoting and protecting fundamental human rights including the International Convention on Civil and Political Rights signed in 1967 and ratified it in 2004, and the Kampala Declaration on Prison’s Health in Africa¹⁰.

For the past 4 years, there have been series of disease outbreaks that have seriously affected the health of inmates including deaths across the country. At some prisons where clinics are available, health workers can be seen maybe one or two times a week. However, there are no drugs available most of times, and in some cases, according to the Director of Prison affairs at the Ministry of Health, “*Nurses assigned by the Ministry of Health at the prisons are not paid or not on government payroll*” creating complete doubt about the sincerity of national government’s intervention¹¹ on prisoner’s health.

Inadequate food provision meal (dry cooked rice with oil) is provided one time a day with very low nutrition. There are inadequate water supplies especially for bathrooms and pit latrines, and prison overcrowdings all combined are a recipe and key ingredient of spreading diseases that are resulting to the death of inmates. Additionally, cells are very limited and small to accommodate the huge influx of inmates. Current prisons’ structures/buildings cannot accommodate the influx of inmates; and in some cases, for example, at the Voinjama Central Prison, the prison was built to accommodate 45 inmates but sometimes accommodate hundred plus. The Monrovia Central Prison (MCP) was built to accommodate 374 inmates but now accommodate 1,234 inmates as of December 15, 2020. In almost all of the prisons in Liberia, less than 10% used very old mattresses to sleep on, while others sleep on mats, cartons, and on the floor without bedsheets; all of which contribute to poor health conditions at the prisons.

The slow adjudication of cases on the court’s dockets in Liberia without tangible solution from national government poses serious deficits to the adequate implementation of the rule of law and the protection of fundamental human rights. Pretrial detentions in Liberia’s Prisons are increasing on a daily basis across the country which infringed on the rights of community residents; and is in contravention of Article 21 F

⁹ Five ways the Criminal Justice System could slow down COVID 19 pandemic: <https://www.prisonpolicy.org/health.html>

¹⁰ *The International Convention on Civil and Political (ICCPR) was adopted and opened for signature, ratification and accession by the General Assembly resolution 2200A (XXI) of 16 December 1966 entry into force 23 March 1976, in accordance with Article 49; The Kampala Declaration on Health in Prisons in Africa was adopted by the participants including Liberia at the Kampala Workshop on Prison Health, held in Kampala, Uganda, on 12-13 December 1999.*

¹¹ Due to the lack of medication for inmates during some of the heavily outbreak of diseases within the Kakata, Gbarnga, Voinjama, Nimba Prisons, RHRAP & SHED provided medication to these prisons. <https://analystliberiaonline.com/2020/06/08/rhrap-shed-provide-medical-drug-supplies-to-prisons/>

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of the 1986 Constitution of Liberia¹². As of December 15, 2020, there were 2,572 inmates within the 16 prisons in Liberia with 1,732 being pretrial detainees constituting 67% of the total prison population. This is in pure contravention to achieving “The Pro-Poor Agenda for Prosperity and Development (PADP) 2018-2023 which aim to building a society where justice, rule of law and human rights prevail.”¹³

Prison overcrowdings largely contributes to poor prison's health. The slow adjudication of cases, increased imprisonment of inmates with limited use of Alternative Dispute Resolution (ADR) mechanism and probation services contributes to poor prisoners' health conditions. Others include inadequate Public Defenders within the Counties, couple with low or no logistics to get magistrates to carryout speedy hearings in line with the law. There is also the lack of political will from the government to establish fast track courts hearings that could speedily adjudicate cases across the country. However, there are few Civil Society Organizations (CSOs)¹⁴ that are engaged in providing legal representations for prolonged pretrial detainees but are being overwhelmed.

Recommendations:

From the findings in this policy brief, prison health care is a complex issue because of the so many contributing factors that are associated with it. RHRAP believes that the maintenance of prisons with good healthcare to be effective, it must be an inter-agency collaboration. Based on lessons learned by RHRAP over the years working in prisons and the courts, RHRAP believes if Liberia should have a good and reliable healthcare within its prison systems, stakeholders need to address the below key recommendations.

- Speedy hearing of cases by the courts; and ensure the use of probation and parole services to reduce prison overcrowdings.
- That the Supreme Court mandate or ensure the introduction of Fast Track Court Hearings at all prison facilities
- Deployment of more Public Defenders in the counties by the Judiciary
- Construction and renovation of prison facilities as well as the provision of rehabilitation services for inmates across the country with emphasis placed on the Monrovia Central Prison (MCP) that is in a very deplorable condition.
- Government abolishes the use of prisons for pretrial detention; and construct pretrial detention sites across the country under the police supervision.
- That government restore environmentally and human friendly police withholdings cells across the country and strictly adhere to the rule of law and fundamental human rights including the 48 hours statutory period for police interrogation. This will include the construction, renovation and improve sanitation of police withholding cells across the country.
- Prison health officers should be trained, empowered and pay on time.

We also recommend a Roundtable Conference on prison health for Liberia bringing together inter-agencies including policymakers, Civil Society Organizations (CSOs), national and international organizations with the aim of achieving the following objectives. Build on our recommendations by assessing prison conditions in the penal system, identify needs and priorities, propose a long-term action penal reform, encourage openness and transparency in the Criminal Justice System (CJS) involving Civil Society Organizations (CSOs), decisionmakers and donors' agencies in the Criminal Justice process. This

¹² Every person arrested or detained shall be formally charged and presented before a court of competent jurisdiction within forty-eight hours. Shall the court determine the existence of a prima facie case against the accused, it shall issue a formal writ of arrested setting out the charge or charges and shall provide for a speedy trial. There shall be no preventive detention.

¹³ <https://mk0globalnapshvllfq4.kinstacdn.com/wp-content/uploads/2019/01/liberia-national-development-agenda-pro-poor-agenda.pdf>

¹⁴ Serving Humanity, Education and Empowerment (SHED), Rural Human Rights Activists Programme (RHRAP), Prison Fellowship Liberia (FPL)

will enable relevant stakeholders in the sector to learn from the examples of other countries as well as learn from each other's expertise. It will also serve as a strategy for addressing some of the challenges faced by the prison systems, enable national government to open up to the public, and building partnership with each other. The conference will specifically initiate the development of a National Prison Health Policy, Legalization of Alternative Dispute Resolution (ADR) in the court's system; legislate an act making the Bureau of Correction and Rehabilitation (BCR) an autonomous status.

As a member of the Economic Community of West African States (ECOWAS), African Union (AU) and the United Nations (UN), Liberia must always strive to implement international human rights instruments on detention sites and prison's conditions most of which are inline with its statutory laws of Liberia.

RHRAP Brief Introduction

The Rural Human Rights Activists Programme (RHRAP), Inc. is a human rights and peace organization that was established in December 1997 by a group of activists who believed that the message of human rights should be spread into the rural areas so as to educate the rural inhabitants on issues of human rights, peace and social developments. It is a non-profitable, non-governmental and non-political organization. RHRAP has over two decades of experience working as a Civil Society Organization on accountability projects including human rights, rule of law and democracy in Liberia.

Note: Electronic copy can be provided upon request using the below contact emails.

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