**Alternative report on the sixth periodic report of the Republic of Latvia on the fulfilment of the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment of 1984 of the United Nations for the period from 1 January 2014 to 31 December 2016**

The Ombudsman of the Republic of Latvia (hereinafter referred to as the Ombudsman) provides an alternative report on the sixth periodic report submitted by the Republic of Latvia for the period of time from 1 January 2014 to 31 December 2016.

The alternative report also contains references to the findings of the Ombudsman’s Office as a national human rights institution in 2017, 2018 and 2019, because the Ombudsman believes that findings of a later period of time were topical at the time of examination of the report. Moreover, none of responsible state authorities denied that these identified problems had existed for a long time.

**Summary of the alternative report**

**Legal protection:**

1. The defenders designated by the state have not guaranteed the right of persons, including persons with disabilities, to real and effective defence. (paragraph [1])
2. Persons in regions have limited choice of legal aid providers. (paragraph [1])

**Pretrial detention:**

The Law on the Procedures for Holding the Detained Persons does not specify the duration of holding of detainees and sentenced persons in short-term detention facilities of the State Police for the performance of procedural activities. (paragraph [2])

**National human rights institution:**

It is necessary to strengthen the guarantees of the Ombudsman’s entity as an autonomous constitutional entity in the Constitution of the Republic of Latvia. (paragraph [3])

**Domestic violence:**

Crisis centres do not provide medical services, because they are not medical care facilities. In order to provide meaningful assistance to children, it is necessary to review the content of social rehabilitation providing that children get psychosocial rehabilitation taking into account the needs of each child. The justification for the provision of each programme (up to 30 days and up to 60 days) should be assessed when assessing the needs of the child rather than the initiation of criminal proceedings on the existence of criminal offences towards the child. (paragraph [4])

**Prevention of violence in educational establishments**:

Practice shows that social behavioural correction programmes are not properly developed in all municipalities or are not developed at all. The lack of preventive work initiated in a timely manner leads to more serious cases of violence. Educational establishments also do not contact the local government in a timely manner to get assistance in case of child’s antisocial behaviour, where school resources have not proved sufficient and have proved fruitless. (paragraph [5])

**Trafficking in human beings:**

The models of interinstitutional cooperation within the local government need to be improved.(paragraph [6])

**Non-citizens:**

The legal framework needs to be improved in order to automatically grant Latvian citizenship to every child born (unless the child’s parents refuse it). (paragraph [7])

**Conditions of detention:**

1. The Latvian prison infrastructure is outdated, and the introduction of human rights standards there is impossible in essence and/or would require investment of disproportionately large financial resources. (paragraph [8])
2. Multiple visits to prisons have shown that prisoners with reduced mobility do not have adequate detention conditions. (paragraph [9])
3. The legislator had expressed the unambiguous political wish to restrict the right to release prior to completion of punishment for adult sex criminals for committing a particularly serious crime committed against a person who had not attained the age of sixteen, including to restrict the right to release prior to completion of punishment for these sex criminals who are sentenced to life imprisonment. (paragraph [10])
4. The specifics of execution of life sentences that existed so far has been focusing on excessive security measures, isolation, while the gradual preparation of these categories of prisoners for life in society is particularly important, enabling this group of convicts to serve their sentence not only in closed prisons but also in partly-closed and open prison regimes. (paragraph [11])
5. Short-term detention facilities do not ensure accessibility for persons with disabilities. (paragraph [12])

**Inter-prisoner violence:**

The issue of self-governance or hierarchy of prisoners in their mutual relations remains topical and unresolved in Latvian prisons. (paragraph [13])

**Persons with disabilities:**

1. In psychiatric hospitals, the patient’s consent should be sought for both hospitalisation and medical treatment and should also be reflected in the patient’s medical records. (paragraph [14])
2. In practice, it has been established that psychiatric hospitals do not adequately record of cases of chemical restraint. (paragraph [15])
3. Children living in childcare facilities are hospitalised at psychiatric hospitals dozens of times more frequently than children living in family or out-of-family care with family environment. (paragraph [16])
4. In 2018, a number of violations of the rights of children were detected in psychiatric hospitals. (paragraph [17])

**III. ARTICLE 2 OF THE CONVENTION**

**Legal protection – reply to question 2 of the Committee**

[1] In view of the fact that ensuring the right to fair trial also includes the right of a person to a qualitative and effective defence, the Ombudsman has, in some cases, established that **the defenders designated by the state have not guaranteed the right of persons, including persons with disabilities, to real and effective defence.** The Ombudsman has informed the Latvian Council of Sworn Advocates, as well as has provided information to the Latvian representative in international human rights institutions, because the person filed a complaint against the state also to the European Court of Human Rights and the complaint was accepted for consideration.

The Ombudsman has also focused on the problem of **accessibility of lawyers in regions, highlighting the limited opportunities of persons to choose legal aid providers**.

**Pretrial detention – reply to question 4 of the Committee**

[2]**Paragraph 28 of the sixth period report of the Republic of Latvia:** **The Law on the Procedures for Holding the Detained Persons does not specify the duration of holding of detainees and sentenced persons in short-term detention facilities of the State Police (hereinafter referred to as short-term detention facilities) for the performance of procedural activities.**

The current version of Section 1(2) of the Law on the Procedures for Holding the Detained Persons provides that the period of seven days is applicable only to those persons who have been detained after being put on the wanted list or sentenced, i.e. the time limit for their transfer to an investigating prison or detention facility. However, the regulatory framework does not specify how long detainees and convicts can be held in short-term detention facilities for the performance of procedural activities.

In 2016, the Ombudsman submitted a proposal to the Saeima asking to supplement Section 1(2) of the Law on the Procedures for Holding the Detained Persons with a condition that the length of the stay of detainees and convicts, who have been placed in short-term detention facilities for the time necessary for the performance of procedural activities, as well as the duration of the stay of foreigners detained in short-term detention facilities in accordance with the procedures specified by the Immigration Law, cannot be longer than seven working days. The proposal was not supported by a majority of Saeima votes.

The proposal was basically created due to the situation that convicted and arrested persons are often staying in short-term detention facilities for the purposes of procedural actions for a month or even longer, where they are subject to the rules of the internal arrangements of the short-term detention facility. The problem is still pressing and was confirmed by the employees of the Ombudsman’s Office in 2019 when they visited short-time detention facilities where, in individual cases, the arrested person was found to be staying in a short-term detention facility for more than two weeks for the purposes of procedural actions.

**National human rights institution – reply to question 7 of the Committee**

[3]**Paragraph 50 of the sixth period report of the Republic of Latvia: It is necessary to strengthen the guarantees of the Ombudsman’s entity as an autonomous constitutional entity in the Constitution of the Republic of Latvia.**

In order to strengthen the guarantee of the Ombudsman as an autonomous constitutional entity, in May 2015 the Ombudsman urged the Saeima to consider a proposal to supplement the Constitution of the Republic of Latvia with a new chapter named “Ombudsman”.

Strengthening the Ombudsman’s entity in the Constitution of the Republic of Latvia would:

1. protect against undesirable political manipulation;
2. promote the compliance of the national human rights authority with the so-called Paris Principles;
3. strengthen the principle of power-sharing enshrined in the Constitution of the Republic of Latvia;
4. exclude any doubts that the Ombudsman belongs to any state powers.

The Chairman of the Saeima Legal Affairs Committee transferred the submitted proposal for evaluation to the working group “for possible extension of the powers of the State President and evaluation of the presidential election procedures”. On 12 May 2015, having listened to the experts’ opinions, the working group concluded that nobody was categorically “against” the inclusion of the Ombudsman’s entity in the Constitution of the Republic of Latvia, majority of the participants present agreed to this addition, and discussions were related to details only. The proposal has not progressed any further yet.

**Domestic violence – reply to question 8 of the Committee**

[4]**Paragraphs 67 and 68 of the sixth period report of the Republic of Latvia:**

(Criminal offence, exploitation, sexual exploitation or any other illegal, cruel or degrading treatment) social rehabilitation must be provided to child victims mandatory. The provision of the service is organised by the Latvia Children’s Fund, which has been working since 2000 to create a unified rehabilitation system for the rehabilitation of children who have suffered from violence in Riga and regions. Established centres provide children and their families who have suffered from violence with timely and high-quality rehabilitation and medical services, providing support and practical assistance. In addition, workshops, lectures, trainings and other informative educational activities on violence issues are organised for professionals and society as a whole.

The Latvia Children’s Fund provides the social rehabilitation service in the institution in seven crisis centres in all planning regions. However, their arrangement in the territory of the state is uneven, the service is not available in Riga. The state-funded social rehabilitation service in the institutions is not complete, because rehabilitation is not provided in accordance with individual needs of each child. Rehabilitation does not always use science-based and evidence-based methods. The centres lack specialists, for example, psychologists are available 1-2 times a week.  **The centres do not provide medical services, because they are not medical care institutions. In order to provide meaningful assistance to children, it is necessary to review the content of social rehabilitation providing that children get psychosocial rehabilitation taking into account the needs of each child. The justification for the provision of each programme (up to 30 days and up to 60 days) should be assessed when assessing the needs of the child rather than the initiation of criminal proceedings on the existence of criminal offences towards the child.**

[5]**Prevention of violence in educational establishments**: One of the fundamental principles of the rights of the child, which is the foundation for the rest of the rights of the child, is the right of the child to development[[1]](#footnote-1). The right of the child to development is threatened both when the child suffers from violence and when the child behaves violently, and therefore the eradication of violence is an important issue in ensuring the rights of the child. In accordance with international and national legal framework, a child has the right to be protected from all forms of violence irrespective of where the child is: at school, at home, in a social care institution or elsewhere. In order to enforce these rights, a law enforcement mechanism has been developed in the country, where each stakeholder involved: the local government, the school, the parents and the child himself/herself has statutory duties and responsibility for failing to comply with them.

Special regulation regarding safe environment in educational establishments is specified in the regulatory enactments regulating the field of education. Educational establishments have specific responsibilities in matters of safety of students and responsibility for their failure to fulfil them. Although the regulatory framework for preventing violence in school is sufficient, it is not sufficiently used to prevent cases of violence in a timely manner.

The Ombudsman has concluded that violence in schools is also largely linked to the attitudes of local governments towards the fulfilment of their function – prevention work with children. **Practice shows that social behavioural correction programmes are not properly developed in all municipalities or are not developed at all. The lack of preventive work initiated in a timely manner leads to more serious cases of violence. Educational establishments also do not contact the local government in a timely manner to get assistance in case of child’s antisocial behaviour, where school resources have not proved sufficient and have proved fruitless.**

The correction of behaviour of a child is a statutory duty of a local government (not an educational establishment) – the local government has a duty to include every child in the risk group on the preventive register of the local government and to develop a programme corresponding to his or her needs. The programme developed by the local government may, depending on the circumstances of the case, foresee or exclude the involvement of the police, since the development of the programme and therefore the selection of the cooperation partners falls within the competence of the local government. It is concluded from international recommendations that community-based preventive work should be used and that young people should be prevented from being exposed to the law enforcement system as much as possible.

The child’s antisocial behaviour evidences of an earlier violation of his or her right to full development, and it is also considered in the context of responsibility of the adults responsible for raising the child (parents and teachers).

In 2014, increased attention was devoted to informing children and persons involved in ensuring the rights of a child (social pedagogues, teachers, parents) about children’s rights to be safe in an educational establishment: seminars were organised and two “School without Violence” booklets were published in cooperation with the Estonian Chancellor of Justice – recommendations for pupils and parents and recommendations for teachers. They contain information on how to recognise mobbing, recommendations on how to deal with violence when a child has been hurt, witnessed violence or hurt someone himself/herself, and information on the legal framework. The electronic version of the booklet is available on the website of the Ombudsman’s Office.[[2]](#footnote-2)

**Trafficking in human beings – reply to question 9 of the Committee**

[6]**Paragraph 105 of the sixth period report of the Republic of Latvia: The models of interinstitutional cooperation within the local government need to be improved.**

The data of the study “The Role of Local Governments’ Social Services, Orphan’s and Custody Courts and Branch Offices of the State Employment Agency of Latvia in the Process of Identification of Victims of Trafficking in Human Beings” that was conducted by the Ombudsman, certify that:

* Not all institutions are equally successful in recognising the institutions included in the system supporting the victims of trafficking in human beings, and the low awareness of non-governmental organisations among staff of local government services is alarming. When summarising the answers to the survey, it can be concluded that a large number of institutions see their role only as a transferor of information to the police for investigating a criminal offence. When they perceive their role in this way, the aspect of social assistance is forgotten, which, according to the competence of the interviewed institutions, would have the most pressing role. This circumstance, together with the information provided on the institutional behaviour models, confirms that not all institutions understand the system of allocation of the social rehabilitation service to victims of trafficking in human beings in Latvia.
* The training of institutions is considered to be fragmented and is provided only within individual projects and initiatives. On the other hand, attendance of existing trainings depends on their geographic availability, the financial capacity of the institution, the availability of information on the training and the awareness of heads of the institutions of the pressing nature of subject. Besides, the majority of training courses are attended only by one employee of the authority, often - the head of the institution. Therefore, there are doubts as to what impact such trainings available to individual employees have on the general level of knowledge of the employees of the institution, in particular, considering that only rarely such trainings put an emphasis on further distribution of information within the local government.

**Non-citizens – reply to question 10 of the Committee**

[7]**Paragraph 107 of the sixth period report of the Republic of Latvia: The legal framework needs to be improved in order to automatically grant Latvian citizenship to every child born (unless the child’s parents refuse it).**

At the moment, the granting of citizenship to children of non-citizens in Latvia cannot be considered automatic, because the will of one parent has to be taken into account. Therefore, the Ombudsman supports the improvement of the legal framework in order to automatically grant Latvian citizenship to every child born (unless the child’s parents refuse it). The Ombudsman has already made such a suggestion when commenting on the recommendations made in the UN Universal Periodic Review to Latvia (within the second cycle of the UN Universal Periodic Review).

At the end of 2017, the Ombudsman sent a letter to the Chairman of the Saeima and the Prime Minister, pointing out to the topic of naturalisation. In his letter, the Ombudsman expressed his support for the State President’s initiative on automatic granting of Latvian citizenship to children of non-citizens. The Ombudsman pointed out that naturalisation needed to be continued, and this should be done at a much faster pace. Work with young people – people born after restoration of the independence is necessary motivating them to get Latvian citizenship. This would be a job for schools to talk to the young people and their parents. Schools, teachers and society in general play a huge role in promoting the patriotic feelings of young people. The country should make the most of its efforts by motivating young people to get Latvian citizenship.

**VII. ARTICLES 11 – 13 OF THE CONVENTION**

**Conditions of detention – reply to question 14 of the Committee**

[8]**Paragraph 136 of the sixth period report of the Republic of Latvia: The Latvian prison infrastructure is outdated, and the introduction of human rights standards there is impossible in essence and/or would require investment of disproportionately large financial resources.** For example, it is almost impossible to eradicate the hierarchy of prisoners in prisons (which also results in violence between prisoners) in the old prison infrastructure (for example, because of high capacity cell rooms).

In new prison infrastructure it would not only be much easier to reduce prison violence in detention facilities, to improve working conditions for prison staff (as well as to improve the prestige of prison staff), but also the Prison Administration could effectively improve its work with prisoners in order to reduce the risk of repeated offences after discharge in the interests of public safety.

But unfortunately, the construction of a new prison has been postponed for several years, and now, in 2019, the issue is still postponed.

[9]**Paragraph 141 of the sixth period report of the Republic of Latvia:** **Multiple visits to prisons have shown that prisoners with reduced mobility do not have adequate detention conditions.** Namely, everyday responsibility for the person with reduced mobility has been laid upon other prisoners, also those who are ill themselves. It was also found that prison rooms mostly have not reasonable accommodations. Rooms are not technically adapted, and their architectonic obstacles make it hard for the persons in wheelchairs to move. Thus, due to placement of exercise yards and cells, the persons in wheelchairs are not able to go out for a walk on their own, they have to rely on help of other inmates. In all cases with regard to the conditions provided to a person with reduced mobility, the Ombudsman found that the person faced such difficulties, possibly suffering, which is not inherent in the detention environment and which can be prevented without imposing a disproportionate burden on the institution. In each individual case, the Ombudsman informed the Prison Administration, the management of the specific prison of the problems identified. Moreover, in 2015, the Ombudsman urged the Minister of Justice to see to adapting the environment of Latvian detention facilities to persons with disabilities.

Paragraph 141 of the Report provides that the Riga Central Prison has cells built specifically for persons with functional impairment. In 2019, representatives of the Ombudsman’s Office visited one of the cells in the Riga Central Prison and found that it was not fully equipped to meet the actual needs of people with functional impairment. The cell in question is located in the basement and has stairs leading to it. There is no ramp or hoist connected to the structure of the stairs. A mobile hoist is available, but it was concluded during the visit that it was not uses. This issue is currently being addressed with assistance of other persons: people take the wheelchair up and down the stairs. This makes it impossible for the prisoners to come out of this cell on their own to get to the exercise yard or other areas. Nor is the cell equipment entirely thought out. There is a rather large toilet room, but as the doors to this room open inwards, it is difficult to access the toilet bowl when entering the room on a wheelchair.

[10]**Paragraph 143 of the sixth period report of the Republic of Latvia:** **The legislator had expressed the unambiguous political wish to restrict the right to release prior to completion of punishment for adult sex criminals for committing a particularly serious crime committed against a person who had not attained the age of sixteen, including to restrict the right to release prior to completion of punishment for these sex criminals who are sentenced to life imprisonment.**

On 14 June 2014, amendments to Section 61 of the Criminal Law entered into force, supplementing it with Paragraph 6, which provides that release prior to completion of punishment does not apply if the person had been sentenced to an adult for a particularly serious crime committed against a person who had not reached the age of sixteen and is related to sexual violence.

From the point of view of human rights, life imprisonment without any possibility for the person to return to society is considered to be a violation of the prohibition of inhuman behaviour. Similarly, life imprisonment without any possibility for the punished person to return to society does not facilitate the attainment of goals of the punishment determined by the Criminal Law. Therefore, in 2016, the Ombudsman applied to the Ministry of Justice, indicating the need for discussing the improvement of norms of the Criminal Law with regard to persons sentenced to life imprisonment for sexual violence against minors. Section 61(6) of the Criminal Law still provides that release prior to completion of punishment does not apply if it had been sentenced to an adult for a particularly serious crime committed against a person who had not reached the age of sixteen and is related to sexual violence.

[11]**Paragraph 146 of the sixth period report of the Republic of Latvia: The specifics of execution of life sentences that existed so far has been focusing on excessive security measures, isolation, while the gradual preparation of these categories of prisoners for life in society is particularly important, enabling this group of convicts to serve their sentence not only in closed prisons but also in partly-closed and open prison regimes.**

In 2015, an opinion has been delivered on the change in the regime of serving life sentence and advancements to the progressive execution of the sentence, which was also sent to the Minister of Justice and the Chief of the Prison Administration. It was stated in this opinion that the persons sentenced to life within the scope of progressive execution of the sentence may move up the stages only within a closed prison. The Ombudsman concluded that even though the person has been sentenced with the deprivation of liberty – life imprisonment, yet the regulatory framework provides this category of prisoners with an opportunity similarly to any person sentenced with deprivation of liberty – having serves the period of punishment stipulated by the law to be released prior to completion of punishment or to be pardoned.

[12]**Paragraphs 147 and 148 of the sixth period report of the Republic of Latvia: Short-term detention facilities do not ensure accessibility for persons with disabilities.**

In 2016, temporary holding rooms of the State Police were visited at Riga Kurzeme and Sigulda police stations, as well as short-term detention facilities in Cesis, Rezekne, Jelgava and Saldus police stations, which had been repaired within the scope of the Norwegian financial instrument project “Improving the standards of short-term detention places of the State Police” (hereinafter referred to as the Norwegian project). During the visit, it was found that the premises in Sigulda and Cesis were not adapted to people with reduced mobility.

During the visits to short-term detention places and temporary holding facilities, including those in which had been repaired within the framework of the Norwegian project, in 2019 a number of shortcomings were still identified in providing household conditions for detainees, in particular as regards ensuring environmental availability to persons with disabilities.

**Inter-prisoner violence – reply to question 15 of the Committee**

[13]**The issue of self-governance or hierarchy of prisoners in their mutual relations remains topical and unresolved in Latvian prisons.**

Year on year the Ombudsman’s Office keeps receiving applications about inter-prisoner violence (both physical and emotional). The hierarchy among prisoners is unmistakably a factor contributing to violence among prisoners. The Ombudsman has repeatedly pointed out to responsible institutions to the highly hierarchical system among prisoners and the violence resulting from it. At the same time, stressing that in the cases when there is a suspicion of violence the state is obliged to carry out an investigation, which is sufficiently effective and aimed at learning the truth and punishing of the perpetrators.

During the last half of 2019, the employees of the Ombudsman’s Office concluded from their visits to detention places, talks to prisoners, as well as staff, and the information received in applications, that the hierarchical system among prisoners still existed and that prison staff was also aware of its existence. Although the prisoners, who could become or are subjects of violence are being isolated as much as possible, this is not always effective and not always possible for a variety of objective reasons, such as insufficient staff (e.g., the Riga Central Prison), outdated infrastructure. Large-capacity prison cells with high numbers of prisoners, large washing rooms, etc. should be noted as a factor contributing to violence. New infrastructure and effective monitoring are key factors in fighting inter-prisoner violence. However, it should be noted the attitude of prison staff can bring significant results and create a microclimate compatible with human rights and the principle of good governance in prison.

Foreigners who do not speak the official language and are therefore more exposed to the risk of torture and inhuman treatment, including informal procedures among prisoners, should be particularly protected in this regard. In 2014, the Ombudsman’s Office received information that a foreign citizen was in custody in the Riga Central Prison and was constantly physically intimidated by other prisoners. During the visit, the employees of the Ombudsman’s Office concluded that the detained foreigner had a limited opportunity to complain to prison staff about the violence of his cellmates, since most of the staff did not speak English. The prison staff asked his cellmates to translate what he had said, if necessary. On the other hand, the conversation with the doctor’s assistant revealed that during a medical round, conversations were translated by cellmates, if it was necessary to communicate with that prisoner. The Prison Administration was informed of this situation. Places of detention (Riga Central Prison) still have a practice with regard to foreigners, to place a person speaking English in one cell with the foreigner, who can help the foreigner to communicate with prison staff. Such practices should not be supported and does not provide prison staff with objective, direct and immediate information.

**X. ARTICLE 16 OF THE CONVENTION**

**Persons with disabilities – reply to question 18 of the Committee**

[14]**In psychiatric hospitals, the patient’s consent should be sought for both hospitalisation and medical treatment and should also be reflected in the patient’s medical records.**

In practice, psychiatric hospitals still fail to follow the recommendation of the Council of Europe’s Committee for the Prevention of Torture, which provides that informed consent of the patient should be requested for both hospitalisation and intended treatment. Each patient, whether it is voluntary or not, should be informed about the individual treatment plan, the patient should also be involved in the development and implementation of his or her treatment plan.

[15]**In practice, it has been established that psychiatric medical treatment facilities do not adequately record of cases of chemical restraint of patients (medicines are administered as a means of restraint against the patient’s will).**

Section 69.1(6) of the Medical Treatment Law provides that in cases, when there are direct threats that a patient due to psychic disorders may commit injuries to himself or herself or other persons or a patient demonstrates violence towards other persons and attempts to discontinue threat by verbal convincing have failed, the following means of restraint may be used in psychiatric hospitals:

1. physical restraint by using physical force for restraint of movements of the patient;
2. mechanical restraint by using restraining cords or belts;
3. injection of medicines to a patient against his or her will;
4. placement in a monitoring ward.

When visiting psychiatric treatment establishments in 2017 and 2018, and also in 2019, it has been stated that only mechanical restraint of patients is recorded in logs on mechanical restraint of patients. Unfortunately, logs on other types of restraint do not reflect other means of restraint. It should be noted that random study of medical records of patients revealed entries about isolations of patients, injections made to patients for sedation purposes that have not been recorded in the logs.

[16] In order to become aware of the actual situation with ensuring the rights of children in childcare facilities, in 2014, the employees of the Ombudsman’s Office visited childcare facilities of the Latvian local governments. The purpose of the monitoring was to become aware of the actual situation in local government childcare facilities. During the visits, increased attention was paid to the causes of the placement of children in psychiatric hospitals.

The Ombudsman received information that children living in childcare facilities were placed in psychiatric hospitals for bad behaviour. Therefore, in order to investigate this situation and this trend in general, the Ombudsman requested information from all hospitals on the total number of children hospitalised in the past two years, as well as on the number of children from childcare facilities.

If we summarise the information provided by hospitals, 1451 children were placed in psychiatric hospitals in 2013, of which 389 children were from childcare facilities. Meanwhile, in the 10 months of 2014, 1157 children were hospitalised, of which 310 children were from childcare facilities.

It can be concluded that **children living in childcare facilities are hospitalised at psychiatric hospitals dozens of times more frequently than children living in family or out-of-family care with family environment.**

In 2015, the Ombudsman drafted recommendations on issues requiring attention of Orphan’s Courts when carrying out inspections of life of children in childcare facilities, such as education, healthcare of children, their access to parents, the possibility of changing the type of out-of-family care, etc.

[17]**In 2018, a number of violations of the rights of children were detected in psychiatric hospitals.**

Hospitalisation circumstances:

1. Children are often hospitalised from other institutions (children’s homes, boarding schools) due to conflicts between the child and the staff, when the child’s behaviour becomes uncontrollable.
2. Psychiatric hospitals often justify hospitalisation with social indications (in order to prepare an opinion to be submitted to the State Medical Commission for the Assessment of Health Condition and Working Ability; also, since limited outpatient services are available in Latvia to teenagers with different types of addictions, children with addictions are placed in psychiatric treatment institutions, in which are not intended for provision of addiction-related assistance).
3. Children with behavioural disorders are hospitalised (justifying with child’s vagrancy, stealing, violence against peers, etc.).
4. Several psychiatric hospitals did not prepare consents of children who have reached the age of 14 years to hospital treatment.
5. Some psychiatric hospitals also lacked consents of legal representatives of children to hospitalisation, or they were prepared not in accordance with the requirements of the law.

Prescribed medications:

1. It was stated in some psychiatric hospitals that children were treated with obsolete medicines not suitable for children (including haloperidol, which is also not advisable to adult psychiatric patients[[3]](#footnote-3)), children were also subjected to severe polypharmacy and inadequate dosage and frequency of administration of medicines.
2. Some psychiatric hospitals did not assess the potential side effects that may occur to children when they are prescribed high doses of strong prescription medicines. Nor did they assess the interaction of several medicines and their effects on child’s health.
3. In the psychiatric hospitals with the greatest non-compliance of the medicines prescribed to children, the children were not treated by a child psychiatrist, or the child psychiatrist was very rarely present in the facility.

Living conditions:

1. In three (out of six) psychiatric hospitals, minor teenagers were placed in hospitals together with adults.
2. In five of the six psychiatric hospitals, children had no or have limited possibility to stay in the hospital with their parents. This option was also not provided for pre-school age children.
3. Some psychiatric hospitals did not provide sufficient outdoor walks.

Mechanical restraint and injection of medicines to a patient against his or her will:

1. In almost all psychiatric hospitals, the administration of medicines against the will of the patient was not properly registered, as required by law.
2. Without “Ainaži” Psychiatric Hospital for Children, where a disproportionately high number of mechanical restraint cases (nearly 300 times in 2017) were detected and which violated regulations with regard to the duration, frequency, justification of and informing legal representatives about restraint, no serious violations were identified in other psychiatric hospitals (average number of restraints in other facilities has been 0-5 cases of restraining a year).

Availability of non-medical treatment: Some psychiatric hospitals did not offer psychosocial rehabilitation and other non-medical treatment. In the facilities with limited rehabilitation services, medicines were prescribed to children as a treatment method more frequently.

Right of the child to privacy and contacts with the family:

1. Children from the “Ainaži” Psychiatric Hospital for Children were not allowed to keep any personal belongings. No such absolute restriction was stated in other psychiatric hospitals, but in some facilities children were not given the opportunity to use their personal clothes (hospital clothes were issued to them).
2. In some psychiatric hospitals, children had limited access to their relatives – their relatives could call them, but they were not given the opportunity to contact their relatives themselves.
3. In some psychiatric hospitals, it was stated that children did not have a separate room in which they could meet their relatives without disturbances (meetings take place at the staircase).

Informing children about the course of medical treatment and learning their opinion on the treatment process:

1. One important systemic problem reoccurring in several psychiatric hospitals, was the lack of involvement of children, particularly those under 14 years of age, in their treatment process. The children were not informed of the course of their treatment, they were given no information on how long they had to stay in the medical treatment facility.
2. Children also have limited opportunities for expressing their discontent or complaints – no hospital has developed the procedure of filing complaints and proposals for children, as provided for in Section 70(2) of the Law on the Protection of the Rights of the Child.

Possible violence of staff or peers against children: In some psychiatric hospitals, children pointed out to violence of staff or peers while they were staying in the hospital. A number of shortcomings have been found in some medical treatment facilities that increase the potential risks of child violence: the staff did not have name tags, thereby failing to ensure that the child could recognise each employee (including those who may have acted violently or used non-pedagogical methods to correct the behaviour of the child); the procedure of filing complaints was not available to children; some facilities did observe the requirement of the Law on the Protection of the Rights of the Child to regularly request information from the Penal Register on the criminal records of staff; children were placed in wards with older children whose behavioural disorders are often related to aggression towards others.

Two psychiatric hospitals should be particularly noted in this regard:

1. Serious violations of the rights of children have been stated in the “Ainaži” Psychiatric Hospital for Children in almost all areas of children’s rights[[4]](#footnote-4). The findings of the visits indicated of possible criminal offences, so the information obtained during the visit was forwarded to the Prosecutor General of the Republic of Latvia.
2. Serious violations related to the use of medicinal products prescribed for children[[5]](#footnote-5) were also identified at the Piejūras Hospital, and this information was forwarded to the Health Inspectorate and the Ministry of Health. Since 27 June 2019 children have not been admitted to the inpatient department, because the hospital has failed to resolve the availability of a child psychiatrist to inpatient patients for long time.

1. Article 6(2) of the UN Convention on the Rights of the Child: “States Parties shall ensure to the maximum extent possible the survival and development of the child.” Section 7 of the Law on the Protection of the Children’s Rights: “Every child has an inalienable right to the protection of life and development.” [↑](#footnote-ref-1)
2. http://www.tiesibsargs.lv/files/content/Skola\_bez\_vardarbibas\_Skoleniem\_un\_Vecakiem\_2014.pdf

   http://www.tiesibsargs.lv/files/content/Skola\_bez\_vardarbibas\_Skolotajiem\_2014.pdf [↑](#footnote-ref-2)
3. Report to the Latvian Government on the visit to Latvia carried out by CPT from 12 to 22 April 2016, Paragraph 113, pages 42 – 43. Available here: https://rm.coe.int/pdf/168072ce52 [↑](#footnote-ref-3)
4. Right to **the highest attainable standard of health** (Article 24 of the UN Convention on the Rights of the Child), right to **life and development** (Section 7 of the Law on the Protection of the Children’s Rights), right **to the family** (Section 71 of the Law on the Protection of the Children’s Rights), right to **privacy, freedom and security of person** (Section 9 of the Law on the Protection of the Children’s Rights), right **to wholesome living conditions and benevolent social environment**, to **adequate nourishment** (Section 10 of the Law on the Protection of the Children’s Rights), right **to education** (Section 11 of the Law on the Protection of the Children’s Rights), right  **to freely express his or her opinion, and receive understandable information on their health conditions and course of treatment** (Section 13 of the Law on the Protection of the Children’s Rights and Section 13 of the Law On the Rights of Patients), right **to be protected from all types of violence** (Article 19 of the UN Convention on the Rights of the Child). [↑](#footnote-ref-4)
5. Use obsolete medicines not suitable for children and severe polypharmacy and inadequate dosage and frequency of administration of medicines have been stated. [↑](#footnote-ref-5)