

The Netherlands Institute for Human Rights Report

to the Committee against Torture on the Examination of the
8th Periodic Report of the Netherlands

June 2021

Table of contents

1	Introduction	1
1.1	The Institute’s submission	1
1.2	The impact of measures to combat COVID-19 on persons deprived of their liberty 1	
2	Article 2	4
2.1	Domestic and gender-based violence	4
2.1.1	Data	4
2.1.2	Sexual violence against women	4
2.1.3	The need for a coordinated policy to combat violence against women	5
2.1.4	Domestic and gender-based violence in the Caribbean Netherlands	5
2.1.5	Impact of COVID-19 measures on violence against women.....	6
2.2	National Preventive Mechanism.....	7
2.2.1	The compliance of the NPM with international standards.....	7
2.2.2	Limitation of NMP mandate to the European part of the Kingdom.....	8
3	Article 11	9
3.1	Mental health care.....	9
3.1.1	The Compulsory Mental Health Care Act and the Care and Compulsion Act....	9
3.1.2	Ambulatory application of restraint measures	10
3.2	Children in closed youth care facilities.....	11
3.2.1	Placement in closed youth care facilities.....	11
3.2.2	The use of restraint measures in closed youth care facilities	12
3.3	Border detention of migrants	12
3.4	Repatriation and Detention of Aliens Act	13
3.5	Solitary confinement in migrant detention	14
3.5.1	Solitary confinement as a collective security measures	14
3.5.2	Solitary confinement of migrants as a punitive measure	15
4	Article 16	17
4.1	Electronic discharge weapons (tasers)	17
5	Other issues	19
5.1	Pre-trial detention.....	19
5.2	Life sentences	20

1 Introduction

1.1 The Institute's submission

The Netherlands Institute for Human Rights (hereinafter: the Institute) is the A-status accredited national human rights institute of the Netherlands. The Institute monitors and protects human rights, promotes respect for human rights (including equal treatment) in practice, policy and legislation, and raises awareness of the importance of human rights in the Netherlands. The Institute's mandate of the Institute also extends to the territory of the Caribbean Netherlands: the islands Bonaire, Sint Eustatius and Saba. This applies to all tasks of the Institute, with the exception of its mandate to give opinions in individual cases under the Equal treatment act.

Based on its mandate, expertise, and activities, the Institute wishes to raise a number of issues in its submission. This submission aims to inform the Committee against Torture about domestic issues that may be relevant for the adoption of the List of Issues Prior to Reporting. The Institute would welcome the consideration of these issues by the Committee against Torture when drafting and adopting the List of Issues Prior to Reporting for the Eighth Periodic Report of The Netherlands.

The submission does not provide information on all the issues that may be relevant for the adoption of the List of Issues Prior to Reporting. The Institute would welcome the consideration of these issues by the Committee against Torture when drafting and adopting the List of Issues Prior to Reporting.

1.2 The impact of measures to combat COVID-19 on persons deprived of their liberty

The COVID-19 pandemic and the precautionary measures of the Dutch government have had undeniable impact on the rights of persons deprived of their liberty. Since the start of the pandemic and the application of measures to prevent the spreading of the virus, the Institute has received a number of reports from persons who are deprived of their liberty. Issues reported concern, among others, restrictions on the right to receive visitors and confinement of detainees to their cell in case a detainee was contaminated with the virus, which also reduced the possibility to spend time outdoors. The necessity of the measures is obvious. However, the Institute is concerned about the severity of the measures and the impact they had on the well-being of the persons concerned.

Prisoners

On 14 March 2020, the government's Custodial Institutions Agency (DJI) put additional measures in place to prevent the spread of the coronavirus in prisons.¹ Visits to inmates have been restricted in all custodial institutions. As of 28 April 2021, a maximum of two visitors per inmate is allowed. In order to facilitate social contact, phone services have been expanded and, where possible, the option of communicating via Skype has been provided. All leave by inmates in prisons has been suspended. Some exceptions apply however, such as attending a funeral of a family member. Inmates in young offenders' institutions and forensic hospitals are allowed escorted leave and unescorted leave only for

¹ Parliamentary papers, 2019-2020, 24587 and 25295, 763, 13 March 2020. See also, Parliamentary papers, 24587 and 25295, nrs. 771, 784 and 795.

the purpose of rehabilitation, such as going to work or school.² Moreover, all new prisoners are being isolated for eight days awaiting their test results.³ During this period, they are separated from the rest of the prison population and are not allowed to participate in communal activities.

Asylum seekers and undocumented migrants in detention

The COVID-19 pandemic has also had significant impact on the rights of detained asylum seekers and undocumented migrants under the Convention. Since 19 March 2020, new anti-COVID regulations applied for all penal and administrative detention centres which resulted in severe restrictions of liberties of asylum seekers and migrants in detention: many were often locked-up in their cells for 21 hours per day, mostly with two persons per cell, and all communal activities were suspended. Visits and imported goods from outside were prohibited.⁴ This situation lasted until June and July when some restrictions were lifted.

On 5 May 2020, several human rights and civil society groups sent an urgent letter to the government calling for immediate release of all persons in alien detention. In their letter, they point at the severe impact on the health, well-being and rights of aliens who, unlike the prison population, are not allowed to work or attend education. Moreover, due to the fact that most migrants are kept in multi-persons cells where they cannot keep sufficient distance, the organizations question the effectiveness of the measures. Because of the ongoing pandemic and subsequent lock-down measures, with governments closing their borders, the organizations argue that there is no longer a prospect of removal within a reasonable time that may justify detention of aliens. The Institute shares their concern that the imposition of such severe restrictions is disproportional.⁵

Patients in closed health-care settings

Patients residing in closed settings in health-care institutions have likewise been subjected to new restrictions as a result of the pandemic and related measures. Restrictions on patients liberty of movement and the right to receive visitors clearly had an impact on their right to family life. It also had consequences for their right to access to justice, because also patient-interest groups and confidentiality counsellors were prohibited access to the institutions. It is problematic that there was no clear legitimate ground for this measure.⁶

² Parliamentary papers, 2019-2020, 24587 and 25295, 795.

³ Parliamentary papers, 2019-2020, 24587 and 25295, 800.

⁴ Parliamentary Papers 2877817, Letter of the State Secretary of Justice and Security to the House of Representatives, 17 April 2020, p. 36.

⁵ Letter of Reporting point Alien Detention, Amnesty International, Doctors without Borders, VAJN, STIL Utrecht and Dutch Council of Refugees, 5 May 2020, p. 1 [[Brief van Het Meldpunt Vreemdelingendetentie, Amnesty International, Dokters van de Wereld, de VAJN, STIL Utrecht en Vluchtelingenwerk Nederland aan Staatssecretaris Broekers-Knol tot vrijlating vreemdelingen in detentie](#)].

⁶ Health Care and Youth Inspectorate (Inspectie Gezondheidszorg en Jeugd, IGJ), *Regulating the careful application of coercion in health-care really well is only possible at the regional level [De zorgvuldige uitvoering van dwang in de zorg écht goed regelen, kan alleen regionaal]*, December 2020, p. 3. The Temporary Act on Covid-19 Measures, in force since 1 December 2020, has corrected this gap and regulates that health-care institutions must grant their patients access to confidentiality counselors.

Some patients thrived well by the calmer daytime schedule during the pandemic. However, others were subjected to more restraints which were deemed necessary to protect their and other persons' health and safety. Restraints included keeping patients in their own room, behind closed doors. The Health Care and Youth Inspectorate found that those restraints, which may be necessary to prevent the spread of the virus, were not always applied in accordance with the applicable rules and procedures due to a lack of knowledge among staff.⁷ Research ind

icates that patients were not able to successfully challenge the restrictions and restraints used against them, with internal complaint mechanisms often ruling their complaints inadmissible. Neither the Inspectorate nor the Ministry of Health, Welfare and Sport provided clear guidance as to how healthcare institutions should curb risks of contamination in a proportional and lawful manner and how the necessary legal protection should be guaranteed.⁸

⁷ Health Care and Youth Inspectorate, 2020, p. 2;

⁸ T.P. Widdershoven, 'Corona measures in healthcare: concerns about legality and legal protection' [Coronamaatregelen in de ggz: zorgen over rechtmatigheid en rechtsbescherming], *Tijdschrift voor Gezondheidsrecht* (44)3, 2020, pp. 251 - 257; K. Blankman, 'Corona and people with disabilities' [Corona en mensen met beperkingen], *Tijdschrift voor Familierecht* 36, 2020, pp. 165 - 168; B.J.M. Frederiks & S.M. Steen, 'Health rights perspective: rights of clients in elderly care and mental health-care during the COVID-19 pandemic' [Gezondheidsrechtelijk perspectief: rechten van cliënten in de ouderenzorg en verstandelijk gehandicaptenzorg tijdens COVID-19 pandemie'] in: Vereniging voor Gezondheidsrecht preadvies 2021, *Health rights in times of crisis: the COVID-19 pandemic* [Gezondheidsrecht in tijden van crisis: de COVID-19 pandemie], 2021 The Hague: Sdu publishers, pp. 105-131.

2 Article 2

2.1 Domestic and gender-based violence

2.1.1 Data

Violence against women is a persistent problem in both the European and Caribbean parts of the Kingdom of the Netherlands, as addressed by the CAT Committee in its previous concluding observations.⁹ The latest numbers show that about four percent of the Dutch population over 16 has experienced physical violence within the home, eight percent of whom structurally. Five percent of the population has experienced a deprivation of liberties and threats of violence and coercion. Women experience this sort of violence more often than men.¹⁰ On average, 40 women per year are killed by their partners or ex-partners. As for sexual violence, the number is consistently high: 22 percent of women between the age of 18 to 24 have been sexually assaulted physically in the past year.¹¹ These numbers have not declined over the years, illustrating the persistent need for adequate protection by the government.

2.1.2 Sexual violence against women

The government has proposed a revision of the law on sexual crimes, including a proposal to criminalize rape and other forms of sexual violence based on the lack of consent.¹² The Institute welcomes this amendment of the Criminal Code that is in line with its advice to introduce one criminal offence of sexual violence that is firmly anchored in the absence of consent to offer better protection to victims.¹³ It is likely that the entry into force of the new law will result in an increased number of reports of sexual violence.

In this light, the Institute would like to draw the Committee's attention to problems that exist in dealing with reports of sexual violence. According to research by the Inspectorate of Justice and Security, victims have reported negative experiences with the way police officers relate to them. In the informative meeting police officers have with victims who report sexual violence, they discuss what is necessary for prosecuting and convicting the perpetrator, e.g., in terms of evidence required. They indicate to what extent they consider that a conviction is a likely outcome of the case. Also, they discuss the negative impact the procedure may have on the victim. Victims have reported that they feel discouraged in filing a report. Further, there is a shortage of specialized police officers to investigate sexual violence. It can take a very long time before the perpetrators of rape are brought to trial, which is detrimental to the sense of safety and justice of victims.¹⁴

Various measures have been taken to follow-up the recommendations made by the Inspectorate. The police have adopted a new protocol for the informative meeting and

⁹ Committee against Torture (CAT), *Concluding observations on the seventh periodic report of the Netherlands*, paras 48-49, 18 December 2018, CAT/C/NLD/CO/7

¹⁰ M. Akkermans et al, *Monitor Domestic and Sexual Violence 2020 [Prevalentiemonitor Huiselijk Geweld en Seksueel Geweld 2020]* (PHGSG 2020), The Hague: CBS /WODC, p.5

¹¹ M. Akkermans et al, 2020, *supra* note 2, p.7

¹² Legislative proposal sexual crimes [Wetsvoorstel seksuele misdrijven], submitted to civil consultation in March 2021 and open for input until 4 June 2021.

¹³ The Netherlands Institute for Human Rights, *Advice to Minister Ferd Grapperhouse about the preliminary draft of the law proposal sexual crimes [Advies aan minister Ferd Grapperhaus over het voorontwerp van het wetsvoorstel seksuele misdrijven]*, 17 August 2020.

¹⁴ Inspectorate of Justice and Security, *Different perspectives [Verschillende perspectieven]*, The Hague, 2020.

police officials dealing with victims of sexual violence receive specialised training. Further, the government made available more resources to increase capacity to deal with these crimes.¹⁵ The upcoming revision on the criminal law on sexual offences will lead to more reports by victims of sexual violence. Therefore, it is even more necessary that effective measures are taken to guarantee that the police, the public prosecutor and the judiciary can deal with all reports submitted timely.

Suggestion for question:

Which measures will the government take to better protect victims who report sexual violence, including by ensuring that all reports are promptly and effectively investigated, and that perpetrators are prosecuted and punished?

2.1.3 The need for a coordinated policy to combat violence against women

The Institute reiterates the Committee's recommendation in its latest concluding observations that the government should step up its efforts to combat all violence against women, including by ensuring adequate protection measures and sufficient funding, resources and staffing. In particular, the Institute emphasizes the need for a more comprehensive and coordinated policy to effectively prevent and combat violence against women. At present, different forms of violence fall within the mandate of different ministries. Similarly, different aspects of the State's responsibilities (prevention, protection and prosecution) are charged to different ministries. While they consult each other, inter-departmental coordination of policies should be improved in order to make the policies more effective.

Further, municipalities are responsible for the provision of services, including shelter and support services. Coordination among municipalities should be improved to make sure women do not only find temporary protective housing, but subsequent independent housing as well. Also, coordination between the central and local government should be improved to ensure proper monitoring of, and data collection on, the number and quality of emergency safe housing and the support provided.

Suggestion for questions:

Which steps will the government take towards the adoption of a comprehensive and coordinated policy on violence against women?

How will the government improve the data collection and monitoring at the local level to ensure that there is enough and adequate emergency housing and support for women who seek protection from violence?

2.1.4 Domestic and gender-based violence in the Caribbean Netherlands

In December 2020 the Dutch government and the public entities of Bonaire, Statia and Saba signed a new administrative agreement to step up their efforts together to tackle domestic violence and child abuse in the Caribbean Netherlands for the period 2021-

¹⁵ [Parliamentary papers, 2020-2021, Appendix, 2113](#), Minister of Justice's written answers to questions submitted by a parliamentarian on the continued backlog in dealing with reports of sexual violence, 24 March 2021.

2024.¹⁶ This agreement follows an earlier administrative agreement (2017-2020) under which important first steps were taken, such as the appointment and training of specialist officers and the opening of a women's shelter as well as a central hotline for professionals on Bonaire. With the new administrative agreement, the parties have agreed to take extra measures, including education about domestic violence, streamlining and facilitating reporting by professionals, strengthening the cooperation between care, police and judicial partners and providing safe shelters on Saba and Statia.

The Institute welcomes these efforts, but regrets that the agreement has not yet been submitted to Dutch Parliament and that the envisaged concrete plans for 2021 have not yet been published. The Institute further regrets the lack of comprehensive data on all forms of violence against women in the Caribbean Netherlands, including on the number of perpetrators that are charged, prosecuted and punished. In this light, the Institute also notes that the government has not responded to your Committee's request to provide disaggregated data concerning violence against women in Aruba, Curaçao and Sint Maarten.¹⁷

Suggestions for questions:

Please provide disaggregated data concerning all violence against women, including charges, prosecutions and penalties for the crimes committed, in all parts of the Kingdom, including in the Dutch Caribbean.

Please provide an update on the implementation of the plans to better prevent and protect women in the Dutch Caribbean against all forms of violence?

2.1.5 Impact of COVID-19 measures on violence against women

Comprehensive data on the prevalence of domestic violence during the pandemic are not yet available. While professionals continued to provide support, personal contacts with (potential) victims of domestic violence were less intense. They have expressed their concern about the likeliness that the number of unreported cases of domestic violence has increased and that more grave violence was committed. That may result in an increased number of reports after the pandemic.

Suggestion for question:

How will the government examine the prevalence of domestic violence during the pandemic?

Which measures will the government take to guarantee that all persons who were victims of domestic violence during and after this and future pandemics receive the necessary support?

¹⁶ Government of the Netherlands, 'Strengthening the approach to Domestic Violence and Child Abuse in the Caribbean Netherlands' [Versterking Aanpak Huiselijk geweld en Kindermishandeling Caribisch Nederland], 7 December 2020], <https://www.rijksoverheid.nl/actueel/nieuws/2020/12/07/versterking-aanpak-huiselijk-geweld-en-kindermishandeling-in-caribisch-nederland>.

¹⁷ Committee against Torture (CAT), Concluding observations on the seventh periodic report of the Netherlands, par. 49c, 18 December 2018, CAT/C/NLD/CO/7, p.12

2.2 National Preventive Mechanism

2.2.1 *The compliance of the NPM with international standards*

The Dutch National Preventive Mechanism (NPM) is a multi-agency network coordinated by the Inspectorate for Justice and Security (IJ&V).¹⁸ Each agency works on the basis of its own mandate, using its own monitoring frameworks and rules of procedure. In its annual report, the NPM refers to the individual reports of each agency for its activities.¹⁹

The Dutch NPM has long been criticized for its alleged lack of perceived independence and its performance, including from its own participants.²⁰ In its 2016 country report, the Subcommittee on the Prevention of Torture (SPT) expressed concerns on the Dutch NPM, including on the proximity of the central government inspectorates to their ministries that would threaten its credibility.²¹ Your own Committee has likewise called on the government to ensure and respect complete financial and operational independence of the NPM, when carrying out its functions, in accordance with article 18, par. 1, of the OPCAT, the guidelines on national preventive mechanisms of the Subcommittee on Prevention on Torture (SPT Guidelines), and with due regard to the Paris Principles.²²

The institute is aware that the NPM coordinator, following the Committee's 2018 report, has been reviewing whether the current institutional format of the NPM is still adequate.²³ The Institute has also been informed that the ministry of Justice and Security is exploring alternative institutional formats, including by designating the NPM to the Institute. While taking positive note of these developments, the Institute remains concerned about the lack of urgency of the government to follow-up on the recommendations of your Committee.²⁴

Suggestion for question:

¹⁸ The NPM of the Netherlands is made up of the following bodies: the Inspectorate of Justice and Security (IJ&V), the Inspectorate for Health Care and Youth (a merger between the Inspectorate for Health Care and the Inspectorate for Youth Care) and formally also the Council for the Administration of Criminal Justice and Protection of Juveniles (RSJ). In addition, three institutions are designated as associates: Commissions of oversight for penitentiary institutions, the Commissions of oversight for police custody (CTA), and the Detention Areas Supervisory Commission of the Royal Netherlands Military Police. The fourth associate, the National Ombudsman, ended its cooperation in 2014.

¹⁹ NPM, *Annual Report 2019. Annual Review of the Dutch National Preventive Mechanism*, 30 November 2020.

²⁰ The National Ombudsman decided to step down from its associate role in 2014. The RSJ has ceased its participation in the NPM meetings since 2016, disconcerted with the Government response to the SPT report. See Brief van waarnemend Ombudsman (Letter acting Ombudsman), no. 2014 0273, 24 July 2014.

²¹ Subcommittee on the Prevention of Torture, Report on the visit made by the Subcommittee on Prevention of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment for the purpose of providing advisory assistance to the National Preventive Mechanism of the Kingdom of The Netherlands, CAT/OP/NLD/R.1 (16 March 2016), paras 36-38. The European Committee on the Prevention of Torture (CPT) has reiterated these concerns, encouraging the government to ensure the independence and effective functioning of the NPM. CPT, *Report to the government of the Netherlands on the visit to the Netherlands carried out by the European Committee on the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT)*, from 2 to 13 May 2016 (25 November 2016), p. 11.

²² Committee against Torture (CAT), Concluding observations on the seventh periodic report of the Netherlands CAT/C/NLD/CO/7, paras 22-23 (18 December 2018), recalling its previous Recommendations that were adopted at its fiftieth session, CAT/C/NLD/CO/5-6 (6-31 May 2013), para. 28.

²³ NPM, Annual Report 2019, p. 11.

²⁴ See letter of Bakhtiyar Tuzmukhamedov, Rapporteur a.i. for follow-up to concluding observations Committee against Torture, in which he expresses his regret that the State party has not provided information on the concrete measures taken to ensure the complete financial and operational independence of the NPM (30 April 2020).

Could the government please explain which concrete steps it will take to bring the NPM fully in line with the OPCAT, the SPT Guidelines and the Paris Principles, including steps to ensure its complete financial and operational independence?

2.2.2 Limitation of NMP mandate to the European part of the Kingdom

The Dutch government has ratified the OPCAT for the European part of the Kingdom only. In its follow-up response to the Committee's previous concluding observations, the government repeated and explained the reasons for its territorial declaration by referring to its policy of legislative constraint adopted in 2010.²⁵ This means that hitherto the Dutch NPM has no mandate to visit places where people are deprived of their liberty in Bonaire, Statia and Saba. Consequently, people living in the Caribbean and those living in Europe are still treated differently without objective reasons.

In the mean time, the Law Enforcement Council is responsible (among other things) for the general inspection of the justice system on Bonaire, Statia and Saba. While the Council has made specific agreements with the Dutch central government inspectorates, the Institute is not aware of any joint visits with the inspectorates in their capacity as NPM agencies.

Suggestion for question:

Could the government elaborate which steps it takes to withdraw its territorial declaration and apply the Optional Protocol also in the Caribbean Netherlands in the near future?

²⁵ Information received from the Netherlands on follow-up to the concluding observations on its seventh periodic report, CAT/C/NLD/FCO/7 (6 February 2020).

3 Article 11

3.1 Mental health care

3.1.1 The Compulsory Mental Health Care Act and the Care and Compulsion Act

Before 2020 the use of restraint measures and confinement in Dutch mental health care was addressed by one specific law, the Act on Special Placement in Psychiatric Institutions.²⁶ As of January 2020, new legislation entered into force: the Compulsory Mental Health Care Act (for persons with a psychological disorder) and the Care and Compulsion (Psychogeriatric and Intellectually Disabled Persons) Act.²⁷ These laws specifically aim to limit the use of restraint measures and involuntary placements, in order to ensure that they are applied as measures of last resort. The year 2020 was designated as a transition year to enable health professionals to adapt to the new legal requirements.²⁸

Six months after the new legislation entered into force, the Health Care and Youth Inspectorate (hereafter: the Inspectorate) noted a delay in the application of the new legislation. It advised to provide more training on the required procedures in the Care and Compulsion Act to health professionals.²⁹ Gaps in data provision constitute another issue that warrants attention. Both the Compulsory Mental Health Care Act and the Care and Compulsion Act include provisions that instruct health professionals to register and analyse all involuntary measures and placements imposed. They must submit that information every six months to the Inspectorate.³⁰ The first analysis by the Inspectorate indicates that the data provided by health care institutions do not comply with the standards as demanded by law. This makes it difficult for these institutions to improve their policies on the use of involuntary measures based on the Inspectorate's insights.³¹

The practice of isolation and separation in mental health institution has been a concern for some time. In 2016, the Inspectorate published a normative framework 'Reducing separation and isolation'. It examined whether institutions took sufficient measures to reduce separation and isolation in practice. According to a study published by the Inspectorate in December 2019, despite action plans and some improvements, most mental health institutions have failed to reduce the use of (forced) separation and isolation. Health professionals argue that this is due to the fact that the current population of mental health institutions has more serious problems than before and to the lack of (regular) staff.³² While noting the efforts made, the Institute regrets that these have not yet led to a substantial change in the use of solitary confinement.

²⁶ Wet bijzondere opnemingen in psychiatrische ziekenhuizen.

²⁷ Wet verplichte geestelijke gezondheidszorg and Wet zorg en dwang. An explanation in English can be found on this website: <https://www.dwangindezorg.nl/wvggz/english-version>

²⁸ Parliamentary Papers II 2018/2019, 35087, p. 21.

²⁹ Health Care and Youth Inspectorate, *Regulating the careful application of coercion in health-care really well is only possible at the regional level [De zorgvuldige uitvoering van dwang in de zorg écht goed regelen, kan alleen regionaal]*, December 2020, p. 4.

³⁰ See article 8:25 par. 1 Compulsory Mental Health Care Act and article 18 par. 1 Care and Compulsion Bill.

³¹ Health Care and Youth Inspectorate, *Analysing to learn. Which observations does the Inspectorate has on the analyses submitted about the application of coercion in health-care? [Analyseren om te leren. Wat ziet de inspectie in de aangeleverde analyses over de toepassing van dwang in de zorg?]*, April 2021.

³² Health Care and Youth Inspectorate, *Monitoring the reduction of separation and isolation in healthcare 2016-2019 [Toezicht terugdringen separeren en afzonderen in de GGZ 2016-2019]*, December 2019.

The Institute is also concerned about the gradual increase of emergency involuntary placements and measures within mental health care, which can be imposed without prior authorisation by a judge. In the first six months of 2020, there were 4470 emergency placements and measures, which is an increase of almost 11 percent compared to the same period in the previous year. Health care professionals indicate that this is the result of procedural hurdles in the new laws, in combination with delays in the judicial system due to the COVID-19 pandemic.³³ In October 2020, Parliament passed urgent legislation aimed to solve this problem, which entered into force on 29 October 2020.³⁴

Suggestion for questions:

Please provide detailed data on the number and duration of involuntary placements, solitary confinement, and restraints in mental health care as from 2019, and explain which measures the government will take to remove any obstacles in the collection and analysis of such data.

What measures will the Government take to ensure the application of the new legislation? What steps will it take to providing the necessary training?

How will the Government ensure that restraints and solitary confinement in mental health care are only used as a measure of last resort and for the shortest possible time and under strict medical supervision?

Which alternative measures are foreseen to reduce the number of forcibly interned persons with mental disabilities?

3.1.2 Ambulatory application of restraint measures

Both new laws mentioned above allow for application of restraint measures outside mental healthcare institutions. While realizing that such ambulatory application of restraint measures may lead to a reduction of involuntary placements in mental healthcare institutions, the Institute has expressed concerns about this provision in an earlier legislative advice. In particular, the Institute has pointed at the possible inexperienced use of restraint in outpatient care, the insufficient oversight and the infringements on the right to privacy and family life of the patient and its relatives and friends.³⁵ The Institute regrets that there are no detailed data on the ambulatory use and duration of involuntary restraint measures or the medical supervision of those measures.

Suggestion for question:

Please provide detailed data on the use and duration of involuntary restraint measures outside mental health-care institutions and the medical supervision provided.

³³ 'Substantial increase in emergency forced internments in psychiatry; experts point at flawed law' ['Flinke toename acuut gedwongen opnamen psychiatrie, experts wijzen naar kapotte wet'], *Volkskrant*, 1 September 2020: <https://www.volkskrant.nl/nieuws-achtergrond/flinke-toename-acuut-gedwongen-opnamen-psychiatrie-experts-wijzen-naar-kapotte-wet-bd48ef54/>

³⁴ In Dutch: Spoedreparatiewet voor de Wet verplichte ggz (Wvggz) and Wet zorg en dwang (Wzd) <https://www.dwangindezorg.nl/actueel/nieuws/2020/10/28/spoedreparatiewet>

³⁵ Netherlands Institute for Human Rights, *Reactie van College internetconsultatie Besluit zorg en dwang, verplichte ggz en forensische zorg*, 3 February 2018.

3.2 Children in closed youth care facilities

3.2.1 Placement in closed youth care facilities

In June 2019 a government-installed committee, the Committee De Winter, published the first comprehensive report on violence in youth care since 1945.³⁶ One of the conclusions is that especially in closed youth care facilities children are at an increased risk of physical, psychological and sexual violence by staff and other pupils. The Committee De Winter recommends to prevent placement in (closed) youth care facilities to the extent possible.³⁷

In March 2019, the government published an action plan to prevent placement in closed youth care facilities.³⁸ It also explores the use of alternative forms of youth care, such as hybrid forms of care that partly take place at home and partly in institutions.³⁹ The Institute welcomes these steps and positively notes that between 2018 and 2020, the number of placements in closed youth care facilities has slightly decreased.⁴⁰ However, it also notes that professionals express their concern that the COVID-19 pandemic will result in an increase of placements in closed youth care facilities. This is a result of an increasing number of children in need of mental healthcare in combination with waiting lists in regular care.⁴¹

The Institute furthermore emphasizes the need for detailed, disaggregated data on the reason for and duration of placement of children in closed facilities. It is particularly necessary to collect such data on the reasons for interning victims of sexual violence in such facilities to ensure that they receive the appropriate help and support, tailored to their specific needs. This recommendation by the Dutch National Rapporteur on Human Trafficking and Sexual Violence against Children, echoed by the Committee in its previous concluding observations, has been studied by the government.⁴² On the basis of the report,⁴³ the government has stated that it will discuss if and how further research will be conducted into the effectiveness of support.⁴⁴

Suggestion for questions:

³⁶ Commission on violence in youth care, 'Inadequate protection. Violence in Dutch Youth-care' from 1945 until present' [Onvoldoende beschermd. Geweld in de Nederlandse Jeugdzorg van 1945 tot heden], *Parliamentary papers* 2018-2019, 31015, nr. 174.

³⁷ *Ibid.*, p. 96.

³⁸ Actieplan 'De best passende zorg voor kwetsbare jongeren' [Actionplan 'The most fitting care for vulnerable children], *Parliamentary papers* 2018-2019, 31839, no. 634.

³⁹ State Secretary for Health, Welfare and Sports and Minister for Legal Protection, 'Progress on Commission De Winter' [Voortgang Commissie de Winter], *Parliamentary papers* 2020-2021, 31015/31839, p. 204.

⁴⁰ Central Bureau of Statistics, *Jeugdhulp2020* [Youthcare 2020], 30 April 2021. Data is disaggregated on the basis of age, gender, background and family situation.

⁴¹ 'Substantial decrease youth in Youthcare Plus in 2020' [Forse daling jongeren in JeugdzorgPlus in 2020], (www.jeugdzorgnederland.nl)

⁴² National Rapporteur on Trafficking in Human Beings and Sexual Violence against Children, *Slachtoffermonitor seksueel geweld tegen kinderen, 2017-18* [Victim monitoring sexual violence against children 2016], The Hague: Nationaal rapporteur, 21 November 2019.

⁴³ Sophie Hospers, Jaap van de Kamp, Quirien van der Zijden, *Rapportage onderzoek mogelijkheden datacollectie jeugdhulp bij kindermishandeling en seksueel geweld* [Report investigating possibilities datacollection youth care for child abuse and seksual violence], 12 May 2020.

⁴⁴ Minister de Jonge and Minister Dekker, 'Letter to the House of Representatives on progress youth' [Kamerbrief over voortgangsbrief jeugd], 17 July 2020, 1704509-206841-J.

How will the Government monitor and evaluate whether the measures taken to prevent placement in closed youth care facilities are effectively being implemented?

Which concrete steps will the government take to ensure a further decrease in placements in closed youth care facilities, particularly in light of the COVID-19 pandemic?

Can the government inform which steps it has taken or will take to provide detailed, disaggregated data on the reasons for and duration of placement of children in closed facilities including victims of sexual violence?

3.2.2 The use of restraint measures in closed youth care facilities

In June 2020, the Health Care and Youth Inspectorate reported that youth care facilities continue to use restraint measures and confinement on a regular basis, despite their efforts to limit the use of such measures. Some even do so routinely out of habit, without registering this as such.⁴⁵ Comprehensive data on the use of restraint measures and confinement in closed youth care facilities are not published periodically. Registration of the use of these measures by youth care facilities is also not yet mandatory.

The government has announced its intention to include an obligation for such registration in the proposed Law on the improvement of the legal position of children in youth care facilities.⁴⁶ The same proposal, which is pending before the Council of State for its legislative advice, aims to improve the legal position of children in closed youth care facilities and to limit the use of coercion and restraints.⁴⁷ The Institute stresses the need to provide legal guarantees to ensure that measures of coercion and restraint are applied as a measure of last resort only.

Suggestion for question:

Which measures will the Government take to provide for legal guarantees that ensure that restraints and solitary confinement are only used as a measure of last resort when all other alternatives for control have failed, for the shortest possible time and under strict medical supervision?

3.3 Border detention of migrants

Foreign nationals who enter the Netherlands through an airport or seaport without the correct travel documents or without sufficient financial resources continue to be detained in the Schiphol Justice Complex, also known as border detention. Some of these foreign nationals to whom entry in the country has been denied are asylum seekers who ask for protection in the Netherlands; others are undocumented migrants awaiting expulsion.

⁴⁵ Health Care and Youth Inspectorate, *Aandacht en ambities leiden tot terugdringen van vrijheidsbeperkende maatregelen* [Attention and ambition lead to reduction of restraint measures], June 2020.

⁴⁶ Minister of Health, Welfare and Sports, 'Commissiebrief Tweede Kamer inzake verzoek om reactie op onderzoeksrapport Uithuisgeplaatst. En dan?' [Letter to Parliament in response to the request for a reaction on the report 'Placement in care. Then what?'], *Parliamentary papers 2018-2019*, 31839, no. 675.

⁴⁷ Wet rechtspositie gesloten jeugdinstituten [Law on the improvement of the legal position of children in youth care facilities].

The Institute remains concerned about this practice in which foreign nationals are routinely detained by the Netherlands. As the Committee noted in its concluding observations, border detention should only be used as a last resort and, when used, for the shortest possible time necessary to achieve a legitimate result. Up until this day there are no indications for the use of alternatives to this practice.

In 2019, the average detention period in Schiphol Justice Complex and other detention facilities holding foreign nationals awaiting expulsion was 41 days.⁴⁸ The government may only detain asylum seekers if no other, less drastic means are available and detention is absolutely necessary and, when used, for the shortest time possible to achieve a legitimate result.

Suggestion for questions:

Is the government willing to stop the systematic detention of asylum seekers who arrive via air or sea by introducing an individual assessment to determine the necessity and proportionality of detention?

Can the government elaborate which measures are, or will be, taken to reduce the average period for migration-related detention?

3.4 Repatriation and Detention of Aliens Act

In June 2018 the House of Representatives accepted the proposed Law concerning the Repatriation and Detention of Aliens.⁴⁹ This bill had been sent to the Dutch Senate for further discussion, but is now pending in the House of Representatives again due to amendments of the bill that were presented in June 2020.⁵⁰ Due to the resignation of the Dutch government on 15 January 2021 and the formation of a new government pursuant to the elections held on 17 March 2021, the parliamentary discussion of this law has been postponed.

The Repatriation and Detention of Aliens bill creates two regimes for detention. Both regimes have different degrees of restrictions to which aliens are subjected. Although the less restrictive regime (verblijfsregime) is supposed to be the standard option and the more restrictive regime (beheersregime) should only be used in exceptional cases when an alien's behaviour poses a security or order risk⁵¹, all newly arriving aliens (including asylum seekers and undocumented migrants) are held in the latter more restrictive regime for a maximum of two weeks.⁵² After those two weeks, the foreign national is transferred to the less restrictive regime, unless the director of the detention centre determines that continued placement in the restrictive regime is necessary in light of the security and public order of the facility.⁵³ The director can determine the duration of placement, with

⁴⁸ Custodial Institutions Agency, Factsheet detention of aliens [Factsheet Vreemdelingenbewaring], July 2020.

⁴⁹ In Dutch: Wetsvoorstel Terugkeer en Vreemdelingenbewaring.

⁵⁰ Parliamentary papers, 2019-2020, 35501, p. 2.

⁵¹ State Secretary of Justice and Security, Letter to the National Ombudsman 'Policy response regarding report 'Limits to the detention of aliens'' [Beleidsreactie op rapport 'Grenzen aan vreemdelingenbewaring' over het regime in vreemdelingenbewaring], *Parliamentary papers*, 11 September 2020.

⁵² Art. 17 and 34 of the repatriation and detention of aliens bill.

⁵³ Art. 18 (1) of the the repatriation and detention of aliens bill.

the possibility to extend this period repeatedly as long as necessary for security and order, with no legal maximum term stipulated.⁵⁴

While the Institute welcomes the introduction of a separate administrative regime that is distinct from the penal system, it is critical about the necessity of the restrictions introduced. Aliens who are detained under the restrictive regime spend sixteen to seventeen hours per day in their cell and enjoy few liberties. This group includes newly arriving migrants detained in border detention, including asylum seekers. The Institute considers that these restrictions, including the prolonged use of routine restrictive confinement, are not necessary and therefore disproportional for the sole purpose of preventing aliens from entering Dutch soil or keeping them available for expulsion.

Furthermore, while recognizing that security may be a legitimate ground to impose restrictions in migrant detention, the Institute stresses the need for a comprehensive individual risk assessment prior to any decision to place migrants in the restrictive regime or to prolong their placement. This assessment should be based on clear legal and objective criteria, including a person's actual behaviour and their vulnerability, and assess whether placement, or continued placement, in a restrictive regime is necessary and proportionate. Furthermore, the restrictions to which migrants are subjected to, which include prolonged time to be spent in a cell, should be no longer than absolutely necessary and periodically reviewed.

Suggestion for questions:

How will the government ensure that undocumented migrants and asylum seekers in detention are not subjected to unnecessary restrictions and that the detention regime, as presented in its bill, is suitable for its purpose?

What measures will the government take, including by revising the proposed Law concerning the Repatriation and Detention of Aliens, to ensure that any decision to place aliens in the restrictive detention regime, and decisions to prolong the placement, are based on clear, objective criteria, limited by a legal maximum period of time, and are absolutely necessary and proportionate in light of an actual security threat based on an individual's behaviour?

3.5 Solitary confinement in migrant detention

3.5.1 Solitary confinement as a collective security measures

The Institute is also concerned that, the bill will provide the director of an alien detention centre with the authority to use solitary confinement of aliens as a generic security measure in both regimes.⁵⁵ Under article 5 of the bill, the director of an alien detention centre can temporarily lock up all aliens or a group of aliens in their cells if deemed absolutely necessary to maintain order and safety,⁵⁶ and exclude them from daily

⁵⁴ Art. 18 (2) of the the repatriation and detention of aliens bill.

⁵⁵ Parliamentary papers, 2019-2020, 35501, no. 3, Memorandum of Understanding.

⁵⁶ Art. 5 (1) Wijziging van het Wetsvoorstel terugkeer en vreemdelingenbewaring met het oog op het handhaven van de mogelijkheden om maatregelen te nemen ten aanzien van overlastgevende vreemdelingen [Amendment on the repatriation and the detention of aliens bill in order to maintain options for taking measures against aliens causing nuisance].

programmes and activities with others until the situation is under control. This “lockdown” can be imposed for twenty-three hours for a maximum of four weeks.⁵⁷

The Institute recognizes that under exceptional circumstances temporary segregation may be necessary for the maintenance of order. However, the Institute is concerned about the possibilities to impose solitary confinement as a collective security measure, without assessing its necessity and proportionality in light of an individual migrant’s behaviour. Reports suggest that amongst the persons who are placed in isolation for their nuisance-causing behaviour, there are relatively many vulnerable people.⁵⁸ It is also deeply concerned about the possibility of prolonged solitary confinement, as presented in the Bill. Prolonged solitary confinement, exceeding the limit of 15 consecutive days, breaches international human rights law, in particular the prohibition on torture and other ill-treatment.⁵⁹

Solitary confinement may be used only as a last resort as an emergency measure to protect other aliens or staff and imposed strictly for as long as is deemed absolutely necessary. The use and duration of such generic measures must be based on clear and objective criteria, including a person’s individual behaviour, and should take into account the person’s health situation.

Suggestion for question:

What legislative and policy measures will the government take to ensure that detained asylum seekers and undocumented migrants are never subjected to the use of solitary confinement, besides the exceptions provided in international human rights law and standards, and that, if used, for the shortest time possible and under strict medical supervision?

3.5.2 Solitary confinement of migrants as a punitive measure

The Committee has expressed its concern about the provision in the proposed Law on Repatriation and Alien Detention that allows for the use of solitary confinement in both regimes as a (punitive) disciplinary measure against detained asylum seekers and undocumented migrants.⁶⁰ Under article 42 (4) of the bill, solitary confinement can be imposed for a maximum duration of two weeks, which can be extended repeatedly by periods of two weeks. Aliens are isolated for 22 hours in their cells without meaningful human contact. Research indicates that the use of solitary confinement as a disciplinary

⁵⁷ Art. H. Battjes et al, ‘Kroniek van het migratierecht’ [Chronicle of migration law], *Nederlands Juristenblad*, 2020, 2399.

⁵⁸ Annemarie Busser, Revijara Oosterhuis & Tineke Strik, ‘Vreemdelingendetentie (I), detentie-omstandigheden onder huidig regime en onder wetsvoorstel getoetst aan internationale normen’ [Detention of aliens (I), detention conditions under it’s current regime and under the bill tested against international standards], *Asiel & Migrantenrecht*, 2019-8, p. 316-323.

⁵⁹ Rule 43 of the Mandela Rules. See also UN Human Rights Committee General Comment 20, para. 6; Interim report to the General Assembly, Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, UN Doc. A/66/268, para. 81

⁶⁰ Busser, Oosterhuis & Strik, 2019-8, p. 316-323.

measure has significantly increased between 2016 and 2019.⁶¹ In 2016 solitary confinement was imposed 59 times and in 2019 an estimated number of 110 times.⁶²

Suggestion for question:

Can the government explain which efforts are made, both in the draft Law on Repatriation and Alien Detention and in practice, to abolish the use of isolation as a punitive measure?

⁶¹ Amnesty International et al., *Isolatie in vreemdelingendetentie [Isolation in detention of aliens]*, Amsterdam: Amnesty International, 2020.

⁶² Amnesty International et al., *Isolatie in vreemdelingendetentie [Isolation in detention of aliens]*, Amsterdam: Amnesty International, 2020.

4 Article 16

4.1 Electronic discharge weapons (tasers)

On 15 November 2019, the minister of Justice and Security announced that 17.000 police officers will be equipped with electronic discharge weapons within the following five years.⁶³ The government stated that these officers will be deployed by the control room to deal with incidents. However, it is unclear which incidents justify the use of tasers, and whether or not police officers will be authorized to use the Taser in their day-to-day policing.

The government further stated that the pilot conducted from 1 February 2017 to 1 February 2018 - on which your Committee has expressed concerns in its previous Concluding Recommendations - had proven the Taser to be effective in the sense that the (threat of the) use of this weapon helped de-escalating dangerous situations and bringing suspects under control. As a consequence of the final pilot evaluation report,⁶⁴ which raised several points of concern that the Committee addressed in its latest Concluding observations,⁶⁵ the government has taken extra measures to reduce the risk of using excessive force. Most significantly, in January 2019 it amended the use of force instructions for the taser.⁶⁶ It also further regulated the use of the stun mode, which may be applied only in extreme situations in which there is a real and immediate threat to life or risk of serious injury.⁶⁷ According to the periodic monitor of the Police Academy in the period 2019-2020, the use of the stun mode has decreased significantly since September 2018; it was used four times in 2019.⁶⁸

The Institute welcomes the amendment of the Instruction for the use of violence by the Dutch police, the Royal Netherlands Military Police and other law enforcement officers in January 2021.⁶⁹ The Instruction now differentiates between two regimes for the Taser: one for the use of the 'stun mode' and another for the 'fire mode'. The Institute notes that the conditions for the use of both regimes have been restricted to the extreme situation in which there is a real and immediate threat to life or risk of serious injury. While this is a positive step, the Institute underlines the need for additional safeguards against the misuse of the Taser. For instance, the Instruction should clearly state that Tasers should never be used against vulnerable people, in particular in the stun mode which is intended

⁶³ Parliamentary papers, 2019-2020, 29628, no. 916.

⁶⁴ O. Adang, B. Mali, K. Vermeulen, *Het stroomstootwapen in de basispolitiezorg? Evaluatie van de pilot* [The electric discharge weapon in basic police work? Evaluation of the pilot], Politieacademie, May 2018.

⁶⁵ Committee against Torture (CAT), *Concluding observations on the seventh periodic report of the Netherlands*, paras 22-23 (18 December 2018), par. 42, CAT/C/NLD/CO/7.

⁶⁶ Minister of Justice and Security, *Vernieuwde tijdelijke geweldsinstructie toepassing stroomstootwapen* [Updated temporary use of force instructions for the electro-shock weapon], 30 January 2019. This document, though legally binding, is not a formal law.

⁶⁷ B. Mali, *Het stroomstootwapen in de basispolitiezorg? Monitor van de inzet periode 1 februari 2018 - 1 februari 2019* [Electric discharge weapon as part of basic police work? Monitor of use between 1 February 2018 - 1 February 2019], Apeldoorn: Politieacademie 2019.

⁶⁸ In anticipation of the 2019 amendment, the chief of police decided to start operating according to the stricter use of force instructions for the electro-shock weapon after the summer of 2018. See B. Mali, 2020. See also Parliamentary papers, 2018-2019, 29628, 897 and Parliamentary papers, 2019-2020, 29628, 916.

⁶⁹ *Ambtsinstructie voor de politie, de Koninklijke marechaussee en de buitengewoon opsporingsambtenaar* [Official Instructions for the Police Royal Military Constabulary and Special Investigating Officers], 26 January 2021.

only to inflict pain. The Institute also considers that the conditions under which the fire mode can be used are similar to those for using a firearm, hence should be regulated similarly in the Instruction. In particular this means that the fire mode may only be used as a last resort to apprehend persons suspected of a serious offence, the nature of which should be clearly defined in the Instruction. Moreover, while noting that the training of police officers in the use of the Taser has been extended from two to three days, the Institute underlines the need for additional and proper training, including techniques for de-escalation of a conflict and with more emphasis on the risks of the Taser.

Suggestion for questions:

Can the government elaborate which police officers will be equipped with the Taser and under which conditions its use is legitimate?

Will the government amend the Instruction for the use of violence and further regulate the use of the Taser, by explicitly prohibiting its use against vulnerable persons, including minors and pregnant women, and clearly defining the types of offences that justify the use of the fire mode?

Will the government ensure that all police officers equipped with the Taser receive proper training, including techniques for de-escalation of a conflict and with more emphasis on the risks of the Taser?

5 Other issues

5.1 Pre-trial detention

On 9 February 2021, the European Court of Human Rights (ECtHR) delivered three judgements in three different cases concerning pre-trial detention: *Maassen v. the Netherlands*,⁷⁰ *Hasselbaink v. Netherlands*⁷¹ and *Zohlandt v. Netherlands*.⁷² The Court held that in these three cases there had been a violation of Article 5, par. 3 (right to liberty and security), of the European Convention on Human Rights (ECHR).

According to the Court, the relevant decisions of the domestic courts to extend the applicants' pre-trial detention had fallen short of the requirements of the Court's established case-law. In all three cases, the decisions had failed to address the applicants' arguments, including those contesting the risk of reoffending (*Zohlandt*) or, in light of new evidence, the reasonableness of the suspicion (*Hasselbaink*). By failing to address the specific facts and individual circumstances, the judicial authorities had extended the applicants' pre-trial detention on grounds which, although "relevant", could not be regarded as "sufficient" to justify their continued detention.

In all three cases, the Institute had provided information to the Court as a third-party intervener. The information was based on a research that the Institute had carried out in 2016. In the report, the Institute concluded that the manner in which Regional Courts and Courts of Appeal reasoned their decision on pre-trial detention was insufficient in light of international human rights standards.⁷³

The Institute reiterates the concerns of the Committee about the high percentage of pre-trial detainees in the Netherlands and the lack of alternatives. Statistics show that in 2019, 44 percent of the prison population consists of pre-trial detainees.⁷⁴ The lack of sufficient reasoning appears to be one aspect of a larger issue concerning pre-trial detention in the Netherlands: its application in a near automatic fashion. Whilst the Dutch legislation sets out guarantees in line with article 9 of the International Covenant on Civil and Political Rights and article 5 ECHR, its application in practice has led to a tendency of 'extension of detention, unless' rather than as an *ultimum remedium*. Such quasi-automatic prolongation of detention contravenes international norms for the protection of the rights of people deprived of their liberty and the presumption of innocence.

Suggestion for questions:

What measures is the government taking to ensure that the decisions imposing and extending pre-trial detention are duly substantiated?

What measures is the government taking to guarantee that pre-trial detention is only used as a measure of last resort?

⁷⁰ European Court of Human Rights, *Maassen v. Netherlands*, no. 10982/15, 9 February 2021.

⁷¹ European Court of Human Rights, *Hasselbaink v. Netherlands*, no. 73329/16, 9 February 2021.

⁷² European Court of Human Rights, *Zohlandt v. Netherlands*, no. 69491/16, 9 February 2021.

⁷³ Netherlands Institute for Human Rights, *Tekst en uitleg. Onderzoek naar de motivering van voorlopige hechtenis*, [Research into the legal reasoning in pre-trial detention orders], March 2017. To be found at <https://mensenrechten.nl/publicaties/detail/37467> (Dutch only).

⁷⁴ Statistics Netherlands, *More prisoners in 2019*, August 2020. To be found at <https://www.cbs.nl/en-gb/news/2020/33/more-prisoners-in-2019>.

5.2 Life sentences

A life sentence is the most severe punishment that can be imposed in the Netherlands. Life imprisonment can only be reduced when the Minister of Justice grants a pardon to the person convicted. Up until recently, this never happened. In January 2021, the Minister for Legal Protection granted a pardon for the very first time to a person who was sentenced to life imprisonment.⁷⁵ The Minister explained to Parliament that he had reluctantly taken this decision after a four-years' long legal battle in which his refusal to grant a pardon was disputed. According to the Minister, the government had to offer a pardon in order to meet international standards or otherwise risk that judges would no longer impose life-sentences at all.⁷⁶

While this case could mark a significant step forward regarding prisoners serving life sentences, the Institute is critical that the prospect of release and the reduction of sentences fully depends on the discretionary power of the minister to grant a pardon. As this case illustrates, the right to liberty, and to hope, becomes dependent on the political context at a particular moment of time until the justice system corrects administrative decisions. In a letter to the Minister for Legal Protection of 10 May 2021 about this case, the National Ombudsman concluded that the Minister set as a goal to refuse pardon, and judged this to be maladministration. Given the structural nature of the problem, he called for an immediate, substantial, and timely review procedure that meets the criteria of the European Court of Human Rights and the principles of good governance.⁷⁷

While since 2017 the Netherlands has an Advisory Committee that automatically reviews the situation of prisoners serving a life sentence, the Institute remains critical of the system in place. The first review takes place after a period of twenty-five years of detention to determine if the detainee should be allowed to start reintegration activities, followed by another review two years later to determine if the detainee can actually return to society. The Institute is concerned that the Minister may ignore the Committee's advice and decide against starting reintegration or granting a pardon.⁷⁸ Several members of the Advisory Committee publically expressed their dismay in April 2021 about the fact that the Minister has disregarded several of their advices to even start reintegration.⁷⁹

The Institute takes note of the Minister for Legal Protection's statement to reconsider the relationship between judges and the Minister concerning decision-making on releasing persons who are sentenced to life imprisonment.⁸⁰ The interim government announced in March 2021 that the next Minister for Legal Protection will have to take a formal position on this matter.⁸¹ In addition to establishing an independent review system in which the

⁷⁵ 'Minister Dekker verleent met tegenzin gratie in beruchte moordzaak' [Minister Dekker reluctantly grants a pardon in infamous murder case], *NOS*, 20 January 2021.

⁷⁶ [Parliamentary papers](#), 2020-2021, 29452, no. 240.

⁷⁷ Letter of the National Ombudsman to Minister Dekker, 10 May 2021. To be found at www.nationaleombudsman.nl

⁷⁸ Article 7(2) of the Decree Advisory Committee Life Sentences (Besluit Adviescollege levenslanggestraften).

⁷⁹ Sandra van den Heuvel en Bram Endedijk, Leden Adviescollege Levenslanggestraften overwegen op te stappen [members of the Advisory Committee life sentences considering to resign], www.nporadio1.nl, [9 April 2021](#).

⁸⁰ [Parliamentary papers](#), 2020-2021, 29452, no. 240.

⁸¹ [Parliamentary papers](#), 'Reactie op brief herbeoordelingsmechanisme levenslanggestraften' [Response to letter review mechanism life sentences], 24 maart 2021.

final decision is left to a judge, the Institute also recommends to amend the law by stipulating clearly when detainees can expect at the earliest time possible the review or reduction of their sentence, and providing a timeframe for subsequent reviews if a pardon is not granted.

Suggestion for question:

Please specify which steps the government will take at the earliest time possible to reform the review procedure in a manner that ensures that persons sentenced to life imprisonment have the prospect of relief or reduction of their sentence after a reasonable period of time, based on a decision of an independent judge and clear criteria set in law.