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United Nations, Office of the High
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Submission by the Parliamentary Ombudsman / the Finnish NPM

The Parliamentary Ombudsman / the Finnish NPM wishes to bring to the Committee's attention the following issues which it considers to be of particular importance on the List of Issues Prior to Reporting (LOIPR) which the Committee will be submitted to Finland.

1. Need for training

Increasing the understanding of fundamental and human rights among those actors who, through their work, need to intervene in the self-determination and integrity of an individual.

2. The elderly

How does Finland prevent mistreatment of the elderly receiving care? The need for a strategy and training.

Organising guardianship for elderly people who need care.

Restrictive measures are being used in nursing units for elderly despite the fact that legislation provided for their use in these units does not exist. Yet, despite lacking legislation, the use of restrictive measures in units for elderly is much more common than in psychiatric units where the use of restrictive measures is regulated by legislation. In several of his comments, the Ombudsman has called for legislation on the use of restrictive measures in the care of the elderly.

The need for special training for people employing restrictive measures. This training should include discussion, for example, on how to avoid the use of restrictive measures.

Currently, self-monitoring is not always effective and no efficient supervision mechanism covering all units for elderly has been created.

The circumstances of the elderly in home care is unclear and no effective supervision mechanism is in place.

3. Persons with disabilities

How to safeguard the self-determination of persons with disabilities as well as their opportunities for participation and their opportunities to influence their own lives.

How to increase the understanding of persons with disabilities on their right to self-determination and on other rights.

The use of restrictive measures and the treatment of persons with disabilities in institutions and residential units. For example:

- in accordance with the provisions of the Act on Special Care for Persons with Intellectual Disabilities, a person shall be physically restrained only if other measures prove inadequate and only for a necessary period of time (maximum eight hours in total). Yet there may be persons who are, on a regular basis, being physically restrained for a long period of time
- residential units for persons with disabilities act contrary to the law when the doors of residents are locked for eight hours during the night
- a person held in isolation may not always be able to contact a member of staff without delay and he or she may not be proactively offered the possibility to use the toilet without having to ask for it.

The inadequate understanding on the part of both persons with disabilities and the staff attending them concerning legislation causes difficulties in implementing the rights of persons with disabilities.

4. Children

The rights of children placed in child care institutions are not being realised. For example:

- municipalities do not ensure that a social worker in charge of a child in care is given necessary means to perform his/her duties provided for under the law
- the difference between restrictive measures and disciplinary limits is not fully appreciated
- the hearing of a child and the child's participation in preparing of his/her service plan is not being properly realised.

5. Foreign nationals

The identification of suicidal risks of foreign detainees and the prevention of suicides. For example:

- medical screenings on new prisoners are insufficient to effectively identify suicidal persons and persons who have experienced torture
- the lack of guidelines and training in the prevention of suicides.

6. People in police detention

The detention of remand prisoners in police detention facilities. For example:

- despite the maximum detention time of seven days under the amended Imprisonment Act (unless a court of law finds cogent reason to rule otherwise), there are police prisons where a remand prisoner has been held in custody for over a week or even a month
- making the difference between the responsibility for custody and investigation is still unclear.

The health care of persons deprived of their liberty in police detention facilities. For example:

- no compulsory health checks on arrival at a prison are undertaken – not even in the few police prison possessing a permanent health care staff. Despite the Ombudsman's continuous recommendations, the National Police Board has not issued instructions to this effect
- as a rule, the medication of persons deprived of their liberty is taken care of by the guards of a police prison.

The holding of intoxicated persons in police detention facilities. Since municipalities have no statutory requirement to provide detoxification centres, they are lacking even in many major cities. Therefore, intoxicated persons are often taken into a police prison where the staff is unqualified to monitor their state of health. A police prison or a hospital are the only options for intoxicated persons offered by municipalities.

7. Remand prisoners / prisoners serving a custodial sentence

Accommodating a remand prisoner in the same unit with a prisoner serving a custodial sentence is illegal. As a rule, remand prisoners should, in accordance with the Imprisonment Act, be placed in a different unit than prisoners serving a sentence. At the moment, this requirement is not being realised in several prisons. Many remand prisoners are placed even in the same cell with prisoners serving a sentence. For example, many female remand prisoners are subjected to this.

The number of under-aged prisoners is small (less than ten). In consequence, they have no facilities of their own and are placed in the same ward with grown-up prisoners.

Treatment of foreign prisoners. For example:

- giving information to foreign prisoners and the staff's communication with them is problematic. In consequence, a prisoner's awareness regarding his/her rights and responsibilities is insufficient
- interpretation services are not used enough.

Intervention in cases of radicalisation.

8. Psychiatric patients

What are the measures for avoiding mistreatment of a psychiatric patient? For example:

- unlike in social care, the staff in health care has no statutory obligation to inform of mistreatment
- the Ombudsman has recommended the health care officials to adopt practices and methods preventing mistreatment. Reporting instances of mistreatment should be made known to every staff member.

Reducing the use of restrictive measures. Monitoring the use of restrictive measures has not always been organised by psychiatric unit nor has plans for reducing restrictive measures been made.

Guardianship for psychiatric patients has not always been organised.

On behalf of the Parliamentary Ombudsman of Finland / the Finnish NPM

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This document has been approved electronically and therefore it is not signed by hand.