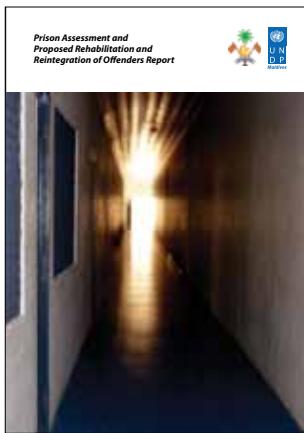


# ***Prison Assessment and Proposed Rehabilitation and Reintegration of Offenders Report***





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**Cover Page** “Light at the End of the Tunnel”, Naaz Aminath

**Photos Credits:** Naaz Aminath

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# ***Prison Assessment and Proposed Rehabilitation and Reintegration of Offenders Report***



*A joint publication of  
the Government of Maldives and the United Nations Development Programme*

## **List of Abbreviations**

AGO	Attorney General's Office
ATU	Academic Training Unit
DPRS	Department of Penitentiary and Rehabilitation Services
HRCM	Human Rights Commission of the Maldives
IRP	Individualized Rehabilitation Plan
MoHA	Ministry of Home Affairs
MTCC	Maldives Transport and Contracting Company Plc
PGO	Prosecutor General's Office
RSA	Rapid Situation Analysis
SOP	Standard Operating Procedure
STO	State Trading Organization Plc
SWAD	Society for Women against Drugs
TOR	Terms of Reference
VTU	Vocational Training Unit

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## **Foreword**

*The Report on Prison Assessment and Proposed Rehabilitation and Reintegration of Offenders is the first of its kind in the country, conducted with the support of United Nations Development Programme (UNDP) under the Protecting Human Rights and Promoting Access to Justice Project.*

*This Assessment provides comprehensive information to assist in designing the support framework needed to create the foundation for a human rights based approach to the penal system of Maldives.*

*The Assessment also provides policy recommendations to guide the Maldives Justice Sector and, in particular, the penal system. The Assessment will further assist in recognizing necessary interventions to address the gaps identified in the penal system.*

*I would like to thank the Department of Penitentiary and Rehabilitation Services (DPRS) and UNDP for conducting this comprehensive Assessment and providing valuable recommendations. I hope that the findings and recommendations will serve as a planning tool to reform the criminal justice system and Penal system of Maldives.*



*Hassan Afeef  
Minister for Home Affairs*

## Executive Summary

This report is based on a project carried out at the request of the Ministry of Home Affairs to help develop a mechanism for rehabilitation and reintegration of offenders. It focuses on reforming the penal system to reduce the number of offenders and re-offenders; and to implement targeted rehabilitation programs prior to their reintegration into the community.

In the course of the consultancy, key stakeholders were interviewed (**see Appendix A**), and numerous background materials were reviewed (**see Appendix B**).

The consultancy was divided into 3 phases. Phase 1 included a Rapid Situation Analysis (RSA) and a desk review of the current penal system in Maldives. Phase 2 involved consultations with relevant stakeholders, while Phase 3 comprised the development of a mechanism for prison rehabilitation and reintegration based on best practice, including recommendations to strengthen the penal system.

**PHASE 1-** Based on the desk review, it was evident that the existing legislative framework and the current penal system does not support the human rights guaranteed under the Constitution, nor it is compatible with best practices outlined in the UN Standard Minimum Rules on Treatment of Prisoners.

The most striking results of the RSA are the average prisoner's profile which read as:

- ✓ Male, age 30 years or under,
- ✓ Was employed prior to being convicted (83.3%),
- ✓ Education level below O'level (72%),
- ✓ Single (47.9%),
- ✓ No children of their own (58.1 %),
- ✓ Mostly on drug convictions, particularly for the usage and possession of small quantities (66.0%),
- ✓ Majority had one or both parents at the time of the offence (90.1%),
- ✓ Family problems are one of the major causes of offending (28.8%),
- ✓ Mostly returned to prison for a drug offence (52.7%),
- ✓ Most abused drugs include heroin (69.1%) and cannabis (63.3%),

**PHASE 2-** Key issues identified during the consultation phase includes, the lack of criminal legislative framework to support rehabilitation and reintegrations programs; allegations of corruption and political influence across all institutions; poor infrastructure of prisons; and lack of budget and human resources to conduct rehabilitation and reintegrations programs.

**PHASE 3-** The proposed mechanism and pathway for the prison rehabilitation and reintegration includes:

Stage 1, conduct screening/assessment & orientation to assess a prisoner's psychological profile, medical history, criminal history as well as to ensure prisoner receives adequate orientation of prison rules and guidelines;

Stage 2, establish rehabilitation unit to ensure each individual prisoner is offered and assigned appropriate rehabilitation program;

Stage 3, establish a prison industry to provide paid employment to all eligible prisoners;

Stage 4, conduct reintegration programs to ensure parolees or those who have completed their sentence are ready to be reintegrated into the community;

Stage 5, establish half-way houses, drop-in centres and employment assistance program to ensure offenders/prisoners receive after care once they have been reintegrated into the community to minimize re-offending behaviors;

## Summary Recommendations

1. De-criminalize the offence of drug usage and propose mandatory rehabilitation, provided that the offender has no other criminal charges based on their criminal history.
2. Establish a restorative justice program to minimize offenders being incarcerated for minor offences.
3. Review and pass the Penal Code, Criminal Procedure Code, Evidence Bill, Drugs Bill and the Prison and Parole Bill as a matter of urgency. The draft Prison and Parole Bill must be reviewed in conjunction with other pending Bills such as Criminal Procedure Code, Penal Code and Evidence Bill. Once these Bills are endorsed, the existing local orders and prison rules and procedures must be amended accordingly. In addition to the above, parole and clemency guidelines as well as the President's pardon guidelines should also be reviewed and amended accordingly.  
  
It is also recommended that a Mental Health Act is developed to address the rights of offender with a mental illness or a mental disability.
4. Establish rehabilitation programs in prisons. The rehabilitation programs should commence from the day of incarceration and should be developed from a rehabilitation perspective. Programs should have a reward system and a balance of new and existing resources need to be considered when developing the program with a clear focus on drug rehabilitation. Rehabilitation programs in prisons should be voluntary except for the Prison Drug Treatment Program period.
5. Establish a prison industry. Prison industry could be either owned and/or operated by the government or private companies. The industry could be linked with private businesses, in particular, resorts or government entities such as STO, MTCC, Thilafushi etc.
6. Strengthen record keeping and the database maintained by DPRS. DPRS will require keeping adequate arrest and release data/ re-offender's data in a properly managed database as well as proper data on escaped and escapees. The inclusion of collecting fingerprints of offenders could also be effective for monitoring. DPRS should develop and implement a comprehensive prisoner file; review and develop SOPs and guidelines for the staff and the prisoners; and compile and employ a procedural manual for the prison management.
7. Strengthen collaboration and information sharing between MPS, PGO, Criminal Court, DPRS, the Parole Board and the Clemency Board. Ministry of Health should also be an integral part of the penal system.
8. Strengthen the infrastructure and capacity building of prison staff and management. As part of the infrastructure strengthening, security of prisons must be strengthened and prisons should comply with UN Standard Minimum Rules for the Treatment of Prisoners.

## ***Background***

*"The September 2003" incident (involving the death of a prisoner in Maafushi Prison) provided the catalyst for a number of responses and actions including the establishment of the Department of Penitentiary and Rehabilitation Services (DPRS). The DPRS functions under Ministry of Home Affairs (MoHA) and has formal responsibility of running Maafushi Prison in K. Maafushi, Asseyri Prison in K. Himmefushi, Malé Prison and Remand in Malé.*

*Following the 2003 incident, much effort has been put into the development and reform of criminal justice system of Maldives (Harding & Morgan 2004). Most notable among these are the establishment of the Human Rights Commission of Maldives (HRCM) and the Ratification of a new constitution on 7 August 2008 which adopts a bill of rights under Chapter II. Other proposed reforms for the criminal legislative framework include the pending Penal Code (by Paul Robinson 2004), Criminal Procedure Code, Evidence Bill, Prison & Parole Bill and Drugs Bill.*

## **Chapter 1**

### ***Situation Analysis and desk review***

In the course of the consultancy relevant stakeholders were interviewed (see Appendix A) and numerous documents were reviewed (see Appendix B). However, limited formal data is available with regards to incarcerated offenders or the existing penal system.

As a result, Rapid Situation Analysis of the prison population and assessment of the existing prisons was conducted to obtain a comprehensive picture in order to capture details of offences committed, sentences imposed, demography, and social history, background of the offender and rehabilitation programs in prisons.

## **Chapter 2**

### ***Rapid Situation Analysis of the Prison population and Assessment of the current penal system***

The RSA attempted to obtain further understanding of offender behavior in the country to develop appropriate interventions to be applied by the relevant authorities.

#### ***2.1 Objectives of the RSA***

1. To examine the factors which led to offending - extent, nature and patterns of offending;
2. To evaluate the extent of drug use and other high-risk behaviors across the incarcerated population in Maldives;
3. To explore the existing treatment, rehabilitation and reintegration programs and to propose alternative pathways for the rehabilitation of prisoners;

#### ***2.2 Methodology***

RSA methodology uses multiple indicators and data sources, including both quantitative and qualitative data, and allows utilization of existing data. Data triangulation is used for verification and to crosscheck of conclusions to avoid subjective biases about the current situation.



*Consultation meeting with prisoners - Asseyri prison Himmafushi*

## 2.3 Preparation for the RSA

Three questionnaires were designed for:

- Incarcerated offenders who have already been sentenced;
- Pre-trial detainees; and
- Foreign prisoners<sup>1</sup>

Overall the questionnaires attempted to capture - history of crime, reasons for offending, socio-demographic factors, history, pattern and cause of drug use, sexual practices within the prison, health-related problems, legal problems and attitude towards participating in a prison rehabilitation program.

## 2.4 Types of data collected

Type of data collected	Institution		Number Present	Number of Foreigners	Number of Refusals	Total Number of Respondents
Primary Respondent Interviews	Maafushi Prison	Unit 2 (Maximum Security)	70	0	25	45
		Unit 5 (Females)	36	4	8	28
		Unit 9	40	0	11	29
		Unit 10 (Maximum Security)	29	0	12	17
		Unit 11 (Maximum Security)	101	1	80	21
		Unit 12	154	23	42	112
		Unit 13	56	0	12	44
	Malé Prison		154	0	21	134
	Malé Remand		54	0	12	42
	Asseyri Prison		124	17	20	104
	<b>Total</b>		<b>818</b>	<b>45</b>	<b>243</b>	<b>576 (70.42%)</b>
	Dhoonidhu Detention Centre		198	0	174	24
<b>Total</b>			<b>1011</b>		<b>417</b>	

N.B.

Among the primary respondents, 417 refused to participate, although they all took part in the information meeting about the study.

Primary data was gathered from the entire prison population between 24 January and 3 February 2011. Secondary data for 2005 to 2010 was collected from MPS, AGO (prior to November 2008 AGO was responsible for prosecution), PGO, Criminal Court and DPRS.

<sup>1</sup> It was noted that some interviewees had very poor linguistic skills, either in English or Dhivehi

## 2.5 Data Entry and Data Analysis

The following section provides an analysis of the information which was provided by (60%) of the prison population as of 3rd February 2011<sup>2</sup>.

Age	The mean age (n=528) is 30.5 years. Age range lies between 18 and 75.
Employment	440 (83.3%) Majority of offenders have been employed in the past 302 (57.1%) without employment for at least 1 year or more 113 (21.4%) without employment for over 2 years 140 (26.5%) without employment for 5 years or more 239 (45.4%) were sentenced prior to August 2008 270 (51.8%) of the offenders were sentenced on August 2008 or after
Gender	504 (95.5%) are males and 24 (4.5%) are females
Education	43 (8.1%) are illiterate 380 (72%) have educational standard below O/Level, 215 (40.7%) below grade 7 165 (31.2%) between grade 8 and grade 10.
Marital Status	253 (47.9%) Majority of the respondents are single 17 (22.2%) are married 114 (21.6%) are divorced 9 (1.7%) are separated 2 (.04%) are widowed
Children	307(58.1%) do not have children
Family background and living arrangements	A majority 476 (90.1%) of the offenders had one 177 (33.5%) or both 299 (56.6%) of their parents alive at the time of their arrest, 145 (27.5%) reported that their parents were divorced 362 (68.6 %) were living with their parents prior to imprisonment 52 (9.8%) of offenders' were living with their guardian 66 (12.5%) were living with their spouse prior to imprisonment
First offence	First offence has been committed as early as 8 years of age (note this applies to prisoners who were convicted prior to August 2008). Some were sent to prison at the age 12 and somehow managed to find themselves back in the system
Re-offenders	278 (52.7%) say they returned to the prison for a drug related-offence 54 (10.2%) say they returned to the prison for a sexual related-offence 72 (13.6%) say they returned to the prison for a criminal offence against a person
History of Drug use	78.6% of the offenders say they have spent their lifetime using and abusing drugs
Drug use in the prison	133 (25.2%) of the respondents say injecting materials are available inside the prison 151 (28.6%) of the respondents say they use drugs inside the prison
Sexual behavior in prisons	11 (2.1%) of the respondents say they have engaged in sexual behavior inside the prison 5 (0.9%) of them say they have engaged in sexual behavior with consent 158 (29.9%) say they have been screened for HIV/AIDS/Sexually Transmitted Diseases (STD's)

<sup>2</sup> All data entered and analyzed on SPSS version 16.

Medical services in prison	496(93.9%) say that the prison's medical services are not satisfactory
Current rehabilitation programs	495 (93.8%) say that there are no prison rehabilitation program currently available
Other issues raised	<ul style="list-style-type: none"> <li>• Lack of structured programs</li> <li>• Lack of segregation, availability of drugs inside the prison, use of torture, and inhumane treatment</li> <li>• Discrimination, in particular towards the foreign prisoners.</li> <li>• Re-occurring stories about politicians giving them false hope about their release as well as ensuring their participation in protests and riots.</li> </ul>

## 2.6 Result of the RSA

Tables 2 to 8 will provide the results of RSA

**Table 2**

Offences For Which Currently Serving a Sentence	Frequency	Percent (%)
No response	15	2.8
Drug offence (possession, use, sale, use and sale, trafficking)	348	66.0
Offence against person (assault, battery, false imprisonment, kidnapping, sexual assault)	44	8.3
Homicide crimes (murder, manslaughter, negligent homicide)	10	1.9
Crimes against property (arson, blackmail, burglary, embezzlement, extortion, receiving stolen property, robbery, theft)	89	16.9
Crimes against justice (perjury, perverting the course of justice, obstruction of justice)	19	3.6
Inchoate offence(attempt, conspiracy, solicitation)	1	0.2

**Table 3**

Length of Current Sentence	Frequency	Percent (%)
Less than 6 months	8	1.5
Between 6 and 12 months	14	2.7
Between 1 to 5 years	111	21.1
Between 5 to 10 years	98	18.6
Between 10 to 20 years	107	20.3
Between 20 to 25 years	83	15.7
25 years and more	90	17.1

**Table 4**

<b>First Offence Type</b>	<b>Frequency</b>	<b>Percent (%)</b>
Drug offence (possession, use, sale, use and sale, trafficking)	231	44.1
Offence against person (assault, battery, false imprisonment, kidnapping, sexual assault)	54	10.3
Homicide crimes (murder, manslaughter, negligent homicide)	7	1.3
Crimes against property (arson, blackmail, burglary, embezzlement, extortion, receiving stolen property, robbery, theft)	82	15.6
Crimes against justice (perjury, perverting the course of justice, obstruction of justice)	21	4.0
Inchoate offence(attempt, conspiracy, solicitation)	5	1.0
Traffic Problem	16	3.1
Others, specify	7	1.3

**Table 5**

<b>Perceived causes for offending</b>	<b>Frequency</b>	<b>Percent (%)</b>
Academic problems	152	28.8
Family problems	152	28.8
Drug Use	151	28.6
Peer pressure	150	28.4
Gang-related pressures to offend	32	6.1
Poverty	24	4.5
Underlying psychiatric problems	19	3.6
Anger problems	15	2.8
Experimentation	12	2.3
More than one of the above	52	9.8

**Table 6**

<b>Types of drug offence</b>	<b>Frequency</b>	<b>Percent (%)</b>
Drug possession	5	0.9
Drug use	372	70.5
Drug use and sale	42	8.0
Drug sale	6	1.1
Drug trafficking	1	0.2
Drug - other	2	0.4
Drug use and trafficking	8	1.5
3 or more of the above	4	0.8

**Table 7**

<b>Types of drugs abused</b>	<b>Frequency</b>	<b>Percent (%)</b>
Heroin	365	69.1
Cannabis	297	63.3
Alcohol	253	47.9
Morphine	123	30.5
Ecstasy	37	7.0
Cocaine	36	6.8
Codeine	27	5.1
Inhalants /solvents	21	4.0
Amphetamine	14	2.7
Meta amphetamine	11	2.1
Catemine	11	2.1
Eau de cologne	10	1.9
Poly drug abuse (2 or more types of drugs)	314	60

**Table 8**

<b>Types of rehabilitation program suggested from the current prison population</b>	<b>Frequency</b>	<b>Percent (%)</b>
Religious Education	456	86.4
Counseling Therapies	402	76.1
Life Skills	398	75.1
Learn a Vocational Skill	385	72.9
Psychiatric Treatment	368	69.7
Health Awareness Programs	367	69.5
Family Counseling	366	69.3
Learn how to read the Holy Quran	361	68.4
Learn to pray	306	58.0
Prison Drug Treatment Program	277	52.5
Study for O/Levels	273	51.7
Study for A/Levels	265	50.2

## **2.7 Profiles of Prisoners**

As can be seen from the tables below, an average profile reads as:

- ✓ Male, age 30 years or under,
- ✓ Was employed prior to being convicted (83.3%),
- ✓ Education level below O'level (72%),
- ✓ Single (47.9%),
- ✓ No children of their own (58.1 %),
- ✓ Mostly on drug convictions, particularly for the usage and possession of small quantities (66.0%)
- ✓ Majority had one or both parents at the time of the offence (90.1%),
- ✓ Family problems are one of the major causes of offending (28.8%)
- ✓ Mostly returned to prison for a drug offence (52.7%)
- ✓ Most abused drugs include heroin (69.1%) and cannabis (63.3%)

## 2.8 Current prison system as at February 2011 (Dhoonidhoo Detention Centre is not included)

	Malé Prison	Malé Remand	Asseyri Prison	Maafushi Prison
<b>Population</b>	154	51	124 male (18 foreign prisoners)	493 male and 36 female
<b>Staff</b>	82 staff, including 5 female staff. Females are employed to conduct administrative tasks and security only. They are not required to patrol the cells	Only 2 staff at a given shift	36 male staff	219 male staff and 44 female staff
<b>Registration and security of prisoners and visitors</b>	Personal belongings are required to be left in lockers provided at the entrance. Cameras and mobile phones are not allowed beyond the entrance. The metal detector was not functioning on the day of the visit. No pat downs were conducted	Personal belongings are required to be left in lockers provided at the entrance. Cameras and mobile phones are not allowed beyond the entrance. No metal detector and no pat downs	Personal belongings are required to be left in lockers provided at the entrance. Cameras and mobile phones are not allowed beyond the entrance. No metal detector and no pat downs	Personal belongings are required to be left in lockers provided at the entrance. Cameras and mobile phones are not allowed beyond the entrance. No metal detector and no pat downs
<b>Categories of prisoners</b>	No segregation	No segregation	No segregation except the foreigners are kept in a separate sleeping quarter	Females have a separate quarter, but no segregation among them. Male prisoners are categorized based on their behavior rather than offence committed i.e. the male units are divided into maximum and medium
<b>Accommodation</b>	On average a cell is occupied by 4 although some are occupied by 10 prisoners	There are 5 cells. 8 to 10 prisoners house each cell. 4 prisoners are kept in a separate area - 3 who are employed and an elderly prisoner	3 sleeping quarters. First is housed by 64 locals, second quarter housed by 39 locals, and the 3rd quarter housed by the foreigners	On average 2 prisoners per cell although some cells are occupied by 10 prisoners
<b>Personal hygiene</b>	Satisfactory	Satisfactory	Satisfactory	Satisfactory
<b>Food</b>	<ul style="list-style-type: none"> <li>• 5 meals per day: Breakfast, mid-morning snack, lunch, afternoon tea and dinner</li> <li>• Kitchen facilities are not available. Meals are outsourced to a contractor</li> <li>• Prisoners receive individually packed meals</li> </ul>	<ul style="list-style-type: none"> <li>• 5 meals per day: Breakfast, mid-morning snack, lunch, afternoon tea and dinner</li> <li>• Kitchen facilities are not available. Meals are outsourced to a contractor</li> <li>• Prisoners receive individually packed meals</li> </ul>	<ul style="list-style-type: none"> <li>• 5 meals per day: Breakfast, mid-morning snack, lunch, afternoon tea and dinner</li> <li>• Kitchen facilities are not available. Meals are outsourced to a contractor</li> <li>• Prisoners receive buffet style meals</li> </ul>	<ul style="list-style-type: none"> <li>• 5 meals per day: Breakfast, mid-morning snack, lunch, afternoon tea and dinner</li> <li>• Kitchen facilities are available, however meals are outsourced to a contractor</li> <li>• Prisoners receive buffet style meals except for those in Unit 2</li> </ul>

	<b>Malé Prison</b>	<b>Malé Remand</b>	<b>Asseyri Prison</b>	<b>Maafushi Prison</b>
<b>Clothing and bedding</b>	<ul style="list-style-type: none"> <li>Uniforms are not worn inside the prisons, however they are used when prisoners are being transported to Male' for medical treatments and on court dates</li> <li>Mattresses are provided</li> </ul>	<ul style="list-style-type: none"> <li>Uniform are not worn inside the prisons, however they are used when prisoners are being transported to Male' for medical treatments and on court dates</li> <li>Mattresses are provided</li> </ul>	<ul style="list-style-type: none"> <li>Uniforms are not worn inside the prisons, however they are used when prisoners are being transported to Male' for medical treatments and on court dates</li> <li>Mattresses are provided</li> </ul>	<ul style="list-style-type: none"> <li>Uniform are not worn inside the prisons, however they are used when prisoners are being transported to Male' for medical treatments and on court dates</li> <li>Mattresses have not been provided to the Unit 2 prisoners, following the fire in maximum security unit</li> </ul>
<b>Education <sup>3</sup></b>	None	None	None	None
<b>Exercise and sport</b>	No exercise or sport facilities available or allowed. On average prisoners who are not employed may not be allowed out of their cells for as long as 3 months	Prisoner are provided an hour a day to have a walk in the small court yard	Being a minimum security prison, prisoners are allowed to freely walk/exercise within the complex	Female prisoner are allowed to freely walk/exercise within the complex. No exercise or sport facilities available or allowed for male prisoners. On average male prisoners who are not employed may not be allowed out of their cells for as long as 3 months
<b>Employment and work</b>	24 prisoners are in paid jobs	3 prisoners are in paid jobs	160 prisoners are in paid jobs	60 prisoners are in paid jobs
<b>Medical facilities</b>	No medical facilities available in the prison. Hence prisoners are transported to the IGM hospital for medical services	No medical facilities available in the prison. Hence prisoners are transported to the IGM hospital for medical services	No medical facilities available in the prison. Hence prisoners are transported to the IGM hospital for medical services	A non-functional medical facility is present in the prison. Hence prisoners are transported to the IGM hospital for medical services
<b>Privileges</b>	Phone calls, TV rights, canteen services, family visits and the right to work on paid jobs	Phone calls, TV rights, canteen services, family visits and the right to work on paid jobs	Phone calls, TV rights, canteen services, family visits and the right to work on paid jobs	<ul style="list-style-type: none"> <li>Phone calls, TV rights, canteen services, family visits and the right to work on paid jobs</li> <li>Through behavioral probation, prisoners from Unit 2 are given the chance to advance to Unit 13, from there to Unit 9 and finally to Asseyri Prison. However, this practice depends on the availability of cells in each unit and is often not followed</li> </ul>

<sup>3</sup> 19 June 2011, launch of the O'level program for the Maafushi prisoners

	<b>Malé Prison</b>	<b>Malé Remand</b>	<b>Asseyri Prison</b>	<b>Maafushi Prison</b>
<b>Discipline and punishment</b>	<ul style="list-style-type: none"> <li>In the condition where a prisoner breaks the prison rules, their punishment takes the form of eliminated privileges (monthly phone calls, family visits etc)</li> </ul>	<ul style="list-style-type: none"> <li>Prisoners are fairly disciplined in this prison. Their privileges are seldom taken away from them</li> <li>In the condition where a prisoner breaks the prison rules, their punishment takes the form of eliminated privileges (monthly phone calls, family visits etc)</li> </ul>	<ul style="list-style-type: none"> <li>Prisoners are fairly disciplined in this prison. Their privileges are seldom taken away from them. In such cases they could be sent back to Maafushi</li> <li>In the condition where a prisoner breaks the prison rules, their punishment takes the form of eliminated privileges (monthly phone calls, family visits etc)</li> </ul>	<ul style="list-style-type: none"> <li>Few cases of abuse were reported by the prisoners, but they had not been substantiated</li> <li>In the condition where a prisoner breaks the prison rules, their punishment takes the form of eliminated privileges (monthly phone calls, family visits etc)</li> </ul>
<b>Insane and mentally abnormal prisoners</b>	N/A	An elderly prisoner who is unwell is isolated from the rest of the prisoners	N/A	Prisoners are kept in isolation for 7 days or indefinitely. Interviews were conducted for two prisoners kept in complete isolation. One appears to suffer from drug induced psychosis and the other from schizophrenia <sup>4</sup>
<b>Instruments of restraints</b>	When transporting the prisoners they are handcuffed behind their backs	When transporting the prisoners they are handcuffed behind their backs	When transporting the prisoners they are handcuffed behind their backs	When transporting the prisoners they are handcuffed behind their backs As the transportation from Maafushi to the courts and health facilities in Male' could take between 2 to 3 hours, this could be considered as torture. Therefore, alternative methods of restraints are recommended.
<b>Contact with the outside world</b>	<ul style="list-style-type: none"> <li>Prisoners receive two phone calls and one family visit per month</li> <li>Prisoners are allowed to receive and send letters with no restraints</li> </ul>	<ul style="list-style-type: none"> <li>Prisoners receive two phone calls and one family visit per month</li> <li>Prisoners are allowed to receive and send letters with no restraints</li> </ul>	<ul style="list-style-type: none"> <li>Prisoners receive two phone calls and one family visit per month</li> <li>Prisoners are allowed to receive and send letters with no restraints</li> </ul>	<ul style="list-style-type: none"> <li>Prisoners receive two phone calls and one family visit per month</li> <li>Prisoners are allowed to receive and send letters with no restraints</li> </ul>
<b>Books</b>	<ul style="list-style-type: none"> <li>Reading materials are not allowed in the cells except for the Quran. Hence prisoners admitted to smuggling reading materials into the facility</li> </ul>	<ul style="list-style-type: none"> <li>Reading materials are not allowed in their cells except for the Quran. Hence prisoners admitted to smuggling reading materials into the facility</li> </ul>	<ul style="list-style-type: none"> <li>Reading materials are not allowed in their cells except for the Quran. Hence prisoners admitted to smuggling reading materials into the facility</li> <li>There is a "library" facility in the complex</li> </ul>	<ul style="list-style-type: none"> <li>Reading materials are not allowed in their cells except for the Quran. Hence prisoners admitted to smuggling reading materials into the facility</li> <li>There is a "library" facility available in the complex</li> </ul>
<b>Religion</b>	Prisoners can pray inside the cells	Prisoners can pray inside the cells	Prisoners can pray inside the cells	Prisoners can pray inside the cells

<sup>4</sup> The prognosis is only based on the consultants' interview with the two prisoners.

	<b>Malé Prison</b>	<b>Malé Remand</b>	<b>Asseyri Prison</b>	<b>Maafushi Prison</b>
<b>Retention of prisoners property</b>	DPRS retain the prisoner's properties and return them upon release. However, in some cases, the properties will be handed over to their families, prior to their release, as per the prisoner's requests	DPRS retain the prisoner's properties and return them upon release. However, in some cases, the properties will be handed over to their families, prior to their release, as per the prisoner's requests	DPRS retain the prisoner's properties and return them upon release. However, in some cases, the properties will be handed over to their families, prior to their release, as per the prisoner's requests	DPRS retain the prisoner's properties and return them upon release. However, in some cases, the properties will be handed over to their families, prior to their release, as per the prisoner's requests
<b>Information and complaints by prisoners</b>	<ul style="list-style-type: none"> <li>• A form is available for prisoners which can be filled regarding any complaints</li> <li>• Prisoners are allowed to send information/complaints to HRCM, the President of Maldives and the Inspector General at any given time</li> </ul>	<ul style="list-style-type: none"> <li>• A form is available for prisoners which can be filled regarding any complaints</li> <li>• Prisoners are allowed to send information/complaints to HRCM, the President of Maldives and the Inspector General at any given time</li> </ul>	<ul style="list-style-type: none"> <li>• A form is available for prisoners which can be filled regarding any complaints</li> <li>• Prisoners are allowed to send information/complaints to HRCM, the President of Maldives and the Inspector General at any given time</li> </ul>	<ul style="list-style-type: none"> <li>• A form is available for prisoners which can be filled regarding any complaints</li> <li>• Prisoners are allowed to send information/complaints to HRCM, the President of Maldives and the Inspector General at any given time</li> </ul>
<b>Notification of death, illness, transfer of prisons etc</b>	<p><i>Death</i> - The family, Minister and Police are immediately informed</p> <p><i>Illness</i> - The family is informed in cases where they are admitted to the hospital</p> <p><i>Transfer</i> - the prisoner will be allowed to inform the family within 24 hours of transfer, through a phone call</p>	<p><i>Death</i> - The family, Minister and Police are immediately informed</p> <p><i>Illness</i> - The family is informed in cases where they are admitted to the hospital</p> <p><i>Transfer</i> - the prisoner will be allowed to inform the family within 24 hours of transfer, through a phone call</p>	<p><i>Death</i> - The family, Minister and Police are immediately informed</p> <p><i>Illness</i> - The family is informed in cases where they are admitted to the hospital</p> <p><i>Transfer</i> - the prisoner will be allowed to inform the family within 24 hours of transfer, through a phone call</p>	<p><i>Death</i> - The family, Minister and Police are immediately informed</p> <p><i>Illness</i> - The family is informed in cases where they are admitted to the hospital</p> <p><i>Transfer</i> - the prisoner will be allowed to inform the family within 24 hours of transfer, through a phone call</p>
<b>Removal of prisoners</b>	Prisoners are required to wear a uniform during transfers between prisons and other institutions	Prisoners are required to wear a uniform during transfers between prisons and other institutions	Prisoners are required to wear a uniform during transfers between prisons and other institutions	<ul style="list-style-type: none"> <li>• Prisoners are required to wear a uniform during transfers between prisons and other institutions.</li> <li>• When transporting prisoners from Maafushi it may not be acceptable for them to be handcuffed behind their backs. The boat ride usually takes 2 to 3 hours. Therefore alternative methods of restraints are recommended</li> </ul>
<b>Inspection</b>	<ul style="list-style-type: none"> <li>• An Inspector General is appointed for the inspection of penal institutions</li> <li>• System inspection is carried out by the Inspector General once every 3 months</li> </ul>	<ul style="list-style-type: none"> <li>• An Inspector General is appointed for the inspection of penal institutions</li> <li>• System inspection is carried out by the Inspector General once every 3 months</li> </ul>	<ul style="list-style-type: none"> <li>• An Inspector General is appointed for the inspection of penal institutions</li> <li>• System inspection is carried out by the Inspector General once every 3 months</li> </ul>	<ul style="list-style-type: none"> <li>• An Inspector General is appointed for the inspection of penal institutions</li> <li>• System inspection is carried out by the Inspector General once every 3 months</li> </ul>

	<b>Malé Prison</b>	<b>Malé Remand</b>	<b>Asseyri Prison</b>	<b>Maafushi Prison</b>
<b>Institutional personnel</b>	Lacks qualified personnel	Lacks qualified personnel	Lacks qualified personnel	Lacks qualified personnel
<b>Treatment</b>	Lacks adequate treatment such as education, vocational guidance, drug rehabilitation, physical and mental capacities and aptitudes etc	Lacks adequate treatment such as education, vocational guidance, physical and mental capacities and aptitudes etc	Lacks adequate treatment such as education, vocational guidance, physical and mental capacities and aptitudes etc	Lacks adequate treatment such as education, vocational guidance, physical and mental capacities and aptitudes etc
<b>Civil prisoners<sup>5</sup></b>	One civil prisoner was present on the day of the visit, who was imprisoned for contempt of court. The prisoner was kept in isolation from the area of the main cells	No segregation	No segregation	No segregation



*Infamous U2 - Maafushi Prison*

<sup>5</sup> The common belief is once they are sent to prison they hold the same status as a criminal offender, hence segregation of civil prisoners is not often practiced in Maldives

## **Chapter 3**

### ***Legal, Financial, Infrastructure and Human Resource Issues with the Existing Penal System***

#### **3.1 Legal Issues**

- a. Based on the RSA, 60% of the prison population is being imprisoned for drug offences. Other offending behaviors are minimal in number, although they should not be dismissed as groups requiring potential interventions (those imprisoned for violent offending and for sex offending). In attempting to address the burgeoning prison population, it seems necessary to focus the legislative reform on the offending behavior that brings the majority of prisoners into the system, i.e. drug offenders.
- b. Since the adoption of the new Constitution in August 2008, the Maldives criminal justice system changed from being confession-based to evidence-based, thus strengthening of the rights of the accused. New legislations such as the Penal Code, Criminal Procedure Code, Evidence Act, Drugs Bill, Prison and Parole Bill were presumed to be enacted in order to comply with the new Constitutional framework. However, after 3 years, the said legislation has still not been passed. As a result, the existing legislative framework does not support the human rights guaranteed under the Constitution nor is it compatible with best practices: including the UN Standard Minimum Rules on Treatment of Prisoners.
- c. Information sharing, storing and collecting is in dire need of reform. The data collected from the AGO, PGO, MPS, Criminal Court and the DPRS reveals that, the method in which criminal databases are maintained and the manner in which criminal data is reported differ significantly and are thus deeply flawed. For example, DPRS lacks an adequately maintained database which can provide the information on the offender, to help them categorize and design a reintegration or rehabilitation program. While limited information is currently available with reference to sentences given to the prisoners, the baseline information about the prisoners itself, has to be generated manually by processing information from the existing databases within DPRS.
  - i. Inadequate communication and corroboration between the penal system institutions namely MPS, PGO, Judiciary and DPRS, is another major cause of concern caused by the lack of policies and procedures. Convicted offenders often appear to have withdrawn from the penal system and are seen to be living in the community as free citizens.
  - ii. In addition, prisons lack adequate documentation of prisoners' records including their medical files.
- d. With the existing framework, oversights have been noticed in the DPRS procedure that is followed when bringing offenders into the community (for family visits/ to deliver their baby/ for medical purposes or for court dates). Currently this process is facilitating offenders to re-offend/ leave the country or abscond and live as fugitives.
- e. DPRS lacks proper policies and procedures to adequately assess prisoners' behavior inside the prisons. Hence, this creates inequality and promotes unjust rulings during parole and clemency processes.
- f. The existing parole system lacks properly formulated procedures, transparency as well as adequate monitoring of parolees.
- g. Reported allegations of corruption and political influence across all institutions as well as the lack of community support for reintegration of prisoners are major concerns of the existing penal system.

### **3.2 Financial Issues to sustain and conduct rehabilitation programs in prisons**

- a. Currently there are no adequate or sustainable budgets to conduct rehabilitation programs in prisons.
- b. At present the income received from selling items produced by the prisoners enters the state budget as per the Budget Act. There is no revolving fund per se which specifies that, in conditions where the required budget is not allocated in a said year, the activities conducted in the previous year, cannot be sustained.



Medical Centre (top) and Unit 2 - Maafushi Prison



Security fence - Maafushi Prison

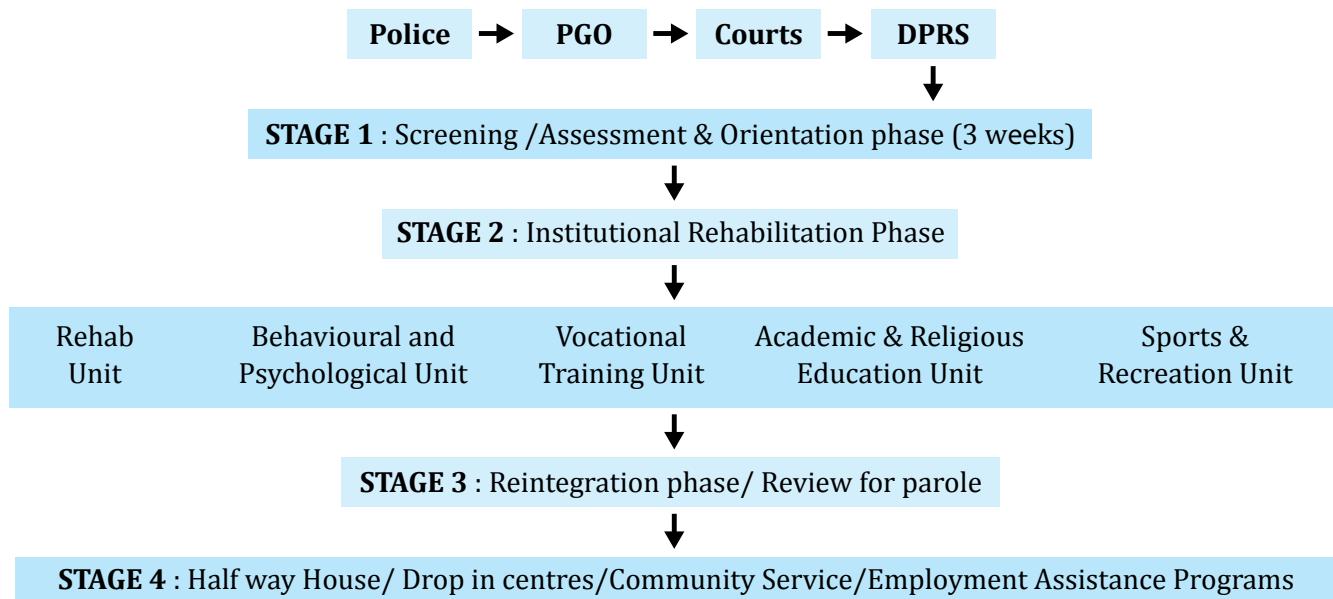
### **3.3 Infrastructure and qualified personnel**

- a. The current infrastructure of prisons is inadequate with regards to the maintenance of minimum standards. Hence, it lacks qualified personnel to manage the prisons and conduct adequate rehabilitation programs for the prisoners.
- b. Currently, there is no prison industry in Maldives, although some of the handcrafts by prisoners are sold in an exhibition once or twice a year. The industrial area in Maafushi is in dire need of renovation and purchasing of equipment, following the fire in 2009. Malé Prison and Malé Remand are not built to conduct prison-based activities. However, Asseyri Prison currently runs a very successful agricultural program which could become a part of the prison industry programs.
- c. Lack of adequate security screening in prisons is another major cause for concern. Drug use and mobile phones are commonly seen inside the prison cells as a result of this. In addition, due to the lack of proper medical facilities available in prisons, an average of 10 prisoners are brought to Malé every day (except on Fridays) enabling them to abscond or smuggle drugs and mobile phones into the prison facility.

## Chapter 4

### **Recommended Pathway for the Prison**

Based on the RSA the following pathway is proposed for the prison rehabilitation in Maldives.



*The following section will provide details for Stage 1 and 2. Please note the time period cannot be envisaged for Stages 2, 3, 4, 5 as it will depend on the individual assessment during Stage 1.*

*Details for Stages 3, 4 and 5 will depend on the establishment of a prison industry and relevant legislative amendments as well as the establishment of new facilities such as the half way house, drop in centers etc.*

### **STAGE 1 : Screening /Assessment & Orientation phase (3 weeks)**

Duration of Stage 1:- 21 days from the date of entry

- All offenders sentenced to the prison would be screened and a mental status examination will be carried out by the physician, at the time of entry to the prison.
- The psychological profile of the offender would be prepared by a clinical psychologist if recommended by the physician. The main objective of this profile would be to support the prisoner with procedures mentioned in the following point:
- Inform the prisoners of their sentence, assist with appeals, and familiarize them with rules and regulations of the prison.

#### **1. Initial Screening (Day 1- 3)**

An initial screening of the offender would be made using Assessment Booklet 1.

*This booklet would assess the following.*

- Demographics
- Family history
- Academic history/screening
- Employment history/screening
- Developmental history
- Skills assessment
- Hobbies/interests/sports/recreational activities
- Criminal history (with offenders perspective)
- Religious orientation/assessment
- Psychological profiling with mental status examination
- Physical assessment and screening
- Legal history/collecting all records with reference to legal history

## **2. Specialist Assessments (Day 3-14)**

All the specialist screenings would be completed, necessary reports would be obtained from the specialists and Assessment Booklet 2 would be completed.

## **3. Orientation Period (Day 14-21)**

During this period the offender would be obliged to go through the **Orientation training manual**. This training manual would include the rules and regulations of the prison system (all the local orders), the programs available in the prison, incentives, parole programs, beneficial law articles, human rights policies etc. During the orientation period, it would be handed over to the offender who would then, go through it. If required, a prison officer would do a reading with the offender and clarify any doubts.

## **4. Sharing of the Individual Rehabilitation Plan with the Offender (Day 21)**

Formulating the individual pathway for the offender based on the assessment and sharing this information with the offender.

## **STAGE 2: Institutional Rehabilitation Phase**

### **A. The Rehabilitation Unit**

Establish a Rehabilitation unit. This Unit will be responsible for making Individualized Rehabilitation Plans (IRP) for substance abuse problems as well ensure all incarcerated offenders are offered/assigned proper rehabilitation programs according to the needs of the prisoner.

For substance abuse offenders, this Unit will ensure that:

- Prison Drug Treatment Program commences immediately, at least for 4 weeks;
  - During first 2 weeks, of the drug treatment program, prisoners with substance abuse must be kept separate from the general population. Same rules will apply to prisoners who have and are being treated for any transmitted diseases;

This Unit will also ensure that:

- They are offered employment, once prisoners are able join the general population. Following the Prison Drug Treatment Program and upon joining the general population, the prisoners do the following in order to achieve the goals in their IRP:
  - Enroll and complete a life skills program which would include attending at least 3 life skill modules classes, as recommended on the individualized rehabilitation plan;
  - Attend AA or NA meetings regularly;
  - Attend the required number of individual counseling sessions;
  - Attend at least 80% of the thematic groups sessions as specified in the individualized rehabilitation plan;
  - Complete 80% of the self development program;
  - Complete 80% of the health awareness programs;
  - Complete 40% of the family counseling program;
  - Complete 80% of the academic, religious, vocational skills training, or sports and recreational program.

## B. Behavioural and Psychological Services Unit

Establish a Behavioral and Psychological Unit for carrying out several behavior modification activities. The main objective of the services would be to address the psychological needs of all offenders who are undergoing prison based rehabilitation during their incarceration.

The programs carried out by the unit would be as follows:

- Behavioural, Psychiatric and psychological screening and risk assessment of all the offenders
- Counselling Therapies
- Life Skills
- Narcotics Anonymous
- Health Awareness Programs
- Family Counselling
- SMART Prisons Program
- Group Counselling (Thematic)
- Self Development Workshops
- Parole Program



All offenders would be screened and a mental status examination carried out, by the psychiatrist, at the time of entry to the prison. The psychological profile of the offender would then be prepared by the counselors in consultation with the psychiatrist and the clinical psychologist.

## C. Vocational Training Unit

Establish a Vocational Training Unit (VTU) to train each incarcerated prisoner in at least one vocational skill, prior to their release into the community. It is expected that at any given time 75% of the prison population would be attached to the VTU and would be undergoing one of the trainings offered by the VTU.

The proposed method to set up the VTU are as follows:-

**Stage 1** - Training of Trainers for Prisoners: In order to cater for those prisoners who are interested, TOT could be conducted to run the unit in different vocational areas. Once they obtain a certificate in the specified vocational skill, from a recognized institution such as a polytechnic, they could commence running courses for their fellow inmates.

**Stage 2** - The DPRS would need to get a memorandum of understanding signed between the institutes willing to offer this service. These training institutions would form affiliations with the prison academy –(all trainings would be conducted from the prison academy and their certificates would be issued by the authorized government recognized agency). Each prisoner will go through the training and get an approved skill level certificate in at least one type of skill.

**Stage 3** - Training for experience: Once the prisoner has acquired a qualification (foreigners and women included) they will be qualified to apply for a job within the prison industry. The first 3 to 6 months after the qualification they would be required to remain as trainees and would be on voluntary employment. Once they have completed this stage they can be employed with salary in the prison industry.



Prisoner at work - Maafushi Prison



Asseyri Prison - Himmafushi



Prisoners at work - Asseyri Prison, Himmafushi



*Prisoners at work - Asseyri Prison, Himmafushi*

*Asseyri Prison, Himmafushi*

#### **D. Academic, including religious, education unit**

Establish an Academic Training Unit (ATU) in the prisons to ensure that each incarcerated prisoner has access to education and has reached at least a minimum education level and minimum level in religious education prior to their release into the community. Recommended programs may include:

- Basic literacy classes - Dhivehi, English and Maths
- Grade 1 to 7 - English, Maths, Dhivehi
- Grade 8 to 10 and prepare for O/Level - they can choose from the streams for economics, commerce, Accounts, Maths, English, Dhivehi, and Islam
- Computing Skills, Basic and Advance skills
- Reading and writing in Arabic, learning to pray, fundamentals of Islam(Wulu, Hinaa thohiru vun)
- Learning to read and complete reciting of the Holy Quran
- Study Islamic studies curriculum, from grade 1 to 7; Grade 8 to 10 and prepare for O/Level
- Complete the workshops on “Religion as a way out from offending”(To develop a curriculum and complete the classes)

#### **E. Sports and recreation unit**

Establish a sports and recreation unit in the prisons. Following the establishment of the Unit, it would be used to organize outdoor sports activities (such as football, volleyball basketball etc) and indoor sports activities (such as carrom, chess, scrabble, cards, aerobics classes etc.)

## Chapter 5

### ***Recommendations for the reform of the Maldives Penal System***

1. De-criminalize the offence of drug usage and propose mandatory rehabilitation, provided that the offender has no other criminal charges, as well as based on their criminal history.
2. Establish an effective restorative justice program which could be ideal to combat juveniles, or youth offenders, in order to minimize them from being incarcerated for minor offences.
3. Review and pass the Penal Code, Criminal Procedure Code, Evidence Bill, Drugs Bill and the Prison and Parole Bill as a matter of urgency. The draft Prison and Parole Bill must be reviewed in conjunction with other pending Bills such as Criminal Procedure Code, Penal Code and Evidence Bill. Once these Bills are endorsed, the existing local orders and prison rules and procedures must be amended accordingly. In addition to the above, parole and clemency guidelines as well as the President's pardon guidelines should also be reviewed and amended accordingly.

It is further recommended that a Mental Act is developed to address the rights of offenders with a psychiatric illness or a mental disability.

4. Establish rehabilitation programs in prisons. These programs should commence from the day of incarceration of the offenders. The rehabilitation program should be developed from a rehabilitative perspective. A balance of available and existing resources need to be considered when developing the program. Any prison rehabilitation program needs to have a target on drug rehabilitation. Programs in prison should be voluntary except for the Prison Drug Treatment Program period. Programs should also have a rewarding system.
5. Establish a prison industry. Prison industry could be either owned and operated by the government or could be owned as a private non-for-profit company. The industry could be linked with private businesses in particular resorts or government entities such as STO, MTCC, Thilafushi etc.

All prisoners will be given the opportunity to participate based on their behavior and necessary requirements. Initially, prisoners will need to work on a voluntary basis for 3-6 months prior to applying for paid jobs. Once the prisoners have successfully completed the trainee period of 3-6 months, they can apply for a paid job in the prison industry. Salary for paid jobs will be not less than MRF2000 per month.

6. When prisoners are being transported outside the prison, for appearances at court, to medical facilities, etc, it is recommended that the prisoners wear the handcuffs augmented with a belly chain. In this type of arrangement, a metal/ leather, or canvas belt is attached to the waist, sometimes with a locking mechanism. The handcuffs are secured to the belly chain and the prisoner's hands are kept at waist level. This allows a relative degree of comfort for the prisoner during prolonged internment in the securing device, while providing a greater degree of restriction to movement.
7. Strengthen the database and documentation of records maintained by DPRS. DPRS will need to keep adequate data on arrests and releases, re-offenders and the escaped and escapees in a properly managed database. In addition, the inclusion of the offenders' fingerprints in the system could also be effective for monitoring purposes.
8. Strengthen collaboration and information sharing between MPS, PGO, Criminal Court, DPRS, the Parole Board and the Clemency board. Ministry of Health should also be an integral part of the prisons for the prison management.

9. Review and develop SOPs and guidelines for the staff and the prisoners. Develop a procedural manual for the prison management. The manual should demonstrate:
  - a. The plan of procedural pathway of the offender (e.g. outlines his/her routine beginning from the day they are sentenced until they are released);
  - b. Information Booklets/Handbooks for prisoners. Information booklet and handbooks (are not limited to but) will have the following information on:
    - i. The rules and regulations of the prison system
    - ii. The programs available
    - iii. Incentives
    - iv. Punishments
    - v. Parole programs
10. Strengthen the infrastructure and capacity building of prison staff and management: As part of the infrastructure strengthening, security of prisons must be strengthened and prisons should comply with UN Standard Minimum Rules for the Treatment of Prisoners.

## Appendix A - Stakeholders Interviewed

1. Judiciary
2. Private Practitioners
3. Prosecutor General's Office
4. Attorney General's Office
5. Maldives Police Service
6. Department of Drug Prevention and Rehabilitation Services
7. Department of Penitentiary Rehabilitation Services
8. Ministry of Health, Family and Gender
9. Ministry of Home Affairs
10. Ministry of Finance
11. Narcotics Anonymous of Maldives
12. Society for Women Against Drugs
13. Clemency Board
14. Parole Board
15. Four Parolees

## Appendix B - TOR and documents reviewed

Within the framework of the ongoing democratic process, one of the strategic activities proposed under the United Nations Development Program (UNDP), "Protecting Human Rights and Promoting Access to Justice" Project (A2J) is to set up a mechanism for rehabilitation and reintegration of offenders. The purpose of the mechanism is to foster the reorientation of the penal system in order to reduce the number of offenders and re-offenders and implement targeted rehabilitation programs prior to their re-integration into the community.

In December 2010, UNDP contracted a consultant to compile a comprehensive manual that would include rehabilitation programs devised to encourage behavior modification inside the prison. The Terms of Reference (TOR) are as follows:

- Carry out a situation analysis across Maldives which will include a desk review and best practice;
- Consultation with relevant stakeholders including: Judiciary, Private Practitioners, Prosecutor General's Office (PGO), Attorney General's Office (AGO), Maldives Police Services(MPS), Department of Drug Prevention and Rehabilitation Services (DDPRS), Department of Penitentiary and Rehabilitation Service (DPRS), Ministry of Health, Gender and Family,Ministry of Home Affairs (MoHA), Ministry of Finance, Narcotics Anonymous of Maldives, Society for Women Against Drugs (SWAD), Clemency Board, Parole Board and four parolees.
- Develop a mechanism for prison rehabilitation and reintegration based on best practices. The mechanism should demonstrate;
- The pathway that an offender should accomplish in order to gain parole and opportunity to reintegrate into the community;
- Specific programs that would be carried out from the commencement of incarceration; A tailor-made behavior modification approach taking into consideration the cultural background, existing system at the prisons and types of crimes committed by the offenders;
- Guidelines to follow so as to ensure that each offender is assigned a rehabilitation plan that suits his/her abilities and caters for his/her needs;
- Assessment Formats (E.g.: each offender needs to be assessed in various areas prior to beginning his/her rehabilitation. (e.g.: educational, vocational and behavioral and psychosocial background)

## Addendum to the consultancy

During the course of the first phase, it was identified that formulating the manual for prison management as per the initial TOR would not be possible without the legislative support for reintegration and rehabilitation of offenders. Accordingly, the existing procedures, guidelines, legislation and pending Bills were reviewed:

1. Prison Guidelines (Jalu Gavaidhu);
2. Guidelines to follow when counting the number of prisoners in the jail;
3. Guidelines to follow when family visits;
4. The jail procedure to follow if a prisoner has to be sent off to Malé to attend to an importance cause;
5. Canteen procedure;
6. Guidelines for the use of television in the prison;
7. Rules designating jobs on contract and allowance basis to the prisoners;
8. Search procedures for male and female prisoners;
9. Search procedures to follow when bringing a prisoner to the court;
10. Offenders Record Form;
11. Procedure to follow when transferring a prisoner from one unit to the other;
12. Clemency Act;
13. Parole Guidelines;
14. Dangerous Weapons Act;
15. Criminal Procedure Code (Pending Bill);
16. Penal Code (Pending Bill);
17. Evidence Bill (Pending Bill);
18. Drugs Bill (Pending Bill);
19. Prison and Parole Bill (Pending Bill);
20. Criminal records from the MPS for the period of 2005 to 2010 examined;
21. Prosecution case records from the AGO for the period from 2005 to 2008 examined;
22. Prosecution case records from the PGO for the period from 2008 to 2010 examined;
23. Criminal case records from the Criminal Court for the period of 2005 to 2010 examined;
24. Records held at DPRS examined (due the limited functionality of the DPRS database, DPRS was unable to provide records for the past 5 years);
25. All local orders, rules and regulations maintained by the different prisons, currently managed by the DPRS, (including all other relevant forms which are used to take the history of offenders) examined.

## Other reviewed documents include:

1. HRCM, Report on S.Gan Temporary Jail, Nov 2009
2. HRCM, Report on Malé Jail, May 2009
3. HRCM, Report on Feydhoo Finolhu Low Risk Jail, May 2009
4. HRCM, Report on Drug Rehabilitation Centre, April 2009
5. HRCM, Maafushi Jail Inspection Report, April 2009
6. HRCM, Report on Maafushi Jail, Feb 2009
7. HRCM, Report on HA. Hathifushi, Low Risk Jail, Sept 2008
8. HRCM, Report on K. Himmafushi Drug Rehabilitation Center, July 2008
9. HRCM, Report on K Dhoonidhoo Detention Center, Dec 2007
10. Brian Ellis, Maldives Prison System, May 2006
11. Paul H. Robinson, Final Report of the Maldivian Penal Law & Sentencing Codification Project, Jan 2006
12. Richard Harding and Dr. Niel Morgan, Strengthening Custodial Services in the Maldives, Dec 2004
13. Christine Alder & Kenneth Polk, Strategic Plan for Reform of the Juvenile Justice System, Sept 2004
14. Christine Alder & Kenneth Polk, Gender Issues in the Criminal Justice System of the Maldives, Sept 2004
15. Paul H. Robinson/ Colin S. Driver, Report on the Criminal Justice System of the Republic of Maldives: Proposals for Reform, Aug 2004
16. David MacDonald, Review and Revision of the Current Legal Framework for Drug Prevention and intervention in the Maldives, May 2004

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