

"IN NEED OF PROTECTION"

*Palestinian Female Prisoners
In Israeli Detention*



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PALESTINIAN FEMALE PRISONERS IN ISRAELI DETENTION



November 2008

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UNIFEM is the women's fund at the United Nations. It provides financial and technical assistance to innovative programmes and strategies to foster women's empowerment and gender equality. Placing the advancement of women's human rights at the centre of all its efforts, UNIFEM focuses on reducing feminized poverty; ending violence against women; reversing the spread of HIV/AIDS among women and girls; and achieving gender equality in democratic governance in times of peace as well as war.

The views expressed in this study are those of the authors and do not necessarily represent the views of the Government of Spain, the Spanish Agency of International Cooperation for Development (AECID), UNIFEM, the UNITED NATIONS or any of its affiliated organizations.

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LIST OF ACRONYMS

C E D A W	UN Convention on the Elimination of all Forms of Discrimination against Women
I C C P R	International Covenant on Civil and Political Rights
I C E S C	International Covenant on Economic Social and Cultural Rights
I C R C	International Committee of the Red Cross
I P S	Israeli Prison Service
O P T	occupied Palestinian territory
U N C A T	United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
U N E S C O	United Nations Educational, Scientific and Cultural Organization
U N I F E M	United Nations Fund for Women's Development
U N O D C	United Nations Office on Drugs and Crime
U N S M R	United Nations Standard Minimum Rules for the Treatment of Prisoners
W H O	World Health Organization

EXECUTIVE SUMMARY

This study evaluates the situation of Palestinian female prisoners and detainees in Israeli jails taking a human rights approach. In particular, it aims at (1) exposing the process of arrest and interrogation of Palestinian women (2) evaluating the needs of women prisoners in terms of detention conditions (3) access to health care, (4) education and finally, (5) contact with the outside world, in particular family relations. It also provides recommendations to policy and decision makers on the improvement of female prisoners' detention conditions and their reintegration into society.

Key findings of the study can be summarized as follows:

- There were over 125 Palestinian women arrested, detained or imprisoned in Israeli jails during November 2007 and November 2008. Approximately 65 Palestinian women are currently held in Israeli prisons and detention centers which were designed for men and do not respond to female needs.
- The majority of Palestinian female prisoners were subjected to some form of mental pressure and torture through the process of their arrest. Beatings, insults, threats, sexual harassment and humiliation are techniques used by Israeli interrogators to intimidate Palestinian women and coerce them into confession.
- Pregnant women do not enjoy preferential treatment in terms of diet, living space or transfers to hospitals, which are equally carried out under strict military and security supervision with hands and feet shackled with metal chains. Pregnant prisoners are also chained to their beds until they enter delivery rooms and shackled once again after giving birth. Women accompanied by children under the age of 2 do not benefit from additional living space or improved living conditions.
- The unbalanced diet, insufficient amounts of protein-rich foods, lack of natural sunlight and movement, poor ventilation and moisture all contribute to the exacerbation and the development of health problems such as skin diseases, anemia, asthma, prolonged stomach aches, joint and back pains.

Isolation and prevention of family visits combined with strong feelings of insecurity in an often hostile environment lead to hormonal unbalance and gynecological problems.

- The lack of preventative gynecological health care is a source of internal infections for many women and leads to further complications in their treatment.
- The majority of female prisoners are arrested at a young age. 56 % of female prisoners in 2007-2008 were aged between 20 and 30 at the time of their arrest, while 13 % were under the age of 18, most of them being high school students.
- The lack of opportunity to study in Arabic and the prevention of female prisoners to enroll in distance learning courses at a Palestinian university are the major reasons which prevent women from pursuing their higher education studies. Only prisoners sentenced for a period longer than 5 years are allowed to study. Such restrictions violate the right to higher education of the majority of female prisoners. Approximately 70 % are either sentenced for a short period – under 5 years – or awaiting trial. Around 20% of female prisoners were university students at the time of their arrest.
- In September 2008 there were approximately 60 % of female prisoners' families in which at least one member was not allowed to visit. Mothers of minors are prevented from open visits after their children reach the age of 6. Female prisoners whose husbands and other relatives are currently in prison are accorded the right to family visits among detainees after months of delays.
- The majority of female prisoners experience social maladjustment due to post-traumatic stress symptoms and the feeling of dissociation during the interrogation and imprisonment periods. However, no adequate, gender-sensitive rehabilitation programs are provided.

INTRODUCTION

In November 2007 UNIFEM opt launched a project - “The Protection of Palestinian female prisoners and detainees in Israeli Prisons”. The project was funded by the Government of Spain, through the Consolidated Appeal Process (CAP) 2007 in the occupied Palestinian territory (oPt). It was implemented by three Palestinian non-governmental organizations, namely Addameer Prisoners’ Support and Human Rights Association, the Mandela Institute for Human Rights and the Palestinian Counseling Centre (PCC). The project’s overall goal was to protect the human rights of Palestinian female prisoners as included in international humanitarian and human rights law. To achieve this end, the project was built around three interrelated components and aimed at reaching the following outcomes: improved availability of legal advice and general gender-sensitive health care provision for female prisoners through regular lawyers’ and specialized doctors’ visits to prison carried out by the Mandela Institute for Human Rights; increased psychological support to ex-prisoners and to female prisoners’ family members provided by the Palestinian Counseling Centre; raised awareness on the situation of Palestinian female prisoners and their human rights among policy and decision-makers, media, local and international NGO’s and the general public carried out by Addameer Prisoner’s Support and Human Rights Association. The present study is the result of a year-long research conducted in the framework of the project by the local organizations mentioned above – Addameer Association, Mandela Institute and the PCC.

In September 2000, in the advent of the Al-Aqsa intifada, there were only 5 Palestinian women imprisoned in Israeli jails. Since then, the number of Palestinian female prisoners has risen dramatically, reaching its highest figure of over 120 in 2004 and a total of more than 700 over 8 years.

Finding themselves in a new situation, which remained for the longest time in the realm of a “man’s world”, Palestinian women in Israeli jails initially lacked men’s experience in fulfilling their human rights¹. They were neither fully aware of their rights nor did they know the Israeli Prison Service’s (IPS) proceedings and regulations. Since 2000 their situation has certainly improved mostly thanks to many hunger strikes which they have undertaken since 2001 when detained in Neva Terza prison. They have achieved to liaise with the administration through their own representative, to divide their recreation time into two sessions – morning and evening -, gained access to a small library and study room at Hasharon and access to higher education. However, these achievements do not meet minimum standards of detention are applied arbitrarily and are framed in terms of privilege as opposed to rights. Additionally, many demands remain unaddressed – such as the right to regular family visits and contact with the outside world as well as adequate gender-sensitive health care.

Still, to date, there seems to be among female prisoners confusion between their rights and obligations as included in IPS regulations and practice imposed by the prison administration. They were and are much younger, and less experienced than the women that were arrested for their political or civic involvement in the popular uprising of the 1980’s. Therefore, they seem to be in greater need of protection. Similarly, as a minority in the large number constituting the total of Palestinian political prisoners in Israel, women are subjected to similar detention conditions as men with no regard for their special needs. In the context of incarceration however, equality in treatment is synonymous with discrimination: women, as a result of their gender, have very often different needs than men, particularly when held in a “foreign”, unnatural environment. Paradoxically, their relatively small number has not led to the improvement of their detention conditions or better protection: unlike men, who are imprisoned in large numbers, are

¹ Conclusions presented at PCC workshop with former female prisoners, 16 August 2008

better organized and have a long history of defending their rights through strikes and other forms of protest, women face greater problems while trying to achieve the fulfillment of their human rights as prisoners.

When the project was first established, in November 2007 there were close to 100 Palestinian female prisoners in Israeli jails. While this number dropped to 65 women in October 2008 one cannot conclude that no new arrests occurred throughout this period. To the contrary, around 25 women, including 6 girls under the age of 18 were arrested between November 2007 and October 2008 with 5 still remaining in prison. In total, the project included around 125 women, out of which 60 were released through its duration. Based on 88 general questionnaires pertaining to detention conditions, a total of 94 topic specific (health care and education) questionnaires filled out in Hasharon, Damon and Neve Tertzza prisons, 83 questionnaires with families of prisoners filled out with field researchers in their homes, more than 12 semi-structured interviews with former detainees and around 103 lawyers' visits to prison, this study aims to examine medical, educational and social needs of Palestinian female prisoners taking both a human rights and gender perspective. It additionally looks at women's needs in terms of contact with the outside world and family relations. To a lesser extent it provides an analysis of the ways in which the violation of women's human rights as prisoners affects their reintegration into the society upon their release and offers recommendations in order to improve these women's situation.

METHODOLOGY

Interviews were conducted with approximately 70 % of female prisoners detained, imprisoned or arrested during November 2007 and November 2008. In the beginning of the project interviews were based on detailed questionnaires aimed at collecting information on detention conditions – food quality and quantity, accommodations, sleeping arrangements, family visits, punishments, isolation, education, hygiene and the prisoner’s medical condition. The second stage of the project included the development of detailed questionnaires to address the topics of the right to education inside prison and the provision of health care. In between the two phases, 4 lawyers were visiting prison twice a week from January until November 2008 seeing and interviewing on average 5 to 8 women per session. In a few instances lawyers’ visits did not occur due to the imposition of a state of emergency in prison, family visits or Jewish holidays. Although interviews were conducted with no interference from the prison staff, they were held either over the phone or through holes in the plastic divider separating the prisoner from the lawyer, making it difficult for them to hear each other. This factor extended the process of developing trust between the prisoner and the lawyers although the latter were trained by a group of PCC psychologists on gender-sensitive interviewing techniques. In addition, women did not have any sense of privacy as often other lawyers would be present visiting their clients. Some women were willing to talk to lawyers and saw these visits as an opportunity to voice their complaints about their poor detention conditions. However, others did not believe in the benefits of giving out information doubting that the data collection process will lead to the improvement of their situation. Importantly, researchers did not have access to prisoners which both complicated and delayed the data analysis process whenever the information collected was incomplete. Thus, in some cases the data was inconclusive. To obtain the missing data researchers interviewed former prisoners during home visits shortly after their release, over the phone or in

the premises of all partners' offices. These meetings were always conducted in a very relaxed atmosphere which usually incited ex-prisoners to volunteer very detailed information relating to their particular experiences and the general situation in prison.

BACKGROUND

Since the beginning of the Israeli occupation of the West Bank and Gaza Strip in 1967, the Palestinians have been subjected to the highest incarceration rate in the world. Estimates of the total number of Palestinians arrested and detained by Israel range between 700 000 and 750 000². Out of the total number of arrested Palestinians, 10 000 are women which have been involved in the national liberation struggle since its very beginning, both through formal and informal representation, by participating and very often leading social movements and civil society organizations, taking action as members of the Palestine Liberation Organization, political parties and elected parliamentarians. For the most part, women have been engaged in non-violent resistance aiming to achieve their goals through instruments made available to them by international law and at a later stage, the peace process. However, some have also been involved in military actions. Others have been arrested as a means of exerting pressure on members of their families. It is as a result of their activities on all these levels – political, social and military – that 10,000 Palestinian women have been arrested since the beginning of the Israeli occupation of the Palestinian territory in 1967. The rapid militarization of the Al-Aqsa intifada and Israel's repressive measures against the Palestinian civilian population have led to new wave of arrests, interrogations, arbitrary detentions and imprisonment.

As a consequence of Israel's violation of the IV Geneva Convention, which clearly forbids the occupying power from transferring political prisoners

² Addameer Prisoner's Support and Human Rights Association

outside of the occupied territory, Palestinian women are currently held in two different prisons both of which are located in Israel, namely Hasharon (Telmond) and Damon (Mount Carmel). Additionally, they are, were or face the threat of being held in three interrogation centers, i.e. Petah Tiqwa, Al-Jalameh (Kishon) and Moskobiyya in Jerusalem. Neve Terza, the only specialized women's prison facility in Israel has been a major incarceration centre for Palestinian female prisoners until 2004. Currently, it serves the purpose of detaining women in isolation or as an interim facility for women awaiting transfers to other prisons.

In a situation of continued occupation of the West Bank and the Gaza Strip, the transfer of prisoners outside the oPt constitutes yet another form of punishment for women and their families and further complicates access to legal aid. As a result, women, in many cases mothers, are obstructed from regular family visits since permits are rarely granted to West Bank ID holders and under current political circumstances never given to residents of the Gaza Strip.

According to research conducted by practitioners of the International Committee of the Red Cross (ICRC) who visit female prisoners worldwide, women's needs usually include: specialized healthcare and diet – especially when pregnant – specific hygiene requirements, privacy, and “additional space” when women's children are allowed to live in prison with them³. In this respect, Palestinian women are no different than other women worldwide, and have very similar needs to the ones mentioned above. While constituting a minority of the total Palestinian prisoner population their sense of isolation and need for specialized mental health care are arguably greater than that of men: during 41 years of Israeli

³ ICRC (2004), “Addressing the Needs of Women Affected by Armed Conflict, An ICRC guidance document”

occupation of the Palestinian territory, approximately 70 times more men have been imprisoned and detained than women.

Palestinian female prisoners

Out of the currently 65 women⁴ imprisoned in Israeli prisons, five are sentenced for life, 10 are sentenced for more than 10 years and 5 are held in administrative detention, or detention without trial. Out of them, 17 women have not been sentenced yet, while 5 are administrative detainees and are still awaiting their trial in the exact same conditions as sentenced prisoners. Looking at the total number of prisoners included in the project, at least 8 women were arrested twice, mostly accused of the same charges – political activities – or due to attempted actions against Israeli soldiers⁵, usually carried out promptly after their release failing to find much needed psycho-social support and specialized gender-sensitive services. This demonstrates a lack of adequate reintegration mechanisms accessible to women. At least 4 women have been arrested on the grounds of their involvement with civil society organizations, whereas another 4 women have been imprisoned for their political activities. These include two elected members of the Palestinian Legislative Council, the deputy mayor of the Nablus municipality as well as another one of its members. All four women are part of the Change and Reform party and legitimately participated in both parliamentary and municipal elections. Other charges include helping wanted people – usually members of women's families – partaking in the organization of military actions, possession of a knife at a checkpoint as well as attempts to stab a soldier. Some women have also been arrested as the result of social marginalization and mental problems.

Palestinian female prisoners are young. Around 56% of women at the moment of their arrest were aged between 20 and 30, with the majority of

⁴ Data last updated in October 2008

⁵ These actions usually include the attempt to stab a soldier.

women being in their early twenties. Approximately 13 % of the women interviewed were below the age of 18 when arrested; 12 % were aged between 30 and 40; 10 % were aged between 18 and 20; lastly women in their forties constitute the smallest group of prisoners – only 9 %. Whereas a few years after their arrest proportions might have slightly changed, it is still fair to say that most of Palestinian female prisoners are young and are in an age, when many of them follow some sort of education – be it secondary or tertiary. Many of them are also in great need of vocational training programmes in order to ease their reintegration into the society upon release.

CHAPTER ONE

THE PROCESS OF ARREST AND IMPRISONMENT

The process of arrest and the interrogation period are both experiences which strongly affect female prisoners mentally and leave a long-lasting impact after their release. Ex-prisoners and women interviewed in prison within the framework of the project usually mention this period as the hardest in their whole experience, since this is when they were subjected to some form of cruel or inhumane treatment, be it physical or psychological. The use of torture however, is prohibited by both – the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT, 1987) and the International Covenant on Civil and Political Rights (ICCPR, 1966) to which Israel is a party state. Additionally, the use of torture has been in theory outlawed by the Israeli judicial system⁶.

The process of arrest of Palestinians is well-known and has been widely documented by human rights organizations⁷. Female prisoners are subjected to the same restrictions, military orders and practices by the Israeli Occupying Forces as men with no special consideration to their gender. As per military orders, a Palestinian detainee – male or female – can be interrogated for a total period of 180 days, during which he / she can be denied lawyer visits for the first 90 days. A Palestinian detainee can also be held for up to 8 days without the Israeli military informing him or her of the reason for his/her arrest and without being brought before a judge. Similarly, lawyers are prevented from visiting their clients for the first 2 days of their arrest, whereas the army reserves itself the right to delay to inform the detainee's relatives about his / her arrest and place of detention for a period of 96 hours which can be extended⁸.

⁶ The use of torture is however still permitted in individual cases in which the Israeli Security Agency (ISA) deems a detainee a threat to state security or a 'ficking bomb'.

⁷ Please refer to Addameer Prisoner's Support and Human Rights Association for detailed information: www.addameer.org

⁸ Military Order 378, Article A (d)

1.1 The Process of arrest

The vast majority of women that fell under the protection of the project were arrested from home – around 60 %. The rest were arrested at checkpoints – approximately 20 % -, in public places such as the street, the mosque or workplace and border crossings. There were also a few cases of women arrested in a settlement – mostly around East Jerusalem and the old city of Hebron – and one case of a woman arrested at the door of the Nafha prison while she was visiting her brother. The most brutal arrests however, are the ones that occur from home as they are usually accompanied by violations against the family and have a long-lasting psychological effect on them. Such arrests always take place late at night – sometime between midnight and 3 am. Approximately 60 % of families of female prisoners were subjected to unlawful house searches, around 45 % were forced to evacuate their house and spend in some cases up to a few hours in the street with no regard to age or weather. More than 40 % of family members were interrogated, while around one third experienced the destruction of property. Other violations include confiscation of private belongings, the use of police dogs, firing of stun grenades, beatings, threats of destruction of property and arrest of other family members (20 %)⁹. As per interviews with family members, the arrest is carried out by anywhere from 10 to 50 soldiers – or police in the case of 1948 Palestinians – depending on the specific case and charges against the prisoner. In some instances women were also victims of beatings which occurred in front of their family members, including their own children; with two women claiming to have had their noses broken. Typically, after the arrest the woman is blindfolded, shackled and transferred to an interrogation centre in an army jeep. Many women have complained that they were being insulted and shouted at during the transfer. Some claim to have been verbally harassed with male soldiers using provocative language towards them. In other cases, they made equally provocative and insulting signs and gestures. Female

⁹ Addameer interviews and questionnaires with families of female prisoners, September 2008

soldiers usually present in these operations did not prevent such harassment to happen. Palestinian prisoners always describe the overall experience as extremely humiliating. More often than not, the female detainee is not informed of where she is being transported to even when she asks. In some cases, soldiers respond “to prison”, but do not specify which one. In other, they provoke the detainee by finding mocking answers such as “we’re taking you to your family home”, or by asking ironic questions “what are you doing here anyway”. Once arrived in the interrogation centre, they are subjected to a general medical examination, which mostly consists of a medical interview to determine whether they are fit for incarceration. They have a picture taken of them and also strip-searched by female soldiers. Some women reported that when they refused to undergo the strip search as they felt it was humiliating, the female soldier threatened that it would be performed by a male guard instead.

Case Study:

M. was arrested on 3 June 2008 on a street bordering her land, located close to the Giv’at Zeev settlement in East Jerusalem. The path of Israel’s Wall curves between the entrance to the settlement and her house. When she was on her way back to the house, the settlement’s security guards stopped her informing her that the use of this specific street was forbidden for Palestinians. She answered that it was the shortest way to her house from her land. They asked her to go back, but she refused as it would have meant a huge detour given the Wall’s path. As a result, the security guards started beating her 15 and a half year old son who was accompanying her. As M. tried to protect her son, the security guards started punching and jostling her. They broke one of her fingers and hit her on her left eye. Then, they started punching and beating her all over her body. The guards sprayed tear gas on both her and her son’s faces. Finally, she was brought to the police station in Giv’at Ze’ev. The security guards continued

punching her in front of the interrogator. Later, she was transferred to the hospital, where she was kept overnight under observation. Afterwards, she was transferred to the Moskobiyya Interrogation centre where she was held for a period of 22 days. Her transfer though, occurred without the consent of the physician who deemed her medical situation unstable. However, the police disregarded his recommendation. She was transferred to Neve Tertza, where she was held in solitary confinement for a period of 8 days, after which she was finally moved, to another section in the prison, where she was held with an Israeli female criminal offender. She recalls that the conditions were better as the cell was larger and food quantities were greater than those served to Palestinians¹⁰.

More than 50% of Palestinian female prisoners' families claim to suffer or have suffered from psychological problems following the arrest of the woman. Often, this number corresponds exactly to cases of arrest from home. As most Palestinian households are multigenerational, the brutality of the arrest process has usually a huge impact on minors – siblings, nephews or children – living with the wanted person. Psychosomatic symptoms are very frequent among female prisoners' family members. They include: strong fear, aggressive behavior, learning problems and bedwetting among children; depression, diabetes, anuria, blood clots, heart diseases and high blood pressure among adults, mostly parents of young, single female prisoners¹¹.

¹⁰ Addamer interview 8 August 2008

¹¹ Addameer questionnaires with family members of female prisoners, November 2007 – October 2008

1.2 Interrogation process

Interviews with female prisoners show that following their arrest they are usually detained in three different interrogation centers: Al-Moskobiyya in Jerusalem, Al-Jalameh (Kishon) and in Petah Tiqwa. There is no set interrogation period; rather the latter is dependent on the charges against the woman. Some women affirmed to have been interrogated for a few hours or days only, while others have been interrogated - and thus isolated - for as long as 60 consecutive days. Indeed, during the interrogation process detainees are usually placed into solitary confinement as a way of exerting mental pressure on them and extracting confessions. Complete isolation from other people, the uncertainty of what will happen next, the threat of torture and ill-treatment and the detention in a completely foreign environment was for many women the hardest thing to bear. The conditions in interrogation centers vary from case to case and standards seem to be applied arbitrarily according to the preference or good-will of a specific interrogator. The respect of human dignity is not applied equally to all detainees. Rather, in the case of female prisoners the equation appears to be: the greater the charge, the worse the treatment¹². Some women recall to have been treated in an acceptable manner having received soap, a towel, a toothpaste and toothbrush upon their arrival to the interrogation centre. The majority however, claims to have been treated in an inhumane way and detained in unhygienic conditions¹³, having no access to a change of clean clothes for days¹⁴ or weeks. Similarly, there are women who stated that they were barred for the first several days from access to cosmetics and hygiene supplies, including sanitary towels during their menstruation. Cells in interrogation centers usually contain only a mattress and sheets¹⁵, which according to female prisoners' accounts are old and dirty. Whereas

¹² Addameer has documented cases of children under the age of 18 who were tortured and ill-treated following the act and / or accusation of throwing stones.

¹³ Mandela Institute interviews with female prisoners, Damon prison, September 2008

¹⁴ The longest case of a woman kept in interrogation without a change of clean clothes and documented by the project was 15 days.

¹⁵ The Project however documented a case of a woman who was placed in a cell with a bed, but without a mattress.

they have access to the bathroom during that period of time, they assert that it is equally “dirty” and “scary” and that in some cases lacks hot water. In the Al-Jalameh (Kishon) detention centre for example, the bathroom is not separated from the cell by a door, but by a curtain instead. This not only compromises women’s right to human dignity, but also does not meet minimum hygiene standards. Depending on the interrogation centre, the cells might contain a small barred window. However, in all of them the ventilation and temperature is controlled by guards from outside the cell and is used as a way of psychological pressure. For instance, if the room is already warm, the heating will be turned on for the detainee to feel as uncomfortable as possible. In cold weather, guards will usually turn on the air conditioning. Women and especially young girls affirm that such a control of their space and body made them feel threatened and scared. Whereas three meals a day are usually provided, some women reported that they were not eating during the first few days of their detention.

1.2.1 *Interrogation techniques*

All interrogation rooms look the same: a desk, computer, bright light and a chair for the detainee – all confined to a small space. The questioning is carried out in Arabic by a male interrogator, while a female guard is usually present in the room as an observant and does not speak. The project however, has documented at least one case when the interrogation of a Palestinian woman was carried out without the presence of a female guard. The mere fact that women are interrogated by a male constitutes already a form of intimidation, especially in the case of young girls under the age of 20. When questioned, women are usually sat on a chair with their hands shackled. Sometimes however, they are placed for several continuous hours in uncomfortable positions with hands shackled behind their backs. Many have reported that they were prohibited from using the bathroom during the interrogation session; even at the time of their menstruation. More than physical torture, which is defined as the act of inflicting severe

physical pain or suffering, Israeli interrogators usually subject female prisoners to mental torture in order to coerce them into confessions. For the purpose of this study, the UNCAT definition of torture will be adopted.¹⁶

Interrogators thus threaten female detainees of destroying their homes, arresting members of the family or friends, placing them for days in isolation or with collaborators, forcing them to become collaborators, and publicizing compromising pictures of them. Some women have even been threatened of rape. In the case of big charges, women can be interrogated continuously for 10 to 12 hours, usually at night starting from 10 pm. Then, other techniques are used to obtain information, namely sleep deprivation and forcing detainees to listen to loud music through headphones.

Case Study:

J. was arrested in 2002 under the charge of providing help to a suicide bomber. She was beaten on her way to the detention centre, where she was interrogated for 60 continuous days. Every session was comprised of 12 consecutive hours and was conducted at night. When she would fall asleep on the table a soldier would start knocking on the table next to her head to wake her up. She was prevented from access to a lawyer or ICRC visits for the whole first month. The interrogators tried to exert mental pressure on her by threatening that they would arrest her brother if she did not confess. They would also blame her and attempt to make her feel guilty towards her own family. They would say: “your mother is ill and you will be the cause of her death if you do not confess”. Rarely would they allow her to go to the bathroom.

¹⁶ Article 1 of the Convention against Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (1984) defines torture as “any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or suspecting of having committed, or intimidating or coercing him or a third person [...]”

Out of the total number of women that have been imprisoned during the Al-Aqsa Intifada, at least a dozen were arrested as a way of exerting pressure on other family members, especially their husbands. They were then purposefully interrogated in the same detention centre as their spouse.

Case Study:

Z. was arrested on 25/1/2007, 50 days after the arrest of her husband, who was detained under the charge of 'conspiring against the security of the state of Israel'. The army burst into her house at 12:00 am just after she had finished correcting her students' final Arabic exams, as she is a teacher in the local high school of her village. The army took her to the living room and prevented her from looking after her 2 daughters – 6 months old G. and 2 and a half year old S, frightened by the army's intrusion. The soldiers searched her whole house, tore apart the pillows, and threw her personal belongings and clothes on the floor. They confiscated private objects such as wedding pictures – taken without her veil – to use as a way of psychological pressure on her husband. She was questioned about her husband's activities and was continuously asked to provide the soldiers with her husband's documents and personal belongings. When finally she said she did not have anything in her possession, the soldiers informed her that she would be arrested and would not be allowed to see her children. They ordered the neighbors to come and take them away without giving her the opportunity to say goodbye. When she was finally allowed to leave the living room, the children were already taken. One of the soldiers emptied the bag in which she had meticulously organized the corrected exams of her high school students' throwing them on the floor; then he told her to get ready and pack. Even though she asked, she was not told where she was being taken. During her transfer Z. was blindfolded, therefore she only realized that she was brought to the Petah Tiqwa detention centre when she heard her husband's voice. It was certainly not a coincidence that she

was interrogated in a room located next to his cell; but rather a means of exerting pressure on him and coercing her into confessions. Once Z.'s husband heard her voice, he became extremely angry and upset, and started shouting her name. Afterwards he was transferred to a different cell, where they could not hear each other anymore. She was being interrogated by 2 different officers, each one of them playing a specific role. One would insult her, and constantly humiliate her by saying that she was a bad mother, while the other would play on her motherly feelings by trying to convince her to give out information related to her husband. He would say that she would be able to see her children right away if she confessed¹⁷. After her 8 day interrogation period she was transferred to the Hasharon prison and sentenced to 1 year and 8 months of prison for helping a wanted person, concealing evidence and information used for plotting against the state of Israel.

1.2.2 *Physiological and psychological effects of interrogation on women*

The overall bad conditions in the interrogation centers – sleep deprivation, intentional exposure of detainees to extreme temperatures varying from cold to hot, poor sanitation conditions and general exhaustion of the human body lead to the development of different types of infections, including eye, skin and ear infections. In addition, the ill-treatment that women are subjected to during interrogation has had a lasting effect on some women's health – one woman now suffers from disc pain as a result of being forced to sit in contorted positions for extended periods of time, while another one experiences breathing difficulties as a result of severe beatings and a broken nose¹⁸.

¹⁷ Addameer Interview, Nablus, 25 September 2008

¹⁸ Mandela Institute for Human Rights, Health questionnaires in Hasharon and Damon, 2008

As for psychological effects, research on post-imprisonment among female prisoners suggests significant social maladjustment due to post-traumatic stress symptoms and dissociation experiences. The helplessness endured during interrogation and the lack of support during isolation shatters prisoners' feeling of safety causing anxiety and depression. The need to dissociate from fear and pain during this initial period of imprisonment may shape a pathological coping strategy that impairs the prisoner's capacity to reintegrate into her society¹⁹.

¹⁹ Srour A. (2008), "Psychological effects of women imprisonment on their families", Palestinian Counseling Center, available at: <http://www.aseerat.ps/files/EN%20-%20Psychological%20effects%20of%20women%20imprisonment%20on%20their%20families.pdf>

CHAPTER TWO

DETENTION CONDITIONS OF FEMALE PRISONERS

Palestinian female prisoners are detained in conditions that are not suited for the needs of women. A former female prisoner released in February 2008 after having served a 5 year-long sentence explains that their small number and their initial lack of organization proved to be problematic in fulfilling their rights: “we were a small group; men went on strike for a long time before they achieved change. Although, we tried to do the same, our situation was new”²⁰. Female prisoners usually complain that they feel more isolated than men, have no capacity at all to control their daily lives and are detained under greater surveillance than male prisoners.

There is currently only one specialized women’s prison facility in all of Israel, i.e. Neve Terza in Ramla. While many women have been detained there since the wave of arrests, which accompanied events following September 2000, in a special section devoted for what Israel calls “security prisoners”, most of them were transferred to the Hasharon prison in 2004. Neve Terza now serves the purpose of occasional transfers of female prisoners kept in isolation as well as for short-term detentions. Women who have been detained there in the past affirm that the quality of food was much better, as the meals were cooked by Israeli female criminal offenders – as opposed to men. Similarly, the quantities were larger. However, the vast majority of Palestinian female prisoners is currently either detained or imprisoned in old jails, dating back to the British Mandate period (1922-1948) which lack modern day infrastructure. Most importantly, these facilities have been designed for men and by men and rarely do they meet women’s needs.

²⁰ Addameer interview with former prisoner, released in February 2008, Jenin, 11 July 2008

Based on 88 questionnaires filled out throughout the first half of 2008 and more than 103 lawyers' visits to prison and interviews carried out with women between November 2007 and October 2008, this chapter provides an analysis of Palestinian female prisoners' conditions in Israeli jails. The questionnaire was specifically designed to determine the quality and quantity of food, the recreation time, sleeping accommodations and the size of living space, the availability of light, heating and punishments. It additionally allowed prisoners to include their own comments or complaints.

2.1 Pre-trial detention

Although a number of key international human rights instruments stipulate for the protection of pre-trial detainees and their separation – especially in the case of minors – from convicted prisoners, no special facilities to date exist for untried Palestinian female prisoners. Instead, they await their trial in prison, detained in the same rooms and accommodations as tried prisoners²¹ while in fact, they should be treated as innocent until their sentence is passed. This is in clear contradiction with Rule 85 of the UN Standard Minimum Rules for the Treatment of Prisoners which states that “untried prisoners shall be kept separate from convicted prisoners”²². Indeed, as per Israeli military regulations, the trial process can take up to two years before an indictment is issued. This signifies that Palestinian “security prisoners” wait for months or even years before being tried before a military court. As such, they do not enjoy rights granted to them by their special status²³. For example, Israeli law stipulates that all detainees awaiting trial have the right to a half hour weekly family visit once their interrogation period is over. However, the Israeli Prison Service regulations on “security prisoners” disregard this article. One Palestinian woman for

²¹ As of October 2008 there are 22 untried Palestinian female prisoners. Some of them have been awaiting their trial for over a year.

²² UN Standard Minimum Rules for the Treatment of Prisoners, 1955, Rule 85 (1)

²³ It is important to note here that procedures within the military court system rarely meet international standards of fair trials, as Israeli military courts continuously refuse to apply international laws and conventions. Instead, Israeli military orders always take precedence over both international and Israeli domestic law.

example was arrested on 1 February 2008 and released after a period of nearly 10 months on 25 November 2008 cleared of all charges. Despite that, during her excessively long detention period she was treated in the same way as convicted prisoners, and did not. The 2008 UN Handbook on women and imprisonment confirms that the practice of holding “untried women, who still retain their status of innocence [...] in high security conditions” is unacceptable²⁴. There are currently 17 women awaiting trial and an additional 5 women and girls placed under administrative detention.

2.2 The Prisons

Hasharon Prison (Telmond)

Located north of Tel Aviv, the Hasharon prison was established in 1953. The building which now constitutes the prison complex served as the headquarters of the British Mounted Police during the British Mandate in Palestine. As one of the largest prison complexes in Israel, it includes a section for Israeli criminals - both adult and juvenile offenders - as well as Palestinian “security” detainees and prisoners, including men, women and children²⁵. Most female prisoners were moved there from Neve Terza in 2004 and detained in sections 11 and 12. Section 13 was reserved for women in isolation, currently at the number of 2. In June 2008 all prisoners previously accommodated in section 11 were transferred to the Damon prison in Northern Israel. According to the IPS, approximately 185 staff members work in different units of the prison: management, security and health treatment²⁶.

²⁴ UNODC (2008), „Handbook for Prison Managers and Policymakers on Women and Imprisonment”, Criminal Justice Series, United Nations, New York, 2008, p. 73

²⁵ Israeli Prison Service official website: www.ips.gov.il/.

<http://www.ips.gov.il/NR/exeres/43D29FA3-78DB-4C17-9FC8-A9D0501002B4.frameless.htm>, last accessed 20 November 2008

²⁶ Ibidem

Damon Prison

The Damon prison is located in the north of Israel, near Haifa and was established in 1953 by the then Israeli Minister of Police in buildings²⁷ which formerly served as a tobacco warehouse and a stable. They was specifically designed to keep moisture in and was never meant to accommodate human beings. Due to appalling detention conditions described as unfit for humans, the IPS took the decision to close the prison in 2000, but reopened it again in 2001 as an incarceration center for Palestinian “migrant workers” entering Israel without permits when the economic situation in the occupied Palestinian territory started to drastically deteriorate²⁸. According to the IPS, approximately 130 staff are currently working in Damon prison. The transfer of female prisoners to the north of Israel extends the time that families of prisoners have to spend traveling from their homes in the occupied Palestinian territory to visit them.

2.3 The rooms

The UN Standard Minimum Rules for the Treatment of Prisoners (1955) stipulate that:

- “All accommodation provided for the use of prisoners and in particular all sleeping accommodation shall meet all requirements of health, due regard being paid to climatic conditions and particularly to cubic content of air, minimum floor space, lighting, heating and ventilation”, Article 10
- “Every prisoner shall, in accordance with local or national standards, be provided with a separate bed, and with separate and sufficient bedding which shall be clean when issued, kept in good order and changed often enough to ensure its cleanliness”, Article 19

²⁷ Israeli Prison Service official website: <http://www.ips.gov.il/NR/exeres/0B230C72-16EA-4E59-B51F-D4ABDEEF58D1.frameless.htm>, last accessed 20 November 2008

²⁸ Ibidem

Overall, overcrowding is one of the most serious issues that Palestinian women face in Israeli prisons. It is now common knowledge that overcrowding in cells negatively affects mental and general health of prisoners, hinders their access to hygiene or education and compromises the safety of prisoners. When female prisoners were first moved to the Damon prison in June 2008²⁹, the number of separate beds was insufficient for the total of female prisoners. The rooms were not equipped with shelves and closets for storing personal belongings. These were only built after a month of continuous requests. In view of a delayed reaction by the administration, female prisoners at Damon took turns to sleep on the floor in the first weeks after their transfer. Since then the number of female prisoners has dropped, nevertheless there are still more than 10 women held in a room. More importantly, the prison administration does not seem to take the necessary steps to find a sustainable solution in order to alleviate overcrowding in the long-term. Women also complain that the rooms are old and run-down and have thus requested from the prison's director for the walls to be fixed and painted – a request which has not been fulfilled for more than a couple of months. Further, cells in Damon prison do not include showers. Instead women are forced to use common bathrooms located outside of their accommodations and open to them only at certain times set by the administration, i.e. two and a half hours in the morning from 8:30 – 11:00 am and 3,5 hours in the afternoon from 13:00-16:30 pm. Not only does this violate women's right of privacy, as jailers know exactly women's physical needs, but it also creates a huge coordination problem given the large number of female prisoners – above 30 – and the small number of bathrooms - only 4.

Although slightly better, detention conditions in Hasharon prison are reportedly very harsh as well. Section 12 is comprised of two types of cells. Small ones can only accommodate 2 women and are no larger than 4

²⁹ The transfer to Damon prison includes 37 women.

squared meters, including a bathroom separated from the living area by either a door or a curtain. Larger ones fit up to 8 women on a surface of 20 m² only. Bed frames are usually made of iron, which cause women back problems, since mattresses are allegedly only 3 to 5 centimetres thick. Hasharon prisoners have repeatedly asked the administration to exchange them for wood frames, but until today their demands have not been met. Similarly, their requests to exchange their old mattresses, which are starting to decompose have remained unanswered. Blankets in turn are not provided by the IPS but instead fall under the responsibility of families, which leaves women prohibited from family visits dependent on other women in jails. Only thin blankets and sheets are permitted; thick ones – needed in the winter, especially in cells with no central heating – are prohibited.

2.4 Hygiene

Hygiene standards in both prisons are generally very poor as the facilities have not been adequately renovated or adapted to modern day hygiene requirements. Rooms where women are accommodated are usually cold and humid in the winter, and stifling hot in the summer. Additionally, they only include one window, which is covered by an iron sheet allegedly for security reasons. This fact however, renders rooms even colder in the winter, as natural sunlight is unable to penetrate inside. In spite of that, neither gas nor electric heaters are allowed. The lack of sunlight, adequate ventilation and the presence of moisture contribute to the growth of mold on the walls of rooms, which in turn leads to the spread of asthma and skin diseases³⁰. Cockroaches and other insects make their way to the cells through drains, whereas some women assert that mice enter their living space through holes in the walls.

³⁰ For more detailed information, please refer to Chapter 2.

As most jailers are men, female prisoners' personal health and hygiene needs often remain unaddressed by the administration. Reportedly, every woman gets 2 rolls of toilet paper and a set number of 10 sanitary towels per month, with no consideration to her needs. Other essential cleaning, maintenance and personal hygiene supplies such as washing powder, toothpaste, soap, shampoo or light bulbs are not provided by the prison administration. Instead, women are obliged to purchase them from the canteen. In Hasharon, women are generally allowed to do their laundry only every 15 days, through two of their representatives, who usually collect dirty clothes and are allowed out from their rooms to do a wash for the whole section.

2.5 Food

The administration's obligation to provide meals at regular intervals and "of nutritional values adequate for health and strength, of wholesome quality and well prepared and served" is stipulated in the UN Standard Minimum Rules for the Treatment of Prisoners³¹. Although food quality might vary from prison to prison, the diet that women are subjected to in Israeli jails is poor and unbalanced to the point that they often turn the food away. Moreover, the quantities served are insufficient and women suffer from a permanent lack of fruits, vegetables, proteins and meat. In the rare times they received them, the majority of interviewed women assert that they throw vegetables and fruits to the garbage, as they are usually served rotten. Out of the 88 women who filled out a questionnaire on detention conditions throughout the duration of the project, not a single woman was satisfied with either the food quality or its quantity. Typical answers included: "the food is bad", "uneatable" or "extremely bad"³². As "security prisoners", Palestinian females do not have access to the kitchen. Instead, their meals are usually prepared by Israeli criminal offenders. As mentioned

³¹ 1955, Article 20 (1)

³² Mandela Institute questionnaires with Palestinian female prisoners, 2008

before, in Neve Tertza, the quality of meals has a tendency to be better precisely because these are cooked by Israeli female prisoners. In Hasharon however, they are prepared by Israeli male inmates. Food is usually distributed to women by their representatives, who are allowed to leave their rooms only to get it from a special space, where Israeli male prisoners bring it in large pots. Although the IPS is obliged to provide “well prepared and served” food of “wholesome quality” under universal human rights instruments, it clearly does not fulfill its duties. Instead, it encourages prisoners to purchase food products such as vegetables and fruits – which it serves in very limited quantities only – from the canteen, at expensive prices for Palestinian standards. At Hasharon for example, a typical breakfast includes a spoon of yoghurt, one slice of tomato, pepper and bread. There is no accurate information on the quantities of food that women receive, however, quantities served at lunch, the main meal of the day, are only enough to fill a small desert plate³³. All women assert that they have to re-cook the food provided to them, using their own spices and products purchased at their own expense from the canteen to make it more eatable. For this purpose they use small stoves provided to them by the prison’s administration.

2.6 Women with children

Dealing with nursing mothers who are in prison is a very challenging task for prisons’ managers worldwide. Although separation with her baby is a cause of anxiety and distress from the woman, raising a child in a harsh, prison environment is arguably equally detrimental, especially to the physical and mental health of the baby. Although no consensus has been reached amongst specialists researching best practices and options for women with children in prison, there are a few commonly agreed principles.

³³ For more information, please refer to “Fact Sheet 2: Detention Conditions of Palestinian Female Prisoners”, July 2008, accessible at www.aseerat.ps

The 2008 UNODC handbook on women and imprisonment recommends that children “should never be treated as prisoners themselves and should not be subjected to disciplinary punishments”³⁴. In terms of food, it “must be provided for babies, children and breast-feeding mothers, free of charge, including milk, high protein products and adequate amounts of fresh fruit and vegetables”³⁵. Additionally, a nursery staffed by specialists should be available for the care of the child whenever he/she is separated from his/her mother. Similarly, the UNODC recommends that children be provided “with ongoing good quality primary health care services and their development monitored by a prison psychologist and specialists in child development”³⁶.

According to Israeli law, a female prisoner may apply for her child to live with her in prison until he / she reaches the age of two. In the course of 2007/2008 there were three Palestinian women accompanied in prison by their children, including two women who gave birth in prison³⁷. The other woman asked for the permission to be accompanied by her 6 months baby after her arrest. She was released in August 2008.

Case Study:

Z. was imprisoned when she was breastfeeding her 6 month old baby girl. After her first 8 day interrogation period, she asked in court for the permission to be reunited with her child in prison. The judge agreed to her request immediately, but she had to wait another two weeks for the decision to be implemented. The baby was under the care of her neighbors following her arrest, as her husband too was in prison. When the baby was brought to her, she was ill and weak as she was not used to other food than her mother’s milk. Z.’s daughter did not have access to any child specialists

³⁴ UNODC (2008), „Handbook for Prison Managers and Policymakers on Women and Imprisonment“, Criminal Justice Series, United Nations, New York, 2008, p. 69

³⁵ Ibidem, p.69

³⁶ Ibidem, p.69

³⁷ For more information, see chapter 2.

in prison during her incarceration. Instead, the baby's health situation was first examined by the prison clinic doctor who would then authorize transfer to the Meir hospital in Kfar Saba. The process would usually take from one to two weeks. During her 1 year and 8 months imprisonment Z. went four times to the hospital with her child. Even though she was not ill herself, she was shackled to a patient's bed by her legs and hands every time she accompanied her daughter, and for the whole period of her hospitalization. Whenever the baby would wake up and cry, the doctors called the prison administration in order to get a permission to remove the mother's cuffs so that Z. would take care of her. This process always lasted at least 15 to 20 minutes. She recalls this experience being extremely humiliating and painful – "We're not animals, so don't treat us like we are" – she would tell the medical staff and guards. It is true that Z.'s baby had access to vaccinations at a specialized child-care clinic during her time in prison. However, when Z. was breastfeeding she did not benefit from a special protein-rich diet, which would also include additional vegetables and fruits. Only a glass of additional milk was provided to her. Z. was given an additional hour of recreation time, however she was detained with one other woman in a small room without additional space for her baby. She describes the room as only 4 square meters large: "There was only enough space for two adult women to stand next to each other at the same time" – she says. The bathroom in the cell was separated from the living area by a curtain, which was extremely problematic when the baby started walking. She did not have enough space to either play or move freely, which would make her always very agitated and nervous. Additionally, because Z. did not get any family visits – as her nuclear family lives in Kuwait and her husband was in jail at the same time – finding appropriate clothing for her daughter was a challenge. She had to depend on families of other women to bring her clothes, but as this is only permitted once every 3 months, Z.'s child would always grow out of her clothes. As she was growing very fast, she would never get them on time. As a result, she would mostly wear

summer clothes in the winter and winter clothes in the summer³⁸. The restrictions imposed on family visits and therefore their lack meant that Z.'s baby grew up for a year and a half without knowing her older by two years sister who remained under the custody of her uncle during that time.

It is clear from Z.'s experience that although some child health care was provided by the IPS, her daughter was also submitted to the same restrictions as if she were a prisoner, namely in terms of access to clothing, food and family visits. Additionally, as no specialized nursery exists in either Hasharon or Damon prisons, women usually take their children with them whenever they go to court. Children are subjected to the same harsh conditions as their mothers during lengthy and difficult transfers, which take at times more than 12 hours. F., a detainee who gave birth to her son in January 2008 affirms in an interview with Mandela Institute lawyers that she was forced to wait for her trial for four and a half hours in a tiny cell of approximately 1 meter by 1 meter and a half. The cell did neither contain windows nor toilets, this despite that her 9 months son was accompanying her. During the transfer, both her legs and her hands were shackled and she was unable to hold her baby Y. Moreover, security guards prevented her from bringing any additional milk with her, which prevented her from feeding her son.

Children living with their mothers are also subjected to forms of collective punishment such as brutal and violent late night searches, the confiscation of electronic devices, tear gas sprayings in the rooms, a practice mostly used to pacify strikes in 2004, as well as the denial of recreation time, which was implemented at Hasharon in the summer of 2007 following protests of some women against the administration. As a result, Z.'s daughter was unable to get any recreation time for approximately 2 months.

³⁸ Addameer interview with former prisoner Z., 25 September 2008, Nablus

2.7 The Canteen

Every 15 days women detained at Hasharon have access to the prison's canteen, through their representative, who is allowed out to purchase essential goods for the whole section. The range of products includes mostly food: beans, spices, tomatoes, olive oil, snacks, vegetables, soft drinks, tea and coffee. In addition, pens, notebooks, cosmetics and hygiene products are also available. As none of these products are provided by the IPS, prisoners are forced to purchase them in the canteen. However, prices are set according to Israeli standards and life conditions, thereby more expensive than in the oPt. To give a few examples, a bottle of shampoo costs 10 NIS in the oPt, whereas the same product costs 18 NIS in the canteen. A pack of chips costs only 1 shekel in the oPt, while the canteen sells it at for 4.5 shekels. They do not have any choice but to pay such high prices as their families are forbidden from bringing them any of the above mentioned products – be they food or cosmetics. However, throughout the duration of the project women were complaining about the delays in receiving their canteen money which is typically transferred to them by the Palestinian Ministry of Detainees and Ex-Detainees in Ramallah. As a consequence, women have to share their limited resources amongst each other.

2.8 Clothing

Article 18 of the UN SMR states that “if prisoners are allowed to wear their own clothing, arrangements shall be made on their admission to the institution to ensure that it shall be clean and fit for use”. Most women suffer from a lack of clothes, as their families are only permitted to bring them to the prisoners only once every 3 months. However, packages are sometimes withheld by the prison's authorities and women are forbidden from receiving them during family visits. As mentioned above, the same stands for children who live in prison with their mothers. Additionally, there are no set regulations in terms of which items are permitted; instead

decisions tend to be arbitrary. Wool sweaters, pins, brooches, barrettes, and in general clothes with zippers are forbidden. Similarly, the administration forbids the delivery of toys for children. Women, who are denied visits – either as a form of punishment or more importantly as the result of the denial of permits to family members – are automatically excluded from the provision of new clothes and have to depend on other women, whose families are allowed to visit. There are currently 3 Gazan women, who have been prevented visits since the June 2007 takeover of the Strip by Hamas and an imposition of a closure of the area by Israel.

2.9 Recreation time

According to article 21 (2) of the UN SMR:

- “Young prisoners, and others of suitable age and physique, shall receive physical and recreational training during the period of exercise. To this end space, installations and equipment should be provided”

As “security prisoners”, Palestinian women are only allowed to leave their cells for recreation time, i.e. a period of 3 hours, usually divided into 2 blocs: from 8:30 – 10:00 in the morning and 12:30-14:00 in the afternoon. During recreation in Hasharon, they are let out onto a narrow courtyard of 63 square meters (7x9 m²), surrounded by cells on each side and covered from the top by barbed wire and cables, which obstruct the penetration of natural sunlight. Only 30 women are allowed outside at the same time given the lack of space. As part of physical activities, the administration provides women with one basketball, a ping-pong table with racquets and 2 jumping-ropes only, which female prisoners have to return before returning back to their cells. It goes without saying that women have to take turns in using the equipment and their physical activity time is limited, especially since exercises are sometimes forbidden. Indeed, former prisoners detained at Hasharon have reported that prison authorities have prevented them from exercising on the basis that they were conducting military

training. Women held in isolation³⁹ are only allowed to an hour of recreation time a day.

2.10 Forms of punishment

Punishments are often inflicted on Palestinian women in prison whenever they are considered to be creating “problems” such as strikes and protests against their detention conditions. However, reasons for punishment can also be completely arbitrary and women are blamed for actions they have not committed and management’s negligence. To give a few examples, women are punished for destroying public property when their old mattresses start decomposing or paint falls of the walls; they are accused of conducting political meetings when they gather to chat and sing and punished collectively when a prohibited object is found in the cell. Prisoners also affirm to be punished based on press reports about their cases⁴⁰. Individual punishments include isolation in solitary confinement, strip searching, confiscation of personal belongings, intimidation, threats of / and prohibition of family visits, freezing of and deductions from the prisoner’s canteen account. Additionally, women are punished collectively by unannounced late night searches of cells, which are often conducted by male jailers. Such actions not only blatantly violate women’s right to privacy, but also cause further stress and trauma.

³⁹ Two women are held in isolation as of October 2008

⁴⁰ PCC interviews with former prisoners

CHAPTER THREE

THE PROVISION OF HEALTH CARE

Various international conventions and instruments provide for the right to health of women, prisoners and civilians in times of conflict. Article 12 of the International Covenant on Economic Social and Cultural Rights (1966) stipulates clearly that everyone has the right to “the enjoyment of the highest attainable standard of physical and mental health”. It is now commonly agreed that the deprivation of one’s liberty does not suspend one’s right to timely adequate health care, but rather it becomes a public matter and one of state’s responsibility⁴¹. In a 2007 handbook designed for prison staff, policy-makers or human rights organizations, the World Health Organization (WHO) goes even further by recommending that “prison administrations have a responsibility not simply to provide health care but also to establish conditions that promote the well-being of both prisoners and prison staff. Prisoners should not leave prison in a worse condition than when they entered⁴²”. Most importantly, when ill, prisoners should be dealt with as patients, not prisoners. Primary health care facilities should be similar to those one is entitled to get outside of prison, in their own community. Therefore, as per WHO recommendations every prison “should have medical, dental, psychological and pharmacy services⁴³” accessible to prisoners 24 hours a day. The SMR (1955) stress the importance of mental well-being by recommending for every prison facility to have at least one medical officer with “some knowledge of psychiatry”. Additionally, article 25 of the Rules states that the medical officer should be proactive by visiting daily “all sick prisoners” and “all who complain of illness and any prisoner [in need of] his attention⁴⁴”.

⁴¹ Please refer to Basic Principles for the Treatment of Prisoners (1990), UN Standard Minimum Rules for the Treatment of Prisoners (1955)

⁴² World Health Organization (2007), „Health in Prison: A WHO Guide to the essentials in prison health”, p.7

⁴³ Ibidem, p.21

⁴⁴ “UN Standard Minimum Rules for the Treatment of Prisoners”, 1955, Article 26.

As health is understood in terms of general well-being rather than just preventative or curative treatment, experts recognize the importance of the effects of detention conditions on a prisoner's health condition⁴⁵. Therefore, adequate nutrition, natural and artificial light, sufficient contact with the outside world as well as physical activities and intellectual stimulation are essential for the guarantee of one's well-being. Additionally, most international instruments recognize the need of specialized gender health care in the case of women prisoners.

The UN Standard Minimum Rules for the Treatment of Prisoners affirm that:

- "In women's institutions, there shall be special accommodation for all necessary prenatal and postnatal care and treatment. Arrangements shall be made wherever practicable for children to be born in a hospital outside the institution". Article 23 (1)
- "Where nursing infants are allowed to remain in the institution with their mothers, provision shall be made for a nursery staffed by qualified persons, where the infants shall be placed when they are not in the care of their mothers". Article 23 (2)

Principle 5 of the Body of Principles for the Protection of All Persons under any Forms of Detention or Imprisonment (1988) recognizes that women have special rights and are in greater need of protection:

- "Measures applied under the law and designed solely to protect the rights and special status of women, especially pregnant women and nursing

⁴⁵ World Health Organization (2007), „Health in Prison: A WHO Guide to the essentials in prison health"

mothers, children and juveniles; aged, sick or handicapped persons shall not be deemed to be discriminatory”.

Since the Vienna Declaration in 2000⁴⁶, it is widely accepted that women’s needs in prisons are different and deserve special attention from the United Nations, policy makers and practitioners. These needs primarily include health care. WHO in general identifies 4 areas of female prisoners’ needs, namely: mental health problems, suicidal behavior, reproductive health and substance use problems. The UNODC Handbook on women imprisonment (2008) asserts that most female prisoners worldwide have been “charged with minor and non-violent offences” as a result of their marginalization, deep poverty, history of sexual abuse and domestic violence. As described in the introductory chapter of this study, most Palestinian women in prison have been arrested as either a direct or indirect result of the Israeli occupation. In addition, a minority of Palestinian female prisoners has been imprisoned due to actions carried out as a consequence of their poor mental health, social problems, domestic violence or abuse at the hands of a relative. Substance use problems however do not apply to Palestinian female prisoners. However, mental health problems and reproductive health are all applicable in the Palestinian context.

This section of the report is based on 47 questionnaires with female prisoners detained at Hasharon and Damon prisons. It also include data collected through semi-structured interviews with former prisoners released during the duration of the project and interviews with Palestinian doctors, who have examined Palestinian women in Israeli jails in the course of 2008 following their constant request to see specialists. Out of the 47 women interviewed, only 4 responded that they do not have any health problems and were not in need of health treatment during their incarceration. All the

⁴⁶ Vienna Declaration on Crime and Justice: Meeting the Challenges of the Twenty-first Century, adopted by the Tenth United Nations Congress on the Prevention of Crime and the Treatment of Offenders, 10-17 April 2000

other women cited usually more than one health need and problem which suggests the extent to which the prison administration does not address their medical condition.

3.1 Description of health services and relations with medical staff

Female prisoners' first point of contact is the prison clinic's nurse practitioner. He – as it is typically a man⁴⁷ - usually visits the sections to identify women's problems. Ill prisoners are then able to register with the clinic and request to see the doctor. However, their applications are not processed automatically and the timeframe within which a woman is actually accepted to the clinic depends on the doctor's decision based on the nurse's report. Data collected through lawyers' visits by the Mandela Institute suggests that there is a huge lack of information regarding the right to medical health care among female prisoners, which can be interpreted as a communications problem between prison staff and these women or else as medical neglect. When asked whether there is a clinic open 24 hours a day in their detention facility, most women – currently detained at Damon or Hasharon – did not provide an answer (17 out of a total of 47), and as many as 12 responded that such a clinic did not exist. Only 7 women provided an affirmative response. Other answers included that the clinic operates "according to the mood of the doctor", "the doctor works there only once a week, whereas the nurse is there all the time", or "the doctor leaves at 4pm; there is no treatment, only pain killers". In interviews with lawyers carried out throughout the year, women also complained that there was no replacement of the doctor when the latter would go abroad on a three week vacation⁴⁸ or during Jewish holidays⁴⁹ which suggests medical negligence and has caused according to some women a delay in their treatment. Overall prisoners are convinced that follow-up is lacking

⁴⁷ In the period between November 2007 and October 2008 the project has not documented the name of any female nurse working in the clinic at either Damon or Hasharon prisons. Women have always mentioned men's names during interviews.

⁴⁸ Mandela Institute, Lawyer's visit, Hasharon prison, 10 September 2008

⁴⁹ Mandela Institute, Lawyer's visit, Hasharon prison, 19 October 2008

and that their treatment consists of pain killers only. Such a perception is certainly exacerbated by the language barrier as most doctors employed by the IPS and working in the prison clinic are of Russian origins and do not speak Arabic, which makes communication, especially on issues relating to intimate health problems very difficult and does not contribute to making the patient feel at ease⁵⁰. Neither do doctors speak English, which further complicates communication with Palestinian specialists who visit prisons at the expense of human rights organizations given the evident inability or unwillingness of the IPS to assume that responsibility. As per data collected in health questionnaires, nurses are the only medical staff that speak Arabic or are of Arab origin. Therefore, their relationship with the female prisoners seem to be cordial on the one hand and on the other, women are convinced that he is actually providing good care – as opposed to the physicians⁵¹. Further, physicians, as IPS employees have dual loyalties – to the patient and to the IPS. Often, the continuation of placing a prisoner into solitary confinement or isolation, which in some circumstances has been defined as a form of mental torture depend precisely on the approval of physicians as they are required to determine his / her medical aptitude to undergo such treatment.⁵²

Communication and trust between the doctor and the patient, essential for the success of medical treatment are inexistent. Although women's medical complaints might seem trivial given that in the vast majority of cases their illnesses are not life-threatening, they need to be taken seriously as the opposite affects their mental well-being. A Palestinian orthopedic surgeon who has been visiting patients in prisons for the last 20 years in coordination with human rights organizations suggests:

⁵⁰Addameer interview with Dr. Rustom An-Nammari, orthopedic surgeon, Jerusalem, 3 September 2008

⁵¹ Ibidem

⁵² Assif T. and Francis S., (2008) „The Sounds of Silence: Isolation and Solitary Confinement of Palestinians in Israeli Detention", Physicians for Human Rights – Israel, Addameer Prisoner's Support and Human Rights Association, p.29

“Prisoners need to be seen on a regular basis, they need to be reassured that their medical condition is improving. This is an integral part of the treatment and is especially important in the case of female prisoners who are more likely to suffer from mental problems⁵³”.

Instead, approximately half of the 43 women who stated in the questionnaire that they are in need of medical health care also affirmed that their medical condition has not improved due to treatment received in prison. Five of them claim that on the contrary, it has deteriorated. Only seven women affirmed that they noticed some improvement in their health condition; the rest did not provide any answer. Whenever hospitalization is needed, it is usually arranged; however it does not occur immediately upon a patient’s request or a doctor’s recommendation for further examination outside the prison’s clinic. An analysis of health questionnaires confirms that it can vary from days to seven months depending on the medical case, the prison doctor’s recommendation and the appointment with the hospital itself. The project has also documented cases of continuous deferral of hospitalization by the prison administration, as well as its denial as a form of punishment or discrimination as described in the case study below, where a doctor refused to perform a needed surgery on the premise that his hospital was not an institution for prisoners.

Neglect and delays

Case Study:

H. A., was arrested on 25 May 2004 at the age of 30, and spent 3 years and 5 months imprisoned in Hasharon. In January 2007, the prisoner began to feel a sharp pain localized in her upper abdomen. As the pain was

⁵³ibidem

increasing, she requested to visit the prison clinic. Instead, a nurse visited her in her room and prescribed an analgesic in order to alleviate the pain. H. had to visit the clinic several times since then due to the intensity of the pain which would steadily increase for approximately thirty minutes to sometimes several hours. The prisoner also experienced pain in her back and side accompanied with nausea attacks. It was not until March 2007, after two months of continuous requests, that H. was finally referred to the Meir hospital where a stomach x-ray and an ultrasound evidenced that the patient suffered from gallstone, also known as choleliths. Cholecystectomy – gallbladder removal – was essential for her future well-being. The doctor in charge decided that H. should wait for her surgery scheduled for two days later in the hospital. The patient spent her first night at the hospital hand and legs cuffed and under the constant vigilance of a female soldier. However, the surgery never took place as the department's director in which she was hospitalized refused to perform it since in his view Meir Hospital was not an institution for prisoners. As a consequence, H. was sent back to prison where she was treated with pain relievers during the remaining 7 months of her sentence. Until then, she suffered from regular gallbladder attacks and experienced unbearable pain. The prison administration however, failed to schedule a second examination in a different hospital with an attempt to perform the surgery. She was finally operated in the Qalqilya hospital upon her release in October 2007⁵⁴.

Case Study:

Although only 22 W. suffers from heart blood pressure, heart problems and the perturbation of her menstrual cycle. Though she was menstruating regularly before her arrest in the end of 2006, she did not get her period once since then. In August 2008 she finally got the authorization to visit the prison clinic. However, she had a lawyer's appointment at the same time.

⁵⁴ Interview with former prisoner H.A., Jenin, 10 July 2008

Therefore, the doctor agreed to postpone her meeting to allow her to see the lawyer first and come back to the clinic for a medical examination later. Once the visit ended, the guards refused to take her to her appointment telling her that she should make up her mind as to what she actually wants to do⁵⁵.

3.2 Primary health care: need for a gender-sensitive approach

The analysis of questionnaires reveals that although no life-threatening health problem cases were identified and documented throughout the project, most female prisoners' overall physical and mental well-being is very poor⁵⁶.

They mostly suffer from gynecological problems (12), joint and bone pains (11), stomach irritations and digestive system problems (9), dental needs (8), mental and psychological problems (6)⁵⁷, skin diseases (6), anemia (4), vitamin deficiency (3) asthma (3), allergies and other issues (2). When asked about the causes of their medical condition, most women pointed at reasons related to their incarceration. Indeed, out of 43 women who affirmed that they are in need of health treatment, 10 women attributed the development of their illness to detention conditions. To give a few examples of responses, a 25 year-old woman prisoner detained at Hasharon stated that her dermatological problems developed due to "the insufficiency of natural sunlight in prison and the presence of moisture". A female prisoner aged 23, detained at Damon and suffering from stomach pains claimed that her illness is caused by "poor and unhealthy nutrition". Another 7 women pointed to medical neglect as the reason for their sickness. For example, a

⁵⁵ Mandela Institute lawyer's visit to Damon prison, August 2008

⁵⁶ One woman has been experiencing constant abnormal uterine bleeding for over 4 months, but her situation seems to have been addressed seriously once she was transferred to the Damon prison. In Hasharon where she was detained previously this was not the case.

⁵⁷ Interviewed women did not include the account of two women currently held in isolation and known to suffer from severe mental health problems.

24 year old prisoner has been experiencing terrible pain in her front tooth, which as she claims is starting to cause gum disease. According to this woman's account, she was in need of treatment for the last four years, but has not received it. She has been sentenced for seven and a half years. Another woman who has been complaining about uterine bleeding relates that she was being treated before her arrest, but while in prison her treatment has been interrupted. The surgery she was recommended by her doctor eventually never took place. Another 4 interviewed respondents affirmed that their medical condition deteriorated due to the ill-treatment they were subjected to while held in interrogation. One woman claiming to suffer from asthma and disc pain said that her health problems started during the process of arrest and interrogation as she was beaten and subjected to tear gas sprayings.

3.3 Lack of specialized health care

The UNDOC handbook (2008) on women and imprisonment recommends that "regular visits from civil healthcare professionals be arranged". It goes on by stating that "specialists in women's healthcare should be available for ongoing consultation, with arrangements in place for regular visits by gynaecologists⁵⁸". However, Palestinian female prisoners complain that such services are not available. Throughout the duration of the whole project, most prisoners have expressed their desire to see specialists as they felt the health care provided to them by the prison's doctor was simply not sufficient and inadequate. Further, the prison administration at both Hasharon and Damon does not offer the possibility of consultations with specialized doctors unless the prisoner is in evident need of treatment and is thus transferred to the hospital. As per women's interviews and questionnaires, there seems not to be any preventive health care. In the period from November 2007 until October 2008, Palestinian female

⁵⁸ UNODC (2008), „Handbook for Prison Managers and Policymakers on Women and Imprisonment“, Criminal Justice Series, United Nations, New York, 2008, p.51

prisoners did not have access to a single consultation or visit of a specialist to prison arranged by the prison administration. As per women's request and the evident neglect of the prison's administration to assume the responsibility of providing such services to "security prisoners", the project arranged and covered the expenses of two dentist's visits, one orthopedic surgeon's visit, two mental health care specialists and three visits of a gynecologist.

3.3.1 *Gynecological needs*

The prison clinic contains all the necessary equipment needed in a general practitioner's office, namely an examination couch, chairs, a desk, and a blood pressure machine. Hygiene standards are reportedly upheld: the clinic is clean and sterile. However, it lacks an ultrasound, which is essential in every local Palestinian gynecological office, given that culturally internal abdominal examination is usually the least preferred form of examination and often the last recourse especially for unmarried women⁵⁹. Gynecologists' visits to prison carried out during the duration of the project found that preventative gynecological aid, considered a norm in Israel is unavailable for Palestinian female prisoners. Although every woman should visit a gynecologist for a routine exam at least once a year⁶⁰, many female prisoners have served their entire sentences – more than 5 years in some cases – without seeing one.

Most women, both young – in their twenties - and older – above 40 – complain about the disturbance of their periods, which is related to their poor mental state and hormonal imbalance. In the case of older women, it might be caused by the beginning of menopause which remains unaddressed without a doctor's consultation. The harsh detention conditions, the disruption of family and social relations as well as a deep

⁵⁹ Interview with Dr. Shukri Odeh, who visited prison in the framework of the Project, Ramallah, 29 July 2008

⁶⁰ Dr. Shukri Odeh interview, 17 July 2008, Ramallah

sense of isolation have an effect on women's hormonal balance, which in turn affects and interrupts their menstrual cycle. Gynecological problems prior to a woman's arrest are likely to be exacerbated upon her incarceration⁶¹. However, most women who were following a gynecological treatment prior to their arrest affirm that it was interrupted the day they found themselves in prison, especially since no coordination exists between the IPS and Palestinian health institutions. During a lawyer's visit to Hasharon prison held on 3 March 2008, one female prisoner, M.Z. asserted that there are as many as 23 single girls in section 12, who suffer from irregular and / or painful menstruations. Additionally, at the time, there were 13 married women who had expressed their desire to the prison's administration to see a gynecologist. That request had never materialized despite sharp pain they were experiencing in their lower stomach. According to M.Z.'s account, such pain was caused by complications resulting from the lack of provision of sufficient post-natal health care for women who gave birth during or prior to their incarceration and the neglect to remove and / or replace intrauterine devices, also known as contraceptive coils⁶². Such form of contraception is known to create side-effects in the form of longer, heavier and more painful periods. Additionally, it can lead to internal infections. Therefore, gynecologists usually recommend that intrauterine device users should consult a doctor every 6 months to a year. As explained above, this is not the case as preventive gynecological examinations are not provided by the IPS.

Palestinian doctors who visited female prisoners point out that the latter are extremely cautious and reticent to talk to Israeli doctors about their gynecological problems due to the language barrier and cultural differences. As per data collected in health questionnaires, nurses are the only medical staff that speak Arabic or are of Arab origin. However, nurses,

⁶¹ Ibidem

⁶² Layer's report, 3 March 2008, Mandela Institute

just as doctors are usually men, which makes the provision of adequate gynecological health care or even the identification of gynecological problems even more problematic. Not only are women in need of regular consultations, but they are also in need of seeing a *female* gynecologist. Indeed, such a perception seems to be the global norm on women imprisonment as it is reiterated in the UNODC handbook:

“Wherever possible, women should receive medical treatment from women nurses and doctors. If a female prisoner requests that she be examined or treated by a female physician or nurse, a female physician or nurse should be invited to the prison establishment; to the extent they are available, except for situations requiring urgent medical intervention⁶³.”

The need for female staff is even greater in this specific context given the distrust that exists between Palestinians and Israelis due to the nature of the conflict and the on-going Israeli occupation of the Territories.

- *Special attention to pre-natal and post-natal health care*

Article 12 of the CEDAW stipulates that States Parties shall ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation⁶⁴. There were four cases of women giving birth in prison in extremely difficult conditions in the period between 2003 and 2008, with one woman delivering in January 2008, during the duration of the project. It is clear from interviews with these women that both antenatal and post-natal health care is insufficient.

⁶³ UNODC (2008), „Handbook for Prison Managers and Policymakers on Women and Imprisonment”, Criminal Justice Series, United Nations, New York, 2008, p.51

⁶⁴ UN Convention on the Elimination of all Forms of Discrimination against Women, 1979, Article 12

Women's diet during pregnancy is rarely altered to include the necessary carbohydrates, fats, proteins, and fibers for a healthy development of the fetus. Women affirm that they would only get an additional *labaneh* (yoghurt) at breakfast when they were pregnant and milk when breastfeeding. Typically, antenatal care in developing countries includes seven to ten visits obstetric visits. A reduction in the number of visits may lead to increased anxiety for pregnant women and endanger fetal well-being⁶⁵.

Case Study:

Even though the Hasharon prison authority was aware of M.'s pregnancy at the time of her arrest on 17 April 2003, they did not set any procedures and/or check-ups neither for the monitoring of her pregnancy nor for the assessment of her as well as the fetus' well-being. Standard prenatal care such as an obstetric ultrasound, checking the gestational age, assessment of fetal size, diagnosis of fetal malformation, fetal movement, pelvic abnormalities, multiple pregnancies, was only carried out in the eighth month at the Assaf Harofeh medical center in Rehovot, which she was transferred to with both hands and legs cuffed. Moreover, mechanisms aimed at detecting potential complications with her pregnancy such as anemia, hypertensive disorders or bleedings were not performed at all. Though she was given folic acid - essential for pregnant women since in order to protect against neural tube defects that may result in malformations of the spine (spina bifida), skull, and brain (anencephaly) – this did not occur until the last month of her pregnancy and only following M.'s continuous requests, who was worried for her future baby's health. However, she did not receive a tetanus immunization. A blood test to determine complications such as diabetes was performed only once - 4 days after delivery. A syphilis test however, never happened. No balanced diet enriched of carbohydrates, fats, proteins, and fiber was provided to her

⁶⁵ World Health Organization

by the jail administration. During the three days she stayed at the hospital recovering (10-12 October), no procedures were set to assess potential problems such as hypertension, infections, bleeding or anemia. She did not receive any counseling or information on breastfeeding for the baby. Additionally, following an initial 10 minutes with her newborn child after giving birth, M. was prevented from keeping him beside her except for breastfeeding which would occur at a six hour interval. Once Manal's son, Nour, was transferred to jail together with his mother, he was not given special exceptions appropriate for a child: he was placed with his mother in the same room together with six female prisoners, he was allowed to have outside breaks only with his mother for three hours, while toys were not allowed into the prison despite his family attempts to deliver them. Manal declared: "I worry for the life of Nour because the prison guards sometimes use gas or water against the female prisoners. He needs the sunlight and fresh air, toys, etc. And none of this is allowed. When he is provided with diapers, they are always too small and upset Nour". M. was finally released on 8 April 2007.

3.3.2 *Orthopedic needs*

As mentioned above, the project managed to arrange one visit of a Palestinian orthopedic surgeon following a general demand of female prisoner in May / June 2008. Out of the 10 women that the doctor examined, only two women were diagnosed with early rheumatoid arthritis and were recommended to be sent for further tests. The illness attacks one's immune system and joints causing huge pain and sometimes leading to substantial loss of mobility. Although both women had complained of pain before, including one of them who stopped going outside of her room during recreation time, as she lost the ability to move, they were neither diagnosed with the illness at the prison clinic nor sent for further examination. This suggests medical neglect and more importantly the

avoidance of the prison administration and medical attendants to take women's complaints seriously. As rheumatoid arthritis is a chronic disease, which progresses over time, it is essential that it is diagnosed as early as possible in order to start treatment in its early stages. A close follow-up is needed by a group of specialists, including a rheumatologist, an orthopedic surgeon and both a physical therapist and a mental health counselor⁶⁶. Lawyer's visits since the orthopedic surgeon examination suggest that these two women were not subjected to further examination. Needless to say that access to a team of medical and psycho-social specialists was not granted.

The other 8 women were diagnosed with general bone pain and back pain, which are mostly caused by detention conditions and are not related to rheumatic diseases. Their orthopedic problems were developed due to dampness and moisture present in their accommodations, the lack of natural sunlight and exercise as well as due to poor and insufficient nutrition. Thin mattresses and uncomfortable beds made of iron are also a factor contributing to their back problems. Typically, in a "normal environment", neither surgery nor a major treatment is needed. Such cases can be remedied with the prescription of supportive drugs, also known as non-steroidal inflammatory and most importantly physical exercise. Most importantly, the lack of movement and natural sunlight imposed by the prison environment needs to be compensated by a balanced diet, namely food rich in calcium, proteins and a considerable amount of vegetables to ease bone pains⁶⁷. Dr. N. relates his impressions after the examination of Palestinian female prisoners:

"They try to exercise but that is not enough. Some of them are more conservative and wear the jilbab, which suggests that they

⁶⁶ Arthritis Foundation website, last Accessed 27 September 2008

⁶⁷ Interview with Palestinian orthopedic surgeon, Dr. Rustom An-Nameri Jerusalem, 3 September 2008

are not able to move freely especially under male supervision. In a typical environment outside of prison, a lot of women get more exercise by going about their daily lives and running errands as opposed to regular physical education. As they are not allowed to do their own cooking, do anything that resembles life outside of prison, they are more susceptible to pain”.

Semi-structured interviews with women conducted in both Damon and Hasharon prisons prove that although physical education is in theory permitted, most of them do not exercise as the only place where it is allowed is the narrow recreation space. As the number of Palestinian female prisoners is disproportionately smaller than that of men, they automatically suffer from space constraints. Additionally, the presence of male jailers in the section presents a disincentive for most women, which come from quite conservative backgrounds and do not feel comfortable when watched by men. They also complain about the lack of equipment to exercise. Some of them affirm that they try to exercise early in the morning, which again is very difficult because of the lack of space in the rooms. Lack of sport equipment and space constraints, they feel, is discriminatory specifically against women. A 33 year-old prisoner at Hasharon asserted that “physical education is not allowed even though we have requested for an hour of sport as it is permitted in most prisons. Our request was turned down without providing a reason. This could alleviate back and legs pain that most girls are suffering from”.

In that sense, overcrowding, the lack of space and sports facilities has a direct impact on the medical conditions of female prisoners. It is fair to say that it constitutes medical negligence from the side of the IPS, which is obliged by international regulations to create an environment which contributes to the overall mental and physical well-being of prisoners.

3.3.3 Dental needs

Most women claim that although dental services are available upon request, their standard is very low. All of those who claim to experience pain caused by teeth problems also stated that the treatment is inadequate, not timely and unhygienic. Some of them have been waiting for over a year in order for the prison administration to arrange a dentist's visit inside prison. Following their request, they were only treated with pain killers by the clinic's doctor. The delay in providing dental services was such that one family from 1948 Territories had arranged for a private dentist to visit their daughter detained at Hasharon. Additionally, in the duration of the project, the Mandela Institute had arranged for 2 dentist visits as per the general request of female prisoners. Again, the persistence of women's requests to see specialists expressed to lawyers proves the huge medical neglect of the IPS. Most prisoners complain that when provided, dental care only consists of pulling out teeth in more complicated cases as opposed to trying to save them. Gum disease is not treated at all. Similarly, orthodontic needs of prisoners are not met. One woman, who has been in need of removing her braces since 2006 has been continuously referred to the dentist as opposed to an orthodontist. To this date, her situation remains unaddressed.

3.4 Mental health care

The 1998 WHO Consensus Statement on Mental Health Promotion in Prisons underlines that positive mental health is equally as important as the absence of mental illness, since it affects an individual's overall well-being. Further, it stresses that "while it may be difficult to contemplate the existence of positive mental health among prisoners, prison should provide an opportunity for prisoners to be helped towards a sense of the opportunities available to them for personal development, without harming themselves or

others". In order to achieve this, prisoners must in general "feel safe, be assisted towards insight into their own offending behaviour, and be treated with positive expectations and respect"⁶⁸. Therefore, different forms of therapy and counseling should be accessible, especially in the case of women, who are more likely to show signs of depression or poor mental health due to separation from their children and a feeling of complete isolation. Additionally, prison employees should be sensitized to the particular mental health needs of women at times of distress caused by menopause⁶⁹.

However, a 2008 study by Physicians for Human Rights (PHR) – Israel and Addameer argues that mental health services in Israeli prisons are in general only "limited to medication [...] and do not include accompanying supportive therapy sessions"⁷⁰. Whereas this is true for all prisoners – common law and security – it is aggravated in the case of Palestinian prisoners due to the language barrier. As mentioned before, most prison physicians do not speak Arabic. Neither are they familiar with the Palestinian culture and social practices, an essential element in psychiatric or psychological treatment. This is also true for psychiatrists who are forced to use the services of a translator in order to communicate with the patient. Needless to say that such an arrangement only exacerbates the mistrust which is already in place. PHR and Addameer (2008) also point out that unlike Israeli prisoners, Palestinians "are not eligible for the services of social workers, who provide an additional support network for criminal prisoners"⁷¹. The majority of Palestinian female prisoners have been directly exposed to the violence imposed by the Israeli occupation on their

⁶⁸ WHO Regional Office for Europe (1998), "Mental Health Promotion in Prisons", The Hague, Netherlands, 18-21 November 1998, p. 5

⁶⁹ UNODC (2008), „Handbook for Prison Managers and Policymakers on Women and Imprisonment", Criminal Justice Series, United Nations, New York, p.53

⁷⁰ Tal Assif and Sahar Francis, (2008) „The Sounds of Silence: Isolation and Solitary Confinement of Palestinians in Israeli Detention", Physicians for Human Rights – Israel, Addameer Prisoner's Support and Human Rights Association, p. 5

⁷¹ Ibidem, p.5

lives prior to arrest. At least 10 women who were in prison at some point during the length of the project experienced the death of a relative – husband, fiancé or brother – as a direct result of the Israeli Occupying Forces’ activities in the Territories. A considerable amount of women prisoners – more than 20% – have at least one relative detained in prison. Most likely, these types of personal experiences and traumas have left marks on the psyche of these women, which the prison environment can only exacerbate if proper mental health care is not provided.

3.4.1 *Unsafe and unhealthy environment*

As mentioned above, mental well-being is directly related to one’s feeling of safety in prisons. Although the relationship with medical staff – nurses and doctors – might be based on mutual respect, it is the opposite in the case of treatment that women are experiencing from jailers. Palestinian female prisoners rarely feel safe in Israeli jails as they are often confronted to different forms of individual and / or collective punishment as described in section 2.10. Another factor which contributes to Palestinian female prisoners’ feeling of insecurity is their inability of controlling their own food as meals are usually cooked by Israeli criminal prisoners (males), as it is in the case of the Hasharon prison. Former prisoners recall that they were always extremely worried of what they were eating, especially since they often found cockroaches in the cooking pots brought to them by Israeli criminal prisoners. Whether intentional or not, such incidents are evidence for poor hygiene standards in the kitchen, but most importantly impose further stress on women, who are already distrustful of what is being served to them in a context of being characterized as “terrorists” and “security prisoners” by the Israeli authorities. Further, discrimination and bullying of Palestinian female prisoners by medical staff following their transfer to Israeli hospitals has been reported⁷². Medical staff’s primary obligation and loyalty should be towards the patient as stated in the World Medical

⁷² Addameer interviews with former female prisoner, 7 October 2008

Association Declaration on the Rights of the Patient (1981)⁷³. As per the declaration, every patient is not only “entitled without discrimination to appropriate medical care”, but has also the right to both confidentiality and dignity. Thus, “the patient’s dignity and right to privacy shall be respected at all times in medical care and teaching, as shall his/her culture and values”. Interviewed female prisoners recall however, that upon arrival to the hospital they were often treated as prisoners, as opposed to patients. Physicians and nurses would constantly interrogate them about the details of their legal case while making constant ironic and offensive remarks. The same would apply to female prisoners visiting child-care clinics with their children. Women are usually more susceptible to be affected mentally by such treatment than men and every effort should therefore be made by the prison authorities to protect their rights and dignity.

3.4.2 *Women with mental illnesses*

Apart from women who suffer from depression due to detention patterns, death in the family caused by the ongoing occupation, human rights violations and isolation, the project has documented 3 cases of female prisoners in need of serious therapy. While one of them has been released at the end of her sentence in 2008, the other 2 remain in prison. All three of them were mostly kept in the isolation section – section 13 – of the Hasharon prison. At different occasions, they were transferred for a short period of time to the isolation section of Neve Tertza, Israel’s only woman’s facility in Ramla. Isolation is usually intended at separating either a dangerous or mentally ill prisoner from the general population of prisoners. An isolated prisoner usually does not even make eye contact with guards and spends his / her recreation time alone. Mental problems which might have been present beforehand are only likely to be exacerbated. In all three cases the reason of incarceration was the same – an attempt to stab a soldier – and for all of them this was a second arrest which occurred shortly

⁷³ World Medical Association Declaration on the Rights of the Patient (1981), Paragraph 10

after their first release. Interviews with the female prisoners and their families suggest that they experienced mental problems prior to their imprisonment either directly linked to the violence of the Israeli occupation or to social and familial problems.

Case Study:

R. experienced a serious nervous breakdown as soon as she learned that both her brother and her cousin were assassinated by the Israeli army during her first arrest – a piece of information which was not transmitted to her while she was in prison. Having not found any support upon release in the society and family, which suffers from socio-economic and mental problems, 28 days later she went to the Qalandia checkpoint and attempted to stab a soldier. This incident led to a second sentence of 1 year and 8 months. Although R. manifested obvious needs of psychiatric therapy, her impression is that she did not receive adequate treatment. During that time she was held in individual isolation as other women deemed her violent and a trouble-maker and refused to live with her in the same room. As her family was prevented from visits on “security grounds”, the only contact with other human beings was during monthly visits of an ICRC delegate and monthly visits of the prison’s psychiatrist. She complains however, that he would only prescribe medications as opposed to “real” psychiatric treatment accompanied by consultations and therapy sessions⁷⁴. Other former prisoners affirm that she would regularly hurt herself. R. was released in May 2008.

Case Study:

In 2005, at the age of 17, T. had attempted to stab an Israeli soldier and was convicted to 8 years of prison. Her act might have been an indirect result of abuse at the hands of a relative, which also led to an attempted

⁷⁴ Addameer interview with R., 21 October 2008, Ramallah

suicide even before her arrest. Once in prison, she was placed into isolation because other female prisoners did not agree to live with her. Her sense of isolation is exacerbated by the lack of family visits as her father does not recognize her. She is only allowed to talk to her mother on the phone once every 6 months. As per a 2008 report jointly published by Physicians for Human Rights / Israel and Addameer, she has been described “as a “prisoner in distress” and potentially suicidal” in her medical files. She has repeatedly attempted to injure herself. Although she is being given psychiatric treatment, the latter seems to be inadequate and does not respond to the patient’s needs who complains that it mostly consists of medications as opposed to counseling. T.’s request for medical assistance from PHR-Israel, which arranged the possibility of visits of a Palestinian social worker, was rejected. Instead the IPS arranged for an Israeli social worker to come daily to prison and have conversations with the prisoner. However, T. was reportedly “uncooperative because she did not believe in the social worker’s treatment or reliability”⁷⁵, especially since the sessions were held through the cell door and in Hebrew, as opposed to Arabic. In another instance T. reports that she had been placed with A. - a 32 year old female prisoner held in individual isolation since 2006 because other women did not get along with her - in the same cell after their transfer from Neve Tertza to Hasharon on 17 September 2008. Both are known to have mental problems and have a history of being violent and injuring themselves. Shortly after the transfer, they started shouting at each other and fighting. Four days after the event, they jointly attended a lawyer’s visit with their faces and hands bruised and bleeding. A., clearly in distress started crying and complained to the lawyer that she requested from the Hasharon prison administration to be transferred to another room, but her demand was refused. Instead, she was held for a three-day period by herself in a cell and transferred back to joint isolation with T., who started

⁷⁵ Tal Assif and Sahar Francis, (2008) „The Sounds of Silence: Isolation and Solitary Confinement of Palestinians in Israeli Detention”, Physicians for Human Rights – Israel, Addameer Prisoner’s Support and Human Rights Association, p. 25

being violent again. Even though both women started beating each other once again, the administration would still refuse to separate them.

The case of mentally ill prisoners is indeed problematic in the sense that they are often dangerous to themselves and to their environment. There does not seem to be a sustainable solution for the treatment of mentally-ill prisoners, however as per PHR-Israel (2008) recommendations their general condition does not have to necessarily worsen while in prison. They can and should receive regular visits from Red Cross volunteers, which would ideally take place in Arabic and without a divider in order to develop trust and put the prisoner at ease. To date, such recommendations have not been implemented, instead female prisoners in need of mental health treatment seem to be only given medication, violently contained and punished for their misbehavior and attempts of self-injury.

3.5 Transfers to hospital for medical treatment

Most women who were in need of hospitalization at some point during their imprisonment have been referred to the Meir hospital in Kfar Saba. All of them describe the experience as extremely difficult, exhausting and humiliating. One woman, suffering from myopia and whose eyesight was drastically deteriorating waited for over a month and a half to be seen by an ophthalmologist at the Meir hospital. She describes the experience of the transfer as extremely degrading to the point that she prefers not to receive medical treatment than being subjected to such “inhumanity”. Before leaving prison to go to the hospital on 15 September 2008, H. was strip searched, then handcuffed and shackled, with a chain linking her hands and legs restricting her movements even further. She had to ask for guards’ help in order to get in to the vehicle, which was meant to transport her to the hospital. While getting off the vehicle, once in prison, she fell on the ground without any of the present 8 guards coming to help her for a few minutes. Humiliated and in pain, H. laid on the ground until one female

guard decided to actually help her. “I felt a sort of humiliation one cannot describe” would she say during a lawyer’s visit⁷⁶.

3.5.1 *Shackling during pregnancy*

Palestinian pregnant women in Israeli jails do not get preferential treatment in terms of transfers to hospitals, which are equally carried out under strict military and security supervision with hands and feet shackled with metal chains. The prisoners are also chained to their beds until they enter delivery rooms; after giving birth they are chained once again. The UNODC handbook cites “hemorrhage or decreased fetal heart rate” as one of the complications that may occur during delivery if a woman is shackled during labour. It is commonly agreed that if a caesarean section is needed, a delay of even 5 minutes may result in permanent brain damage to the baby⁷⁷.

Case Study:

A.M., a pregnant woman from Gaza in her early forties and mother of 8 children, was arrested on May 2007 at Beit Hanoun (Erez) Crossing. After arrest, she was transferred to the Hasharon prison. In view of her age, A.M. required a higher level of care and medical supervision. Instead, she suffered from severe weight loss and fatigue due to low-quality food and unsuitable conditions inside the prison. In January 2008, feeling labour pain, the detainee was transferred to Meir Hospital in Kfar Saba where her arms and legs were kept shackled at the request of the IPS. The cuffs were removed only inside the delivery room, and put back immediately after childbirth. A.M. went through the dehumanizing experience completely alone, since her family and husband were not allowed to visit her even after the delivery of the baby. She describes her painful experience: "After delivery, both my arm and leg were tied to the bed. I was left in this position for several hours before being taken back to my room. My baby was

⁷⁶ Mandela Institute for Human Rights, lawyer’s visit to Hasharon prison, 17 September 2008

⁷⁷ UNODC (2008), „Handbook for Prison Managers and Policymakers on Women and Imprisonment“, Criminal Justice Series, United Nations, New York, p. 20

brought to me for breastfeeding only twice a day." After a two day stay in hospital, her transfer back to prison occurred under the exact same circumstances. Despite post-labour pain, both her hands and feet were shackled, which prevented her from holding and taking care of her newborn baby. As she was not wearing seat belts her head kept hitting the side of the vehicle.

Case Study:

When M. first started feeling labour pain on 8 October 2003, she was transferred to the hospital during which not only did she endure extra suffering due to having both hands and legs shackled, but also because of the rough treatment she received from the guards escorting her, who were constantly pushing her. At her arrival to the hospital, no wheel chair was provided, forcing the patient to walk all the way to her room. Since M. was not at the necessary dilatation for childbirth, she was sent back to prison by the physician. There, she suffered 2 days of labour pain with no medical attention or pain relief. The prison administration became aware of her pain at 5 am on 10 October during the morning counting of prisoners. Again, during her second transfer to hospital, both her hands and legs were restrained. Furthermore, the cuffs were not removed during the 4 hours prior to delivery. Once inside the delivery room, her legs were released from the cuffs and instead were shackled to the bed.

Such practices are a blatant violation of human rights and are in contravention with international norms and regulations. Standard Minimum Rules for the Treatment of Prisoners stipulate that body restraints can be used "as a precaution against escape during a transfer, provided that they shall be removed when the prisoner appears before a judicial or administrative authority"⁷⁸. The UNODC handbook on women in prisons

⁷⁸ Standard Minimum Rules for the Treatment of Prisoners (1955), Rule 33 (a)

(2008) clearly indicates that “the use of restraints on pregnant women during medical examinations, transport to hospital to give birth and during birth is unacceptable”⁷⁹. Different ways of supervision should be identified and applied to pregnant women during transfer and child birth.

⁷⁹ Tal Assif and Sahar Francis, (2008) „The Sounds of Silence: Isolation and Solitary Confinement of Palestinians in Israeli Detention”, Physicians for Human Rights – Israel, Addameer Prisoner’s Support and Human Rights Association, p. 41

CHAPTER FOUR

RIGHT TO EDUCATION

Education is seen nowadays as a tool for social development and an engine for lasting peace. The restriction on one's freedom should not suspend the right to education; rather, as in the case of medical health care, its fulfillment should be a matter of state responsibility. A prisoner's opportunities are obviously restricted in the sense that he / she cannot exercise his / her right to freedom during the period of incarceration. However, the state needs to provide all necessary arrangements in terms of education and vocational training in order to ease a prisoner's professional and social reintegration into the society. The right to education in general as well as technical and professional education for all has been stated in article 26 of the Universal Declaration of Human Rights (1949). Education however is not only understood literally, but it also encompasses the right to personal development, cultural activities and vocational training. It is according to UNESCO's definition the realization of one's full potential as a human being. Various international declarations and instruments provide for the right to education of prisoners:

- "All prisoners shall have the right to take part in cultural activities and education aimed at the full development of the human personality"⁸⁰
- "Every institution shall have a library for the use of all categories of prisoners, adequately stocked with both recreational and instructional books, and prisoners shall be encouraged to make full use of it"⁸¹
- "Provision shall be made for the further education of all prisoners capable of profiting thereby"⁸²
- "So far as practicable, the education of prisoners shall be integrated with the educational system of the country so that after their release they may continue their education without difficult"⁸³

⁸⁰ Article 6, Basic Principle for the Treatment of Prisoners

⁸¹ UN Standard Minimum Rules for the Treatment of Prisoners, 1955

⁸² Article 77 (1), Standard Minimum Rules for the Treatment of Prisoners, 1955

- “Education should be an essential element in the prison regime; disincentives to prisoners who participate in approved formal educational programs should be avoided”⁸⁴
- “Education in prison should aim at developing the whole person, bearing in mind the prisoner’s social, economic and cultural backgrounds”⁸⁵
- “All prisoners should have access to education, including literacy programmes, basic education, vocational training, creative, religious and cultural activities, physical education and sports, social education, higher education and library facilities”⁸⁶

Additionally, article 10 of the “United Nations Convention on the Elimination of All Forms of Discrimination against Women” stipulates that:

- “States Parties shall take all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on a basis of equality of men and women:
 - (a) The same conditions for career and vocational guidance, for access to studies and for the achievement of diplomas in educational establishments of all categories in rural as well as in urban areas; this equality shall be ensured in pre-school, general, technical, professional and higher technical education, as well as in all types of vocational training;
 - (b) Access to the same curricula, the same examinations, teaching staff with qualifications of the same standard and school premises and equipment of the same quality”

Finally, the right to education of juvenile offenders is protected by the UN Rules for the Protection of Juveniles Deprived of their Liberty (1990):

⁸³ Article 77 (2), Standard Minimum Rules for the Treatment of Prisoners, 1955

⁸⁴ Article 3(e), United Nations Economic and Social Council Resolution, 1990/20

⁸⁵ Article 3 (a), United Nations Economic and Social Council Resolution, 1990/20

⁸⁶ United Nations Economic and Social Council Resolution, 1990/20, 3 (b)

- “Every juvenile of compulsory school age has the right to education suited to his or her needs and abilities and designed to prepare him or her for return to society. Such education should be provided outside the detention facility in community schools wherever possible and, in any case, by qualified teachers through programmes integrated with the education system of the country so that, after release, juveniles may continue their education without difficulty. Special attention should be given by the administration of the detention facilities to the education of juveniles of foreign origin or with particular cultural or ethnic needs”⁸⁷.
- “Juveniles above compulsory school age who wish to continue their education should be permitted and encouraged to do so, and every effort should be made to provide them with access to appropriate educational programmes”⁸⁸

In practice however, the IPS restricts the right to the continuation of girls’ formal schooling, women and girls’ right to vocational training and their right to higher education, which makes their reintegration into the society much harder upon their release. Based on 47 questionnaires specifically designed to determine the situation of education in prison, lawyers’ visits and interviews with former detainees, this chapter examines these women’s educational needs as well as the IPS’ compliance with international law in terms of providing them.

4.1 Female prisoners’ educational background

Many Palestinian female prisoners were following some form of education at the time of their arrest. Based on the data collected through questionnaires and interviews, around 20 % of female prisoners were university students when arrested, including some, who were learning by

⁸⁷ UN Rules for the Protection of Juveniles Deprived of their Liberty, 1990, Rule E (38)

⁸⁸ UN Rules for the Protection of Juveniles Deprived of their Liberty, 1990, Rule E (39)

distance at the Al-Quds Open University; another 20 % had finished their high school education including passing the final matriculation exam, known as Tawjihi, while approximately 24 % had already obtained their university degrees when they got arrested. The rest were high school students, or dropped out of school after the end of their primary education or completed only 10 grades of formal schooling. Only one woman claimed that she was illiterate before her incarceration. The project has also documented one case of a female prisoner with a Master's degree in Pharmacology as well as another one with a Doctorate.

When asked whether they obtained an education certificate or degree in prison, 24 out of 47 women provided a negative answer, 13 said yes and 10 did not respond. Looking at other responses provided in the same questionnaire it is most probable that the last category of women simply did not acquire any education certificate, diploma or degree either. Out of those who provided a positive response the vast majority of women passed the Palestinian general examination exam, commonly known as Tawjihi, inside prison. This data is particularly telling of the lack of education opportunities provided to Palestinian women in prison.

4.2 Right to education of minors

Whereas there were only five Palestinian girls under the age of 18 as of October 2008, others have been arrested since the beginning of the Al-Aqsa intifada. At least 5 minors were released throughout the duration of the project (November 2007 – November 2008). According to the UN Convention on the Rights of the Child, anyone below the age of 18 is considered a child. Israel uses such a definition in relation to its own citizens. However, as per Military Order 132 applied in the occupied Palestinian territory, any Palestinian above the age of 16 is considered an adult. All Palestinian girls between the ages of 16 to 18 are therefore detained together with adult Palestinian women and as a result are not

entitled to preferential treatment, nor do they receive any form of education whether it be vocational training or the continuation of their schooling education. In contrast, as per the IPS regulations, Israeli juvenile offenders are able to complete formal education from grade 8 to 12. In the Ofek facility for Israeli juvenile offenders located in the Hasharon complex for example, there is a school with 19 classrooms in which no more than 10 students study at a time. The children there have the opportunity to follow a curriculum specially designed for them by the Israeli Ministry of Education, which includes 4 hours of class a day combined with educational workshops and work. Similarly, they have access to 33 teachers employed by the Israel Association of Community Centers on a permanent basis. At the end of a 12 week trimester, prisoners take exams and their grades are then certified by the Israeli Ministry of Education⁸⁹.

Despite the 1997 Israeli Court ruling⁹⁰, which affirmed that Palestinian children detainees – i.e. children under the age of 16 as defined by the Israeli Military orders – should follow courses in prison according to the Palestinian curriculum, none of the girls arrested in the last 8 years since the beginning of the Al-Aqsa Intifada have been accorded that right. However insufficient, Palestinian boys detained in the Damon and Hasharon prisons do get at least access to approximately 2 to 9 hours of formalized schooling in Arabic, English, Hebrew, mathematics and sometimes science⁹¹. They are taught by a Palestinian teacher from the 1948 Territories. That same right was never applied to Palestinian girls, even though at least two 15-year old were arrested and released in the last few years. Indeed, released in August 2008 17 year-old D. affirms that no teacher has ever come to give her courses even though she was a 9th grade student and only 15 at the time of her arrest in January 2007.

⁸⁹ Lis Jonathan, "Learning the Hard Way", Haaretz, 17/02/2008

⁹⁰ Mohammed Frehat and ors vs IPS (1997), 400/97

⁹¹ DCI / Palestine Section, (2008) "The right of the child to education in emergency situations", Submission to the Committee on the Rights of the Child Day of General Discussion, 5 August 2008

There are currently 5 Palestinian girls under the age of 18 held together with adult female prisoners. Two of them are incarcerated at Hasharon, whereas the other 3 are held at Damon. Although four of them were high school students at the time of their arrest, they were still not given the opportunity to follow any form of structured education in prison, as per the Palestinian curriculum. One of them has requested for the possibility to have access to a mathematics teacher in order to help her prepare her Tawjihi exam, but her application was requested. She ended up having to study by herself without any institutionalized help. Further, two of the girls are administrative detainees, with one of them a high school student at the time of her arrest. The extension of her detention without trial or charges not only compromises her right to legal justice, but also prolongs the disruption of the girl's education process, who will most likely have to repeat her final high school year upon her release. Instead of being a matter of state responsibility, the education of girls under the age of 18 becomes one of older female prisoners and is left up to them.

4.3 Studying environment and books

The Palestinian female prisoners' section at Hasharon currently includes a small library of approximately 200 books⁹² given to female prisoners by their families and / or brought by the International Committee of the Red Cross (ICRC). None of the books are provided at the expense of the IPS. The library is open for use only three times a week – on Sundays, Wednesdays and Thursdays – for a period of 3 hours, from 13:00 until 16:00. The small room of approximately 10 square meters includes tables and chairs and is used by older prisoners during open hours to teach younger ones – under the age of 18 – Mathematics and Arabic grammar. When asked about the quality of books in the library women tend to have different opinions. Better educated women usually find its services very

⁹² Mandela Institute questionnaire with female prisoner, September 2008

poor. In the words of one prisoner: “Yes, there is a library, but most of the books are about religion. There are not enough books of general interest and culture. Overall, the library at Hasharon is not at a high standard”. Others confirm that it is “very small”, that “books are very old and rarely change” or that it is “very, very simple”. Damon, on the other hand, has neither a library nor a study room. Three months after the IPS’ decision to transfer half of Palestinian female prisoners to Damon and incarcerate new ones there, a library was still not provided⁹³.

Families of prisoners are allowed to bring them books only once every three months. Yet, there is no set number which is permitted; rather the decision on how many are allowed is arbitrary and seems to depend on the personal preference of the security guard. Families affirm that sometimes as many as five books are allowed, but in other cases only four, three or two. In the past female prisoners at Hasharon were requested to return books they had previously received from their families in exchange for new ones. Books and magazines related to general culture, politics and religion are permitted. So are novels. However, all of them are thoroughly checked by security officers before reaching the prisoner. In some instances this process can take up to several weeks or even months. Some books, considered to include “dissident” or nationalistic content are prohibited. No technical magazines or science books dealing with subjects such as chemistry and physics are allowed, which is becoming problematic for those women preparing the Tawjihi exam in the scientific stream. As a general rule, encyclopedias, dictionaries and thick books are not prohibited without the administration providing a reason. The IPS however, does not supply them whenever requested by female prisoners. Such a decision is rendering the studying process increasingly more difficult, especially for those women attempting to learn Hebrew and take courses at the Open University of Israel. Equally, textbooks necessary to prepare the general

⁹³ Questionnaires with female prisoners, Mandela Institute, September 2008

secondary examination provided and delivered by the Palestinian Ministry of Education in coordination with the Israeli District Coordination Office reach women after long delays due to lengthy searches⁹⁴.

4.4 Tawjihi exam and secondary education

The Tawjihi exam is currently the only form of Palestinian certificate that is available to female prisoners in Israeli jails. The majority of Palestinians perceive the Tawjihi as the most important exam of their lives, due to the importance it is given in society; a young person's reputation in the community could depend on their Tawjihi results. Studying for the Tawjihi exam currently exists as the only option for many non-Hebrew speaking prisoners⁹⁵ aspiring to learn and seeking intellectual stimulation. However, as per data collected in education questionnaires, more than 50% of women who claim to have taken the Tawjihi exam in prison had already taken it once before – either prior to their arrest or at a different point in time during incarceration. These numbers demonstrate the extent to which the IPS fails to provide any other education and personal development opportunities to Palestinian female prisoners.

In order to be eligible to take the Tawjihi exam in prison, women and girls have to register with the Palestinian Ministry of Education and Higher Education, which is typically done through their families. As no institutionalized learning framework exists for female prisoners, they are forced to rely on their own understanding and interpretation of study materials. Even at times of exams teachers are prohibited from entering prisons with the purpose of formally instructing female prisoners. Similarly, prisoners are prohibited from communicating with Palestinian teachers and schools through other means such as phones, letters or visits. Importantly, the Tawjihi exam has been forbidden several times in the past and in some

⁹⁴ For more detailed information, refer to "Fact Sheet 3: Denying Chances for a Better Future – Palestinian Female Prisoners Right to Education", August 2008

⁹⁵ Refer to the section on "University education"

instances cancelled at the last moment as a means of collective punishment.

Tawjihi 2008:

Although the Tawjihi exam was permitted in July 2008 and 13 women at the Damon prison had the opportunity to take it, they asserted not knowing whether it would actually happen until the first day of the exams. In addition, the time of the exams was not set since it depended on the time the examination supervisor, a Palestinian holding a West Bank Identity card, would actually arrive to the prison, as he was responsible for bringing examination questions and forms. The length of his journey however, was unpredictable and varies according to searches at checkpoints inside the West Bank, at the Green Line and upon his arrival to the prison. The anticipation of the questions and exams added further stress and pressure on female prisoners. The 2008 Tawjihi exams finally took place at Damon inside the courtyard used for recreation, a place inadequate for studying as it was not shaded and hence too hot in the middle of the summer. Although delivered to prison one month before the date of the exams, textbooks reached prisoners only 10 days prior to the first day of the Tawjihi.

All the above-mentioned factors – the uncertainty of whether exams will actually take place until the very last moment, the anticipation of the exam supervisor on the day of the exams, the inability to seek advice from and communicate with teachers and the inappropriate learning environment – contribute to the overall performance of female prisoners and increase the level of stress and mental pressure that women and girls already suffer from.

1948 Palestinians – Case Study

The procedure for Palestinian prisoners from the 1948 Territories differs as they follow the Israeli curriculum. Therefore, if they wish to obtain a

certificate of completion of high school, they have to take the Israeli matriculation exam, known as the Bagrut, and register both inside the prison and at the Ministry of Education through their families. Such an opportunity for instance is given to Israeli juveniles convicted for criminal offenses. According to press reports as many as 127 Israeli juvenile prisoners have studied for the Bagrut inside prison. However, this right has been denied in 2008 to “female security prisoners”, i.e. Palestinians from the 1948 Territories. W. was 20 at the time of her arrest in 2006. In order to graduate from secondary school and obtain her Bagrut, she still had one course to complete in environmental studies. She applied in May 2008 to the Hasharon administration to be able to take her exam, whereas her parents applied to the Israeli Ministry of Education. However, she was denied the right to do so without getting a justification on the reasons behind the decision. While ethnically Palestinian, she holds Israeli citizenship.

4.5 University education

As per IPS regulations pertaining to the education of so-called “security prisoners”, higher education *is not considered a right*, but rather a *privilege* based on a number of criteria⁹⁶: good disciplinary record of the prisoner evaluated as per the report of the section’s commander; the specialization chosen by the prisoner must fall under the category of allowed subjects; a prisoner’s ability to prove that he or she has the necessary available funds to pay tuition fees. Additionally, the IPS reserves itself the right to cancel and revoke a prisoner’s right to higher education based on security reasons.

The only type of higher education available to female prisoners is by correspondence, in Hebrew, at the Open University of Israel. The education

⁹⁶ IPS regulations pertaining to higher education of security prisoners, 2006, article 3 (a)

process has to take place within the prison walls and be compliant with security regulations. The list of permitted programs includes merely humanities, sociology, economics, administration, psychology, political science and international relations. Forbidden specializations are the following: natural science, medicine, computer science, physics, chemistry or any program which requires the use of other than text books study material⁹⁷.

As the IPS refuses to coordinate with Palestinian universities, no higher education is permitted in Arabic. Female prisoners point out however, that it could be possible at a distance learning institution such as the Al-Quds Open University, especially since at least three female prisoners currently detained in Israel were enrolled at the university at the time of their arrest, and many others have in the past. Since textbooks at the Open University of Israel are not translated into Arabic – they are available mostly in Hebrew and occasionally in English – and papers and exams have to be submitted in Hebrew, language becomes a huge barrier for many women wishing to enroll. In the education questionnaire, 13 women currently in prison have not applied to university despite their willingness to continue their education, precisely because of the language barrier. They point out that “Hebrew is a very hard language” and that they do not have opportunities to learn it. Indeed, as they learn Hebrew in prison from one another, they are unlikely to reach a level of proficiency required in an academic environment.

As per IPS regulations, only sentenced prisoners are allowed to enroll in the Open University of Israel. Prisoners awaiting trial and placed in administrative detention – 22 women as of October 2008 and dozens of others in the past – are prevented from doing so. At least 2 interviewed women have claimed that they did not apply based on that condition, which

⁹⁷ IPS regulations pertaining to higher education of security prisoners, 2006

as they say is a pre-requisite for filling out the permission to study application form. Additionally, female prisoners assert that higher education is permitted only to women that have been charged with a long sentence, i.e. more than 5 years. This rule compromises the chances for higher education of at least 14 women currently detained for a period shorter than 5 years. Even when sentenced for a long period of time, they have to apply at least 5 years before their scheduled release so as to finish their studies inside of prison. Although no written regulations exist to support this claim, female prisoners are convinced of their inability to enroll in university. Two women claim that their applications were rejected based on this condition. It is thus safe to say, that although not explicitly banned from higher education, the IPS creates serious disincentives for prisoners to study and invest in their personal development, despite not carrying the financial burden of their university education.

Another disincentive imposed by the IPS is the cost of university tuition fees, which prisoners have to fully cover by themselves, including textbooks. Tuition fees at the Open University of Israel are fixed according to prices and standard of living in Israel and as such are almost unaffordable to the majority of Palestinian female prisoners. In average, the cost of an academic year at the Al-Quds Open University is only 550 USD. As a comparison, tuition fees at the Open University of Israel are more than 5 times as much, i.e. 2,880 USD. This factor increases the economic burden on the families and in many cases determines a prisoner's financial ability to continue her studies.

Finally, although the use of a computer is not a pre-requisite for studying at the Open University of Israel, students are highly encouraged to make use of the content of the courses online. University websites give them the opportunity to communicate with course coordinators, access presentations and the faculty's databases as well as engage in discussions with fellow

students. The unavailability of computers for Palestinian “security prisoners” poses a serious drawback in terms of both academic research and in communication with lecturers.

Other reasons for not applying to study at a higher university institution include answers such as: “I am not interested”, “I am still awaiting my Tawjihi results”, “I am hoping to be able to study at a Palestinian university”, “No, because I will be released soon”, “I have not completed high school education” or simply a negative answer without providing any information. Additionally, an analysis of questionnaires demonstrates that women are not well informed about their own rights in terms of education by the prison administration. They seem to learn about different proceedings through other prisoners’ experiences, as opposed to the prison authorities. Such lack of awareness makes women in some cases deeply convinced of the inability to fulfill their right. As a result of all factors and disincentives mentioned above, there are currently only 2 female prisoners studying at the Open University of Israel. Both women are 1948 Palestinians who speak fluent Hebrew. Therefore, the language barrier does not seem to pose a problem for them. M. started an MA program in Democracy Studies in October 2008, whereas L. is working towards a B.A. degree in sociology. Since the beginning of the Al Aqsa Intifada in 2000 and after waves of arrests of Palestinian women – greater than 700 in 8 years – only 5 women have studied at a university at some point in time.

4.6 Informal education

Given the lack of formal education for “security prisoners”, Palestinian women have taken things into their own hands. Prisoners transfer knowledge to one another and teach each other subjects and skills that they are strongest in. They try to organize their lives and courses as close to life outside of prison as possible. Prisoners from 1948 Territories or those who have been in prison for a long time for example, offer Hebrew

courses three times a week at both the beginner's and advanced levels. Other courses include English, Sharia law, Quran recitation and memorization, Arabic calligraphy, handicrafts and politics. As mentioned previously, older and more educated women take upon themselves the responsibility of teaching juvenile offenders.

Given that Palestinian female prisoners – just like male prisoners – are divided into cells according to their political affiliation, the informal education system they have set up might be affected by their political, social and religious views. This has therefore an impact on underage girls whose education process should be entitled to follow the official national curriculum. The choice that a girl makes to live with one of the factions represented by female prisoners – Hamas, Islamic Jihad, Fatah or the Popular Front for the Liberation of Palestine – will affect her education and influence her reintegration into the society. Lastly, the quality of education provided by female prisoners in these classes might not be of the highest standard as none of them are professional teachers. The quality and timeliness of courses depend on the physical and mental state of prisoners, which is affected by poor detention conditions and obstructed access to health care. Arguably some form of education, however informal or unstructured it might be, is more beneficial to the mental health of a detainee than no education at all. At the same time, such an arrangement does not absolve Israel from its obligations under international law, whereby education should be made available for all juvenile detainees. Furthermore, if one adopts UNESCO's definition of education as the realization of one's full potential as a human being, there is doubt that informal education set up by prisoners themselves actually fulfills that goal.

4.7 Information and Media

Every cell at both Hasharon and Damon, where the vast majority of Palestinian women are detained is equipped with a TV set, which were

purchased by prisoners themselves or donated by Palestinian organizations supporting them. None of them were provided by the IPS. However, the prison administration, reserves itself the right to determine which channels are permitted. As a result, all Israeli channels in both Hebrew and Russian are available. However, since most women do not speak either Hebrew or Russian, they mostly watch the five satellite channels available in Arabic. The location of the prisons outside the 1967 occupied Palestinian territory, impacts prisoners' connection with their usual environment in terms of information flow and particularly in terms of radio stations they are able to catch, given that they are detained in the far north of the country. Whereas some local West Bank stations are available, Gazan prisoners again, are isolated even further given they do not get any signals of their radio stations. This means that unlike West Bankers, they are unable to listen to their family voices even on the radio⁹⁸.

In terms of newspapers, only Israeli dailies, namely Maariv and Yediot Aharonot are delivered to prisons on a regular basis and only by subscription, at the expense of the Palestinian Ministry of Detainees and Ex-Detainees Affairs. Al-Quds, the major Palestinian daily based in East Jerusalem is the only Arabic newspaper, which the IPS allows to be distributed. However, it is delivered only once a week by the ICRC, on Sundays and usually with a week's delay. The other major Palestinian newspaper "Al-Ayyam" on the other hand, is forbidden. As media is the only form of entertainment and one of the only forms of education available to women, banning it is one of the most effective collective punishments that the administration can use. Confiscating all electronic devices is therefore a common practice.

⁹⁸ For more information, refer to "Fact Sheet 3: Denying Chances for a Better Future – Palestinian Female Prisoners Right to Education", August 2008

4.8 Entertainment, hobbies and physical education

Most women spend their free time embroidering, making handicrafts and jewelry. All the necessary materials – beads, threads, linen and fabrics – are provided by the families every three months⁹⁹. They also play board games, such as backgammon and chess provided by the ICRC. However, no formal cultural activities are available increasing Palestinian female prisoners' sense of isolation from the outside world even more.

Physical education is very limited and usually takes place during recreation time – only three hours a day at Hasharon – in the section's courtyard, which is only around 63 square meters. The space in question is inappropriate for the practice of sports and is often used for other purposes such as washing and drying clothes. Moreover, the majority of interviewed women assert that they do not feel comfortable exercising in the recreation space since it is visible to men and male guards, who are always present in the section. Therefore, they prefer not to exercise at all. Only less conservative women decide to run or walk in the recreation courtyard. Most of them assert that they have requested for a specific hour of physical education a day, but their demand has not been accepted. Further, the IPS does not take the responsibility for providing sports equipment, which is provided by the ICRC. At Hasharon for example, only one basketball, a ping-pong table with racquets and 2 jumping-ropes are available. Needless to say, neither the equipment provided nor the available space is sufficient for more than 30 women currently detained there.

4.9 The continuation of education after release

The disruption of women's higher education process has proven to be extremely problematic for those who wish to go back to university after their release. Many assert that they lack the confidence in their own abilities to

⁹⁹ For more information, refer to "Fact Sheet 3: Denying Chances for a Better Future – Palestinian Female Prisoners Right to Education", August 2008

learn and study again. Others face their families' initial opposition to leave the house out of fear that they will once again get involved in activities which might lead to a second incarceration. In some instances, they are forced to start the process again due to program changes which occurred while they were in prison, or the family's inability or unawareness of the necessity to suspend their studies. Additionally, when the majority of women are released in their mid-twenties most of them think of marriage as that age is for many the last opportunity to get married and create a family. All these factors combined constitute again a disincentive in terms of the continuation of higher education.

Case Study:

R. was a student at the An-Najah University when she was arrested on 21 April 2003. She was sentenced to five years of prison. She recalls that education was not a right in her first year of incarceration, but rather a "privilege" that female prisoners achieved after many strikes. First, they got the right to take the Tawjihi exam, then they obtained permission to study at the Open University of Israel. Following this decision, three years after her arrest when she finally reached an acceptable level of Hebrew, she was pleased to apply for permission to study. R.'s application was rejected on the grounds that there was not enough time for her to finish her degree before her release in February 2008. Now that she is free again, she has given up on university and plans to get married and leave the country instead.

CHAPTER FIVE :

FAMILY RELATIONS AND CONTACT WITH THE OUTSIDE WORLD

Contact with the outside world is a key element of prisoners' future reintegration into the society and is considered by many countries as an inalienable right. In the case where prisons' educational programmes, cultural activities or vocational training are insufficient or lacking – as in the case of Palestinian female prisoners – regular family visits are the only opportunity for them to remain connected with the society and their natural environment. Research on female prisoners worldwide proves that their denial deepens women's already existing sense of alienation and is most likely to cause mental problems such as depression or anxiety. For example, article 30 of the African Charter on the Rights and Welfare of the Child stipulates among other things that alternative special treatment to nursing and expecting mothers should be found. It calls on state parties to “ensure that a non-custodial sentence will always be first considered when sentencing such mothers” and to “establish special alternative institutions for holding such mothers”. QUNO (2008) recommends that there should be “no form of screen or physical barrier separating women and their visitors [...] unless there is a compelling reason for this in the particular prisoner's circumstances”.

Numerous international law instruments protect prisoners' right to family visits and contact with the outside world. The UN Standard Minimum Rules for the Treatment of Prisoners stipulate that:

- “Prisoners shall be allowed under necessary supervision to communicate with their family and reputable friends at regular intervals, both by correspondence and by receiving visits.”, Article 37
- “The treatment of prisoners should emphasize not their exclusion from the community, but their continuing part in it. Community agencies should,

therefore, be enlisted wherever possible to assist the staff of the institution in the task of social rehabilitation of the prisoners. There should be in connection with every institution social workers charged with the duty of maintaining and improving all desirable relations of a prisoner with his family and with valuable social agencies.”, Article 60 (2)

- “Special attention shall be paid to the maintenance and improvement of such relations between a prisoner and his family as are desirable in the best interests of both”., Article 79
- “From the beginning of a prisoner's sentence consideration shall be given to his future after release and he shall be encouraged and assisted to maintain or establish such relations with persons or agencies outside the institution as may promote the best interests of his family and his own social rehabilitation.”, Article 80

The Body of Principles for the Protection of All Persons under any Form of Detention (1990) recommends that:

- “If a detained or imprisoned person so requests, he shall if possible be kept in a place of detention or imprisonment reasonably near his usual place of residence.”, Principle 20

While visits to Palestinian prisoners are theoretically permitted twice a month, they are subjected to many restrictions stemming from Israel's violation of the Fourth Geneva Convention (1949), which explicitly prohibits “individual or mass forcible transfers, as well as deportations of protected persons from occupied territory to the territory of the Occupying Power”. In some instances, geographic isolation can be considered as a form of cruel and unusual punishment in the sense that it inflicts severe mental suffering on the prisoner and their relatives by severing ties between them¹⁰⁰.

¹⁰⁰ Bastick M. and Townhead L. (2008), “Women in Prison, A Commentary on the UN Standard Minimum Rules for the Treatment of Prisoners”, *Quakers United Nations Office*

Families of Palestinian female prisoners held in Israeli jails, cannot visit them freely, or according to their own schedule as they are subjected to Israel's system of closure and restrictions of movement imposed on the occupied Palestinian territories (oPt). The maintenance of ties is thus dependent on the Israeli permit system, which imposes huge restrictions on the Palestinian population – especially males – aged between 16 and 45, denying their right to visit on a regular basis.

Further to that, anyone who has once been arrested at least by the Israeli authorities for either a criminal offence or “security reasons” is automatically prohibited from visiting prison. Given that the Palestinian population has been subjected to the highest incarceration rate in the world – above 700 000 since 1967 - the likelihood that at least one family member of the detainee has once been arrested is extremely high. Indeed, more than 30 % of female prisoners have at least one close relative who is either currently in jail or is a former detainee. Such a rule however, affects the likelihood of other family members aged between 16 and 45 of getting permits to visit prisons as part of the ICRC programme. Even though they do not have a criminal record or have never been involved in either military or political activities. In practice, in many cases only old relatives and minors under the age of 16 are able to visit prison. Some female prisoners serve their entire sentence without seeing their siblings or parents even once. In September 2008 there were approximately 60 % of female prisoners' families in which at least one member was not allowed to visit.

When visits do occur, they take place in traumatic conditions, in an inhospitable and violent environment where people, including children are often shouted at and insulted, after a long and tiring journey, a set of intrusive personal searches – including searches of children – and a long wait outside of prison. Physical contact is only permitted between mothers and their children under the age of 6 provided they have a good disciplinary

record and no more than twice a year between women and their elderly parents – usually above the age of 60 – when the prison administration provides arrangements for photo opportunities. In all other cases, it takes place through a glass partition where family members are forced to communicate with the prisoner over a phone, which many assert crackles¹⁰¹.

Typically the whole journey to prison and back for a West Banker takes as long as 14 to 17 hours, depending on her / his place of residence and the number of checkpoints on the way. It also involves waking up as early as 3:00 or 4:00 in the morning and many changes of means of transportation including personal cars or taxis and two different ICRC buses. Therefore, the difficulty of the journey, in addition to the lengthy procedure of actually obtaining a permit, becomes a huge disincentive for families to visit their relative in prison. Pregnant women, nursing mothers, children travelling alone and elderly parents are less likely to visit prison due to the trauma and stresses it causes them every time. Given that only the nuclear family is allowed to visit prison, i.e. parents, children and siblings, this rule further restricts the circle of visitors and limits in fact a prisoner's chance to have regular and continuous contact with the outside world. All these factors combined reduce her chance for an easier reintegration upon release and lead in effect to the rupture of family ties. For women however, these visits are the most important aspect of their life in prison. However short – 30 to 45 minutes – and deprived of any sense of privacy, the majority of Palestinian female prisoners assert that they feel rested, reassured and happy whenever they have the opportunity to see their families, especially their children.

¹⁰¹ For a detailed description of the family visit programme, the permit system and the journey to prison, please refer to "Fact Sheet 4: Broken family relations", Fact Sheet Series "Behind the Bars: Palestinian Women in Israeli Prisons", September 2008, accessible at: www.aseerat.ps

The lack of visits was constantly mentioned in lawyer's visits as well as in interviews with former prisoners as the most important issue to female prisoners. Throughout the duration of the project, there were at least 10 women deprived of family visits as a punitive measure and six women who were only visited by minors. Additionally, at least two women did not get visits given that their nuclear families lived abroad. None of the three Gazan women currently in jails were able to see their families – including their children in the case of two of them. They requested for videoconferencing to be arranged until the siege on the Gaza Strip is lifted. One woman suffering from mental health care has been abandoned by her family following her imprisonment and is neither entitled to Arabic speaking social workers' visits nor meetings with Red Cross volunteers. As letters are delivered to prison with huge delays, at least 40 % of families assert that such communication is pointless and therefore do not write. Since telephone conversations are only permitted in humanitarian cases, banning visits is almost synonymous with denying any contact with the outside world.

5.1 Mothers of Minors

Research on female prisoners worldwide proves that the lack of adequate and sufficient contact with children and family members is a key source of anxiety for women in jails. Such feelings are translated into depression, anger and guilt and lead to the deterioration of the overall mental state and health condition of the woman¹⁰². Children in turn, express deep feelings of blame and rejection, which has grave repercussions on their self-esteem and self-perception. Additionally, children of imprisoned mothers “may be at graver risk of imprisonment themselves”, especially whenever relations with the parent are broken. International regulations on women in prison give priority to the maintenance of strong ties between children and their

¹⁰² Bastick M. and Townhead L. (2008), “Women in Prison: A commentary on the UN Standard Minimum Rules for the Treatment of Prisoners, QUNO

mothers. As a result, some European countries such as Poland for example have given women the opportunity to serve their sentence close to home upon their request; other make family visits as flexible and as often as possible. As described above, Israel is far from implementing good practice in the case of Palestinian women, but rather subjects their children to restrictions which in effect make their visits unpleasant, frightening and mentally exhausting. Importantly, children are not treated as exceptional cases and are subjected to the same intrusive searches and schedule of visit as adults. While visits to prison usually take place on week days, children are obliged to take time off from school and their extra-curricular activities should they wish to see their parents. Currently, 13 of the total of 65 female prisoners are mothers of minors, whom they are usually not allowed to see in private, hug or touch. As visits of minors travelling by themselves are only permitted once a month, and communication via telephone is forbidden, the relationship between mothers and their children is completely severed during the time of their incarceration and will be much harder to rebuild upon their release.

5.2 Wives of Prisoners

Throughout the year, the project has documented at least 6 cases of Palestinian female prisoners whose husbands are also detained. Four of them were mothers of minors. Upon both parents' arrest, the children were either placed under the custody of their grand-parents or under the care of their older siblings. The separation from both parents is naturally a greater source of anxiety and concern for these women. As for children, they carry the burden of visiting both their parents in two separate prisons and act as messengers between the two and other members of the family, which are prevented from visits on the premise of "security reasons". Although visits between imprisoned relatives are allowed as per IPS regulations every 3 months in the case both prisoners are detained in nearby facilities, and every 6 months when the distance between them is greater, female

prisoners have been deprived of seeing their husbands for periods longer in some cases than a year.

5.3 Arbitrary denial of visits

The right of families to visits can also be arbitrarily revoked by soldiers at a checkpoint. The project has documented at least 10 cases of relatives being turned back at a Green Line crossing.

Case Study:

H. has 9 children. When she first got arrested on 13 May 2003 her whole family was living in Nablus. During the first year of her imprisonment, H. was able to get visits from her husband and her youngest children below the age of 16. Shortly after and in view of the economic situation deteriorating in the city, they decided to move to Ramallah where the oldest children could find work and study at university at the same time. In 2004, once they established themselves in Ramallah, the oldest three daughters applied for permits, but only N., aged 22 at that time and V., aged 17 managed to get a positive response. Y., 18 at the time was denied the permit on the grounds that she was not related with her mother. The logical argument that both her sisters actually got permits proved to be pointless. Since then, Y. tried her chance three times, but each time her request was refused. H's eldest son, N., was able to see his mother only once in 5 and a half years. His brothers, now 20 and 19, were stripped off their right to visit their mother the same day they got their Identity Card. Despite all these restrictions imposed on the family and the older children in particular, N. and V. together with her 3 minor siblings were able to visit their mother regularly every 2 weeks until 30 July 2008. On that day, 22 year-old V., 4th year Accounting student at Birzeit university took the ICRC bus with her younger siblings – aged 7, 14, and 15 – to the Ofer checkpoint, where she was meant to go through a thorough personal search before crossing the Green Line and switching to an Israeli-plated ICRC bus that would take

them straight to prison. However, V. was denied entry on that day despite that her permit was valid for another 3 months, until 11 November 2008. She was detained with her younger siblings for 3 hours on the premise that the beads they packed for their mother – as they had done many times before – allegedly contained traces of explosives. Each one of the children was asked to strip; their belongings were scanned many times, whereas they themselves were subjected to a search through a metal detector. After an hour of interrogation and search process, the ICRC bus finally left in order not to further delay other visitors. Although it was clear that H.'s children would not be able to visit her on that day and that the soldiers made a mistake as to their allegation, they were still held at the checkpoint for an additional 2 hours after which they were finally free to go home. Two weeks later, on August 13th V. and her three younger siblings decided to leave the beads at home out of fear that they will be rejected at the crossing again. This time however, it was V.'s identity card, which proved to be problematic. As the family is originally from Nablus, her ID card still includes the name of the city as the place of residence even though she has been living in Ramallah since 2004. This became a reason for V's questioning. The soldier in charge informed her that she should register with the ICRC in Nablus instead of Ramallah. Her attempts to explain that she had been visiting with the Ramallah ICRC programme for the last 4 years failed. Logic did not seem to matter, nor did her permit as she was again denied the right to entry. When she asked the soldier to allow her young siblings to cross and continue their visit with other families, she heard that all of them should go back and register in Nablus, while her permit got confiscated. Since then, only H.'s minor children visit her on a regular basis and are forced to make the long, tiring and complicated journey by themselves. After the incident, V.'s applied for a new permit, but 2 months later she has still not been granted one. Her older sister Y., 22 year old bank employee and business administration student is still waiting to receive the right to see her mother for the first time in 5 and a half years.

Such practices are completely unacceptable and constitute a violation of human rights of both – the prisoner and her family members, who are not only stripped of their right to visiting their relative, but are additionally humiliated.

CHAPTER SIX

REINTEGRATION INTO SOCIETY

Social reintegration of prisoners includes rehabilitation during and after imprisonment as well as immediate and long-term post-release support. The reintegration of Palestinian prisoners is unique in the sense that it depends on two authorities in conflict with one another among which power is unequally distributed, one being the occupied, the other – the occupier. UNODC (2007), in its study published under the "Developing post-release opportunities for women and girls prisoners" project¹⁰³, identifies a number of key areas which affect a prisoner's life after release and determine the success of his or her rehabilitation:

- prison management approach and style
- quality of prison staff
- humane prison conditions
- safety in prison
- individualization, i.e. the act of treating prisoners as individuals, with individual needs
- availability of activities relevant to the needs of prisoners
- adequate contact with the outside world
- adequate facilities for children in the case of nursing mothers accompanied by their children
- "specialist medical care and nutritional support" for pregnant women
- the "preparation for release linked to post-release support"¹⁰⁴

Out of all the listed elements, only post-release support is fully dependent on the Palestinian Authority and does not require coordination with or permission from the Israeli Prison Service. Therefore, the development of a social reintegration policy of Palestinian female prisoners is explicitly a

¹⁰³ UNODC (2007) "Afghanistan, Female prisoners and their social reintegration", Vienna, March 2007, p.66

¹⁰⁴ UNODC (2007) "Afghanistan, Female prisoners and their social reintegration", Vienna, March 2007, p.66

matter of Israeli responsibility. It should address all of the points listed above and described in detail in previous chapters. Although the lack of coordination between the two entities undermines the process of creating a long-term policy directed at Palestinian female prisoners, a post-release strategy should be developed. To date, no gender-specific reintegration and rehabilitation programmes have been established by the Palestinian Ministry of Detainees and Ex-Detainees, although women are usually treated in what the authorities call “a preferential manner”. Support to former prisoners seems to be mostly educational and financial.

6.1 Available rehabilitation programmes

All Palestinian detainees are entitled to a monthly stipend paid to them by the Ministry of Detainees and Ex-Detainees while they are in prison. After their release, financial aid is conditional on the period of time spent in jail. Every male prisoner who has spent more than 5 years in Israeli detention is eligible for monthly financial compensation until the end of his life. As for women, they are eligible for such support if they have served a sentence of three years and above. Additionally, if a woman is accompanied in prison with her child under the age of two, the child, as well as the mother receives a monthly stipend¹⁰⁵. First established in 1995 and supported since its onset by both the European Commission and the Swiss Agency for Development and Cooperation, the Ex-Detainees Rehabilitation Programme is comprised of 5 main components aiming at providing education assistance, vocational training, wage subsidies, self employment loans, project loans and health insurance. It is today the only specialized scheme which provides services to ex-detainees.

Men who have served a sentence longer than one year are eligible to apply for all services constituting the programme. In some circumstances

¹⁰⁵ Addameer Interview with Mr. Arafat Nazzal, Deputy General Director, Detainees' Affairs, Ministry of Detainees and Ex-Detainees, November 2008

exceptions are made as to include those men who have spent only 6 months in prison. Conditions related to the length of the sentence or detention period are not applied to women, thus allowing all former female prisoners to apply to the programme. However, both men and women are entitled to benefit from these services only once after their release. First, the Ex-Detainees Rehabilitation Programme strives to encourage higher education by covering 50% of tuition fees of any former prisoner enrolled at a local university. Second, the ministry covers the expenses of any vocational training offered on the Palestinian market provided that they do not exceed 1,500 USD. The beneficiaries can either enrol individually in courses of their choice or they can participate in collective training sessions organised by the programme, whenever something specific is in demand. As per information obtained from a ministry official¹⁰⁶, women tend to favour higher education as opposed to vocational training. In case they do choose the second option, they usually enrol themselves in aesthetician or hairdressing courses. The third service available to former prisoners is the provision of low-cost loans of up to 5,000 USD aiming at creating self-employment. Beneficiaries can either invest this sum in existing income-generating projects or start their own businesses. These loans are however subjected to a 5 % interest rate and need to be repaid within a period of 36 months maximum. According to an employee of the Ministry of Detainees and Ex-Detainees Affairs, the self-employment loan programme mostly attracts men and only rarely do women benefit from it, reportedly because they are more wary to take financial risks. In addition, women are usually discouraged by the interest rate which they deem to be too high¹⁰⁷. Fourth, the health insurance service facility provides all former detainees with access to public health care for life. This includes full medical coverage, including dental care. However, it does not include either mental or physical health treatment for prisoners whose health has deteriorated as a result of

¹⁰⁶ Addameer interview with Mr. Mohammad Batta, Ex-Detainees Rehabilitation Programme

¹⁰⁷ Workshop with female prisoners recommendations, 16 August 2008, Ramallah
<http://www.aseerat.ps/files/workshop%20recommendations%20EN.pdf>

their imprisonment. Finally, income-generation is the last component of the programme. It includes a wage-subsidy scheme which not only allows the beneficiary to find employment, but also encourages employers to hire former prisoners. It is based on an arrangement whereby the Ex-Detainees Rehabilitation Programme covers 50% of a former prisoner's salary for the first 6 months of his / her contract. Additionally, the ministry helps ex-detainees find employment by contacting them with potential employers, mostly in the public sector, and recommending for specific job positions. The income-generation scheme also offers a loan opportunity of 1,500 USD maximum, subjected to a 5% interest rate. A beneficiary is entitled to apply for both loans described above as they constitute two different services, but again the interest rate is a disincentive for many female prisoners partially excluding them from the scheme. Psychological support is limited to advice, as opposed to counselling and is not included as a permanent component of the rehabilitation programme. Only special cases of former prisoners who have experienced torture and are in need of therapy are referred to other, specialized institutions, mainly to the Treatment & Rehabilitation Center for Victims of Torture¹⁰⁸. Help is unavailable to all other prisoners.

6.2 Social reintegration: Need for a gender-sensitive approach

It appears from an analysis of the Ex-Detainees Rehabilitation Programme that the Ministry of Detainees and Ex-Detainees has failed to design a long-term strategy to respond to the specific needs of female prisoners. While a special unit has been established to deal with youth and child detainees, no such facility for women is present within the ministry of detainees. Although the legal unit of the Child and Youth department of the ministry provides legal counselling to female prisoners along with child detainees, the increased support and interest stops once the woman is released. Interviews conducted with former female prisoners by both Addameer and the PCC revealed that these women are in great need of psychological

¹⁰⁸ Addameer interview with Mr. Mohammad Batta, Ex-Detainees Rehabilitation Programme

support especially in the first weeks and months following their release when they affirm to have suffered from depression and anxiety. The lack of services and support mechanisms combined with overwhelming initial media interest only exacerbates former female prisoners' feeling of disappointment and isolation which can often lead to the increase of mental problems. Once journalists stop requesting interviews and human rights associations stop sending their greetings comes a feeling of abandonment¹⁰⁹. Most importantly however, former female prisoners blame the Ministry of Detainees and Ex-Detainees for failing to design a special long-term programme for the reintegration of women prisoners and for acknowledging that their needs are different.

Indeed, former female prisoners are usually in greater need of aid than males in redefining their relationship with their families, especially with their children who often express rejection and aggression as a result of a feeling of abandonment. In an article based on semi-structured interviews with 65 former Palestinian female prisoners, Srour (2008)¹¹⁰ argues that imprisonment has adverse repercussions on children's self-perception and self-esteem. Additionally, the imprisonment of their daughters affects parents both physically and psychologically. Srour states that many start suffering from illnesses such as hypertension, diabetes, or migraine after the women's arrest. These illnesses have usually a psychosomatic basis and are a direct consequence of a feeling of insecurity and helplessness that over-protective parents experience when their daughter is imprisoned.

Although the UN Minimum Standard Rules for the Treatment of Prisoners recommend that "necessary steps be taken to ensure for the prisoner a

¹⁰⁹ Addameer interview with female prisoners, 10 July 2008

¹¹⁰ Srour Anan (2008), "Psychological effects of women imprisonment on their families", Palestinian Counseling Center, available at <http://www.aseerat.ps/files/EN%20-%20Psychological%20effects%20of%20women%20imprisonment%20on%20their%20families.pdf>. Last accessed 10/12/ 2008.

gradual return to life in society” through a pre-release programme¹¹¹, such services are not offered to Palestinian prisoners. The transition from life in prison to life outside is therefore even more problematic. At a workshop held by the PCC on 16 August 2008 in Ramallah with the purpose to assess former female prisoners’ needs, a call for psycho-social support was reiterated. Women affirmed that a holistic approach needs to be developed in order to include their families in support schemes. Ideas included amongst others, the creation of a special hotline targeting former female prisoners and their families. In addition, former prisoners stated that relevant NGO’s, but most importantly the Ministry of Detainees and Ex-Detainees, need to reach out to female prisoners to include them in rehabilitation programmes as they are often unable to take the initiative by themselves due to their poor mental state¹¹². Additionally, they called for awareness raising campaigns on issues relating to female prisoners as to sensitise the local community to their experiences, deconstruct any misconceptions, clarify false information and exaggerations spread by the media, pertaining in particular to sexual harassment and torture. They felt that the question of stigma which surrounds female prisoners, especially those coming from more conservative environments, needs to be addressed systematically and through a coordinated effort of both psycho-social organizations and the Palestinian Authority. Whereas befriending a former male prisoner seems to the majority of Palestinians completely normal since more than 40 % of the male adult population has once been arrested or detained, interviews with former female prisoners have shown that they often faced rejection by their friends and their social environment following their release. One woman describes her experience 5 months after she was set released:

¹¹¹ UN Minimum Standard Rules for the Treatment of Prisoners, Article 60 (2)

¹¹² A full version of the recommendations that were drafted at the workshop is available at: <http://www.aseerat.ps/files/workshop%20recommendations%20EN.pdf>

“Ever since I was released from prison, I don’t go out much. I always need to close the door of the room I am sitting in. My family is convinced that this is an effect of prison. In five years that I was absent everything has changed: the city, my friends, the outside world. There were no institutions that helped me when I was released; no one reached out to see how I was feeling, whether I needed anything or whether I needed help to redefine my relationship with my family¹¹³”.

In sum, a long-term strategy for the social reintegration and rehabilitation of female prisoners needs to be twofold and work on two different layers. It is imperative that Israel complies with international law and respect the right of female prisoners to adequate and timely health care, education, contact with the outside world and improves their detention conditions as to meet universally recognized minimum standards. Such change in policy and reform should be implemented in view of prisoners’ future reintegration. The Palestinian Authority in turn, should revise its rehabilitation programme and adopt a gender-sensitive long-term policy leading towards creating a special social reintegration scheme for female prisoners.

¹¹³ Addameer interview with R.D., 10 July 2008

CONCLUSION

This study has provided a comprehensive analysis of Palestinian female prisoners' detention conditions, their access to health care, education and family visits during their interrogation, detention and incarceration period in Israeli jails. It is clear that Israel needs to develop a special gender-sensitive policy towards Palestinian female prisoners in view of their health condition in prison and future rehabilitation into the society. Special protection and adequate treatment need to be provided to pregnant women, nursing mothers and young girls below the age of 18. Their poor detention conditions including an unbalanced diet need to be improved in view of their physical and mental health state. As this study has demonstrated, in instances where women are treated with respect by jailers and where their requests are seriously taken into consideration, female prisoners' overall mental well-being is increased. They equally feel reassured and hopeful when they are allowed to see their families, in particular children, at regular intervals. Prohibiting female prisoners from family visits is almost synonymous with purposefully harming their mental well-being. The restriction on prisoners' access to education, vocational training and contact with the society at large further complicates women's social reintegration and rehabilitation. Rather than being ignored, such findings need to be addressed systematically and seriously by the Israeli Prison Service. The Palestinian Authority in turn should use them as a basis of not only designing a gender-sensitive rehabilitation programme for former female prisoners but also for including gender, including gender-based violence into its strategy of protecting and rehabilitating Palestinian prisoners – be they men, children or women.

RECOMMENDATIONS

To the Government of Israel:

- Respect, uphold and strive to surpass UN Minimum Standard Rules for the Treatment of Prisoners as well as the body of human rights instruments regulating the life of women and children in prison.
- Respect Gazan prisoners' right to family visits by granting their family members the required permits to access Israel.
- Stop the practice of revoking permits of family members at checkpoints inside the West Bank.
- Stop the practice of physical and mental torture and ill-treatment of Palestinian women under interrogation.
- Develop a gender-sensitive policy for the treatment of Palestinian female prisoners

On health:

- Alleviate overcrowding of women in rooms and ensure that their accommodations meet basic requirements of hygiene and health. Sufficient natural light, adequate ventilation, heating and fresh air are essential.
- Ensure a special nutritional diet for pregnant women, nursing mothers, women suffering from treatable diseases, and most importantly children being held in prison with their mothers until the age of two.
- Stop shackling pregnant women in labour and immediately after delivery; allow them to give birth with dignity and provide them with obstetrical care consistent with the World Health Organization's standards of care for routine pregnancies. Equally, stop shackling nursing mothers accompanied by their children in transfers to courts and hospitals.
- Provide specialized health care and allow easy and unobstructed access of female prisoners to Arabic speaking gynaecologists, mental health specialists, dentists and orthopaedic surgeons, adequately trained to

deliver health care in the prison. Ensure that women have easy and ongoing access to female nurses and physicians.

- Allow visits of Arabic-speaking social workers and counsellors for women held in isolation and those suffering from mental health problems.

On family relations:

- Allow open visits and physical contact between mothers and their minor children in view of a healthy emotional development of children.
- Grant permits to all first degree relatives and extended family members and allow them to visit prison with dignity and at regular intervals.
- Allow the communication by telephone with special consideration to mothers of minors.

On education:

- Ensure that formal education for girls under the age of 18 is provided, as included in international law.
- Grant Palestinian prisoners the right to pursue their higher education by distance learning at the Al Quds Open University.
- Establish a library at the Damon prison and ensure that libraries in all facilities where Palestinian female prisoners are detained include a sufficient number of educational and general interest books in Arabic.

To the European Union:

- Monitor Israel's compliance with international humanitarian and human rights law pertaining to Palestinian prisoners, including women and girls, and raise any violations or abuses against them in EU-Israel bilateral meetings.

To the Palestinian Authority:

- Raise the issue of Palestinian female prisoners in negotiation and lobbying meetings with Israeli officials.
- Design a long-term strategy to provide protection to female prisoners during their imprisonment
- Establish social reintegration and rehabilitation programmes specifically designed for female prisoners providing education and employment opportunities, as well as psychosocial support. Incorporate gender in any long-term rehabilitation programmes.
- Provide timely and regular transfer of prisoners' canteen money.
- Provide textbooks, specialized educational magazines and books to prisons.

To Palestinian and foreign NGO's working in the oPt:

- Coordinate advocacy efforts on female prisoners and gender issues related to detention and imprisonment.
- Coordinate the provision of services to current and former female and male prisoners to avoid duplication and in view of increased efficiency.
- Reach out to former prisoners and ensure that psychological support is provided to female prisoners immediately after their release.
- Ensure that psychological support is provided to the family of the prisoner prior to her release with the aim of preparing them for her return.
- Raise awareness on the issue of female prisoners and gender-based violence.

To OHCHR oPt:

- Support local advocacy efforts by intensifying training opportunities to Palestinian non-governmental organizations and community-based organisations.

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