



HUMAN RIGHTS IN MENTAL HEALTH AND SOCIAL CARE INSTITUTIONS

January - December 2016

7th annual report, March 2017
KRCT, Pristina



HUMAN RIGHTS IN MENTAL HEALTH AND SOCIAL CARE INSTITUTIONS

January - December 2016

7th annual report, March 2017
KRCT, Pristina

The content of this publication is the responsibility of the Kosova Rehabilitation Centre for Torture Victims – KRCT. The opinions, conclusions and recommendations expressed herein are those of KRCT.

©This is a publication of the Kosova Rehabilitation Centre for Torture Victims (KRCT). Author rights upon this publication belong to the KRCT. Unless in cases when a written permission is issued by the KRCT upon a request, copying, re-production and unauthorized publishing of this material, in its original or modified form is forbidden.

Author: Fatmire Haliti, Project Manager (KRCT)

Editor: Dr.Feride Rushiti, Executive Director of KRCT

Monitoring Staff: Dr.Feride Rushiti
Fatmire Haliti
Dr.Reshat Bajrami
Alban Muriqi

Design and Printing: "Lena Graphic Design"

Publications 2017: The Kosova Rehabilitation Centre for Torture Victims (KRCT), March 2017.

Contact:
St.Hamëz Jashari 16b/2
10000 Pristina, Kosova
Tel/Fax: +381 (0)38 243 707
E-mail: info@kret.org
Website: www.kret.org

Contents

| | |
|--|----|
| Acronyms | 5 |
| Introduction | 6 |
| 1. MONITORING OF HUMAN RIGHTS IN PLACES OF DETENTION IN KOSOVO | 8 |
| 2. MENTAL HEALTH AND SOCIAL CARE INSTITUTIONS MONITORED BY KRCT | 11 |
| 3. PROGRESS IN THESE INSTITUTIONS DURING 2016 | 15 |
| 3.1. Management of the Community Housings by the Municipalities..... | 15 |
| 3.2. Opening of Community Housing in Lipjan/Lipljan | 15 |
| 3.3. Construction of Integrated Community Housing (ICH) in Mitrovicë/Mitrovica | 15 |
| 3.4. Integrated Community Housing in Pejë/Pec..... | 16 |
| 3.5. The opening of a new facility in Special Institute in Shtime/Stimlje | 16 |
| 3.6. Involvement of volunteers and interns in Special Institute in Shtime/Stimlje and Community Housings..... | 17 |
| 3.7. Regular supply of medicines | 17 |
| 4. MAIN FINDINGS DURING MONITORING | 18 |
| 4.1. Legislation and legal rights..... | 18 |
| 4.2. Treatment of persons with mental disorders | 20 |
| 4.3. Material and housing conditions | 22 |
| 4.4. Food and kitchen..... | 25 |
| 4.5. Health services | 25 |
| 4.6. Activities..... | 29 |
| 4.7. Contact with the outside world | 30 |
| 4.8. Cigarettes, alcohol and drugs..... | 31 |
| 4.9. Inter-institutional cooperation | 32 |
| 4.10. Duration of stay in the institution..... | 33 |
| 4.11. Lack of staff | 33 |
| 4.12. Institute of Forensic Psychiatry of Kosovo | 34 |

| | |
|--|----|
| 5. ACTIVITIES CONDUCTED DURING 2016 | 37 |
| 5.1. Regional Conference “Let’s act in regional level for a better respect of persons with mental health problems”, 29 th January 2016..... | 37 |
| 5.2. Visit of Civil Rights Defenders at the Special Institute in Shtime, February 20, 2016..... | 38 |
| 5.3. World Bioethics Day, October 19, 2016..... | 39 |
| 5.4. Regional Advocacy Meeting "Challenges and opportunities of regional networks for advocacy in criminal justice reform in the Western Balkans", 1 - 2 December 2016 | 40 |
| 5.5. Annual Conference on "Human Rights in Mental Health and Social Care Institutions", December 14, 2016..... | 41 |

Acronyms

KRCT - Kosova Rehabilitation Centre for Torture Victims

MLSW - Ministry of Labor and Social Welfare

MH - Ministry of Health

SISH - Special Institute of Shtime

CH - Community Houses for Persons with Mental Disabilities

HCh - Houses of Children with Mental Disabilities

CIRCPP - Center for Integration and Rehabilitation of the
Chronic and Psychiatric Patients in Shtime/Stimle

ICH –Integrated Community Houses

CMH - Center for Mental Health

IFPK - Institute of Forensic Psychiatry of Kosovo

UCCK - University Clinical Center of Kosovo

CPT - Committee for Prevention of Torture

NGO - Non-governmental Organization

Introduction

Kosova Rehabilitation Centre for Torture Victims (KRCT) is an independent, non-governmental and non-profit organization. Founded in 1999, KRCT's mission was treatment and rehabilitation of torture victims and traumatized persons from the Kosovo War.

KRCT remains committed to continuous the strength of staff capacities and public sector with regarding to provision of services for rehabilitation and prevention of torture and trauma. KRCT is also strongly engaged on promotion of human rights respect for all ethnic communities in Kosovo and in the prevention of torture and all kind of ill treatment.

Since 2007, the KRCT conducts regular monitoring visits in Correctional Centers, Pre-trial detention facilities and in Detention Centers within Police Stations.

By January 2010, KRCT had begun the monitoring of mental health and social care institutions within implementation of the Project on *"Promotion of human rights for persons deprived of their liberty, placed in Mental Health Institutions in Kosovo"*. This Project for six years (2010-2015) was supported by the Civil Rights Defenders (CRD). While, during 2016, monitoring of Mental Health and Social Care Institutions was performed voluntarily by KRCT team. In the framework of monitoring of these institutions, KRCT's Monitoring team has conducted monitoring visits at Centres of Mental Health and Social Care Institutions in Kosovo, where people with mental disabilities are placed.

Information presented in this report is gathered from monitoring visits within these institutions, observation of their facilities, confidential interviews with the resident who were able to be interviewed, discussions/meetings with the management and staff members of the respective institutions and evaluation as set within terms of reference.

Monitoring of Mental Health and Social Care Institutions aims to estimate respecting of human rights in these institutions, to prevent violation of human rights and to contribute on increasing transparency of management institutions, as well as in improving of services to the benefit of residents. Thereby, this has led to an increase of respecting of applicable laws and international standards by the side of state authorities.

1. MONITORING OF HUMAN RIGHTS IN PLACES OF DETENTION IN KOSOVO

All persons deprived of their liberty (PDL) must be treated humanely and their dignity must be respected as human beings. Such rights are enshrined in all international, regional and domestic important documents and are legally binding. However, the rights of this category of population are endangered to be violated because they are kept away from public attention. Therefore the role of Civil Society as external and independent monitors is essential to document and address possible violation of human rights in places of detention.

Kosova Rehabilitation Centre for Torture Victims (KRCT) has entered its seventeenth (17th) working year. During these years, KRCT has functioned as main referral point for treatment and rehabilitation of torture victims and war survivors. KRCT's mandate is unique in comparison to other Kosovar human rights organizations, meaning that it has a specific mandate on fighting torture through monitoring and preventive documentation of human rights violation within the places of detention.

In accordance with the strategy on preventing torture, KRCT's monitoring team, since 2007 has regularly visited all prisons, places of detention and pre-trial detention facilities, whereas monitoring of Mental Health Institutions has been launched since 2010. The aim of such activity is to estimate treatment level and general conditions of such institutions based on requirements set by international and domestic legal

documents for persons deprived of their liberty and in the same time to prevent future violations.

This monitoring report in respect of human rights in Mental Health and Social Care Institutions during 2016 follows the developments of overall situation in these institutions since 2010 and is result of a professional work that has taken place for six years of this project and aims to give the general idea of the monitoring results and measures taken after KRCT's recommendations regarding the needs for improving the conditions and treatment for persons with mental disabilities, placed in such institutions.

Through a professional and constructive approach, KRCT has built trustful relations by respecting the confidentiality when communicating with persons with mental disabilities, their families and the community. Also, correct relations with the officials of all mental health and social care institutions are established on time.

Professionalism that KRCT possesses, regarding monitoring of detention places in Kosovo is recognized by important national, regional and international actors. Reports that KRCT has issued regarding different issues after monitoring visits have been used by the policy making institutions and stakeholders as guiding documents to address their interventions. Such reports were regularly cited in the U.S. State Department Report on Human Rights, Progress Reports of the European Commission and by Committee for the Prevention of Torture (CPT).

KRCT is thankful for continuous and constructive cooperation with mental health and social care institutions and respective ministries who appreciate our work and consider our findings/recommendations as a tool to improve the respect for human rights for persons with mental disabilities.

2. MENTAL HEALTH AND SOCIAL CARE INSTITUTIONS MONITORED BY KRCT

During 2016 KRCT has conducted monitoring visits in 19 Mental Health and Social Care Institutions in Kosovo.

1. Centre for Integration and Rehabilitation of the Chronic and Psychiatric Patients in Shtime/Stimlje (CIRCPP), MoH;
2. Institute of Forensic Psychiatry of Kosovo (IFPK), MoH;
3. Integrated Community House (ICH) in Ferizaj/Urosevac, MoH;
4. Integrated Community House (ICH) in Gjilan/Gnjilane, MoH;
5. Integrated Community House (ICH) in Mitrovicë/Mitrovica, MoH;
6. Integrated Community House (ICH) in Gjakovë/Djakovica, MoH;
7. Integrated Community House (ICH) in Pejë/Pec, MoH;
8. Integrated Community House (ICH) in Prizreni, MoH;
9. Integrated Community House (ICH) in Gillogoc, MoH;
10. Integrated Community House (ICH) in Bresje, MoH;
11. Shtime Special Institute, MoLSW;
12. House of Children with Mental Disability (HCh) in Shtime/Stimlje, MoLSW;

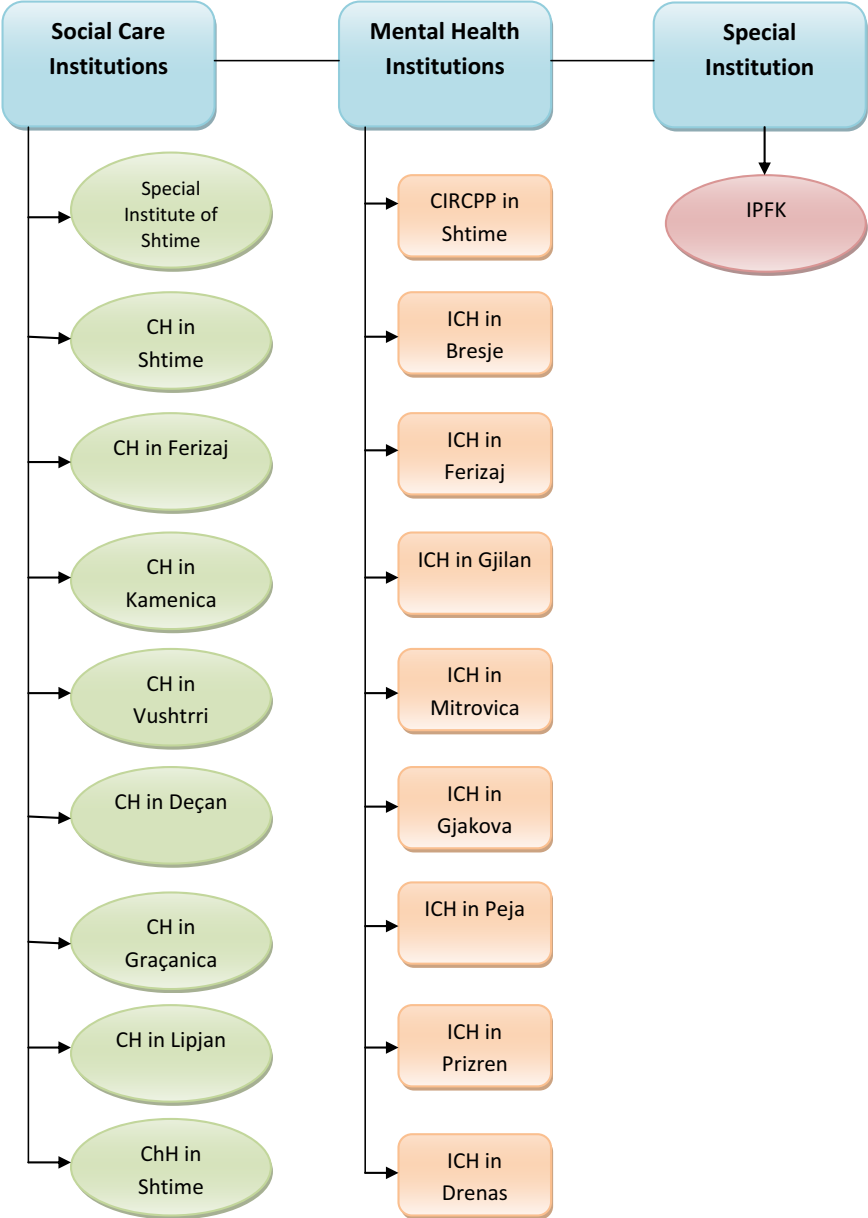
13. Community Houses for Persons with Mental Disabilities (CH) in Shtime/Stimlje, managed by Shtime/Stimlje Municipality;
14. Community Houses for Persons with Mental Disabilities (CH) in Ferizaj/Urosevac, managed by Ferizaj/Urosevac Municipality;
15. Community Houses for Persons with Mental Disabilities (CH) in Kamenicë/Kamenica, managed by Kamenica Municipality;
16. Community Houses for Persons with Mental Disabilities (CH) in Vushtrria, managed by Vushtrria Municipality;
17. Community Houses for Persons with Mental Disabilities (CH) in Deçan/Decani, managed by Decani Municipality;
18. Community Houses for Persons with Mental Disabilities (CH) in Gracanica, managed by Gracanica Municipality;
19. Community Houses for Persons with Mental Disabilities (CH) in Lipjan/Lipljan, managed by Lipjan/Lipljan Municipality.

- **Mental Health Institutions:** CIRCPP, IFPK and ICH, which are under Ministry of Health's management (MoH), respectively, Hospital and University Clinical Service of Kosovo, treats and accommodates people with mental disabilities.

- **Social Cares Institutions:** Shtime Special Institute and House of Children with Mental Disabilities, which are managed by Ministry of Labour and Social Welfare (MLSW) and the Community Houses in Shimte, Ferizaj, Kamenice,

Vushtrri, Deçan, Graçanicë and Lipjan, under Municipalities' Directories for Health and Social Welfare, treats and accommodates persons with mental disabilities, respectively, persons with stumble in development.

Structure of the monitored institutions by KRCT is as



3. PROGRESS IN THESE INSTITUTIONS DURING 2016

3.1. Management of the Community Housings by the Municipalities

Since January 2016, Community Housings for people with mental disorders, which have been under the management of MLSW, have passed under the jurisdiction of municipalities. According to the heads of these institutions, the cooperation with municipalities has been satisfactory, respectively municipalities have shown due diligence in management of these institutions.

3.2. Opening of Community Housing in Lipjan/Lipljan

Initiated and concluded by MLSW, the Community Housing in Lipjan/Lipljan, was opened in 2016 and it is managed by the municipality of Lipjan/Lipljan. Despite the difficulties encountered since the opening of the institution – the area where this house is located has high humidity and several times since its opening interventions were made due to floods - accommodation space is provided according to standards. This institution has a capacity for 10 residents, while so far 6 residents are accommodated.

3.3. Construction of Integrated Community Housing (ICH) in Mitrovicë/Mitrovica

During 2016, functioning of another Integrated Community Housing in Mitrovicë/Mitrovica is planned.

3.4. Integrated Community Housing in Pejë/Pec

In the ICH in Peja/Pec, the accommodation of residents was of a high standard compared with the other mental health institutions in Kosovë/Kosovo. Living rooms and bedrooms are well maintained and suitable for accommodation. The beds are new, there are closets for each resident, carpet and covers are appropriate and equal for all residents, there are curtains at bedroom windows, the floors have carpets and facilities are generally maintained. Therefore, the premises in ICH are considered suitable for the accommodation of residents, offering a family residential environment.

It is also the only institution that has an individualized treatment plan. Medical examinations are regular. Various activities are carried out within the institution and in MHCs.

Peja ICH is a model of organization, operation and treatment of residents.

3.5. The opening of a new facility in Special Institute in Shtime/Stimlje

During 2016, within the premises of SISH a new facility was built in which the administration of this institution is placed. The previous administration area is adapted for residential use and a new unit is opened in which 13 residents are accommodated, selected among the 65 residents of this institution. Due to a special treatment plan, residents located in this unit are of light retardation.

3.6. Involvement of volunteers and interns in Special Institute in Shtime/Stimlje and Community Housings

Special Institute in Shtime/Stimlje and CH in Kamenicë/Kamenica in 2016 have hired interns, mainly of the social field.

3.7. Regular supply of medicines

Besides the ICH in Gjilan/Gnjilane, who faces a lack of supply with necessary medicines, all other institutions of mental health and social care have had regular and sufficient supply of medicines.

4. MAIN FINDINGS DURING MONITORING

4.1. Legislation and legal rights

On 24 October 2015, the Assembly of Kosovo approved the first Law on Mental Health, Law No. 05/L-025, which entered into force in December 2015.

This law is aimed to protect and promote mental health, preventing problems related, guaranteeing the rights and improving the quality of life for people with mental disorders.

This law defines the procedures, conditions for the protection of mental health through the provision of health care, social environment suitable for people with mental disorders and preventive policies for the protection of mental health.

Under Article 34 of the Law on Mental Health, in order to ensure the implementation of this Law, within one year from the date of its entry into force, the Kosovo Government and relevant ministries are to issue the necessary by-law acts which are foreseen under this law.

For the implementation of this law, the issuance of 27 by-law acts is foreseen in 2016, but so far no by-law acts for implementation of this law were issued. This means that the Law on Mental Health which entered into force a year ago has not been implemented yet.

Law on Mental Health in principle only regulates the operation of mental health institutions that are under the management of Ministry of Health, respectively HUCSK (Hospital and University Clinical Service of Kosovo).

However, Article 18 of this law envisages the enactment of a by-law act for the treatment of residents of social care institutions.

Namely, so far there is no specific law that regulates the issue of treating the residents in social care institutions, which are managed by the MLSW and Municipalities.

Regulations, according to which residents are treated in social care institutions, provide the treatment of persons who are not capable to act.

To the persons, whom the ability to act is removed by a court decision, have been assigned a legal guardian, who is obliged to take care of the rights and representation of these persons. This year, just like in the past, no interest was shown by legal representatives / legal guardian of these residents. Also there were no cases when they were given the opportunity to realize their right of inheritance.

Also, as of 2016, only residents of KRCT who have reached 65 years receive the pension of age, whilst residents of other institutions do not enjoy this right, even though the law has no restrictions for this category.

Recommendations:

- *To issue all bylaws and to implement Law on Mental Health;*
- *Placement and treatment of persons with mental disabilities to be in accordance with the Law;*

- *To make possible enjoyment of legal rights for residents in mental health and social care institutions.*

4.2. Treatment of persons with mental disorders

Ill-treatment, torture and inhuman degrading or humiliating treatment are prohibited in the absolute sense with the international and domestic law, and cannot be justified under any circumstances. Protection from torture or inhuman degrading or humiliating treatment is an inalienable human right, whether it is public emergency, state security issue or other reasons.

During regular monitoring visits to institutions of mental health and social care, mainly without prior notice, KRCT has not evidenced any case of torture or ill-treatment by staff towards persons with mental disorders.

However, the KRCT has evidenced high number of injuries of residents, either among the residents or self-inflicted injuries (only in CIRCPP during January-December 2016 were evidenced around 80 cases of injuries and 38 cases of self-inflicted injuries). In these cases, the injury is described that residents have attacked each other causing injuries, mainly of light level, but worrisome remains injuries caused by stray dogs inside the fences of the institution. Out of 80 cases of injuries, 20 were caused by the bite of stray dogs.

Insufficient number of staff hired in this institution is one of the factors of injuries caused between the residents and by biting of stray dogs, who cannot supervise all residents at the same time. But this does not justify the protection of residents

from injury at the facility - which is not a guarantee of an adequate treatment.

Also in some cases are applied restrictive means in order to prevent self-inflicted injuries, such as hand tying. This way of limitation often is not recommended by relevant professional staff, it is not described in separate protocols, and it is not monitored on a regular basis.

Lack of professional staff, such as a doctor, a psychiatrist, a psychologist, etc., does not guarantee adequate treatment to persons with mental disorders, where in many cases the medicine therapy was given for a long time (there are evidenced cases of over one year) without ever being re-examined by the doctor specialist, who previously prescribed the medicines. Also nurses or assistants give therapy to them in case of crises, without being examined by respective doctor.

The residents accommodated in these institutions are not informed for the reasons of their accommodation and treatment in these institutions and they have no information regarding the time of their stay in these institutions. Also they are never informed about the treatment with medicines. KRCT has evidenced cases when residents refused to take their therapy, but to whom the therapy is given in a hidden way.

Recommendations:

- *To have sufficient staff, by numbers and in aspect of professionalism as well, for treatment of residents;*

- *To prevent cases of injuries and self-injuries within institutions;*
- *Restrictions of residents to be in accordance with the law and in the shortest possible time.*

4.3. Material and housing conditions

Compared to previous years, the physical condition of the institutions for mental health and social care has improved significantly.

Continuous renovations have been carried out in major institutions to prevent humidity, rehabilitation of sanitary nodes, supplying with beds and accommodation furnishings.

However, there were institutions in which KRCT has evidenced the need for immediate renovations and repairs of residential premises. In a room of CH in Ferizaj/Urosevac there was considerable humidity, where the bed of the resident was placed next to the wall damaged by humidity; in ICH in Ferizaj/Urosevac, there was humidity on the kitchen walls; in the hall of ICH in Mitrovicë/Mitrovica there was humidity coming from the bathroom, the closets of the residents were also damaged; in ICH in Prizren one room had humidity coming from the bathrooms. The rooms in CH Deçan/Decani were still humid. One resident in CH in Deçan/Decani started to remove the parquet/laminate during the night, greatly damaging it, then the whole parquet was removed and the room remained without parquet and it was cold. In ICH Ferizaj/Urosevac, one bed was totally damaged but was staying in the room while the resident was sleeping on the floor.

The supply with sheets and cover and clothing in ICHs was correct; CH were supplied with sheets and cover by municipalities they are managed by. In CH Ferizaj/Urosevac sheets and covers were not sufficient. CIRCPP and SISH were supplied with sheets and covers and clothing from donations, but which were insufficient. HC in Shtime/Stimlje is also supplied by donations, and now recently a family member of one resident supplied it with blankets for all residents, but there is a lack of sheets and pillows and also the mattresses are about to be damaged.

Apart from ICHs, where clothing is personal for each resident, the residents in CH in Deçan/Decani have also their personal clothing, while in other CHs, the residents of CH, SISH and CIRCPP have no personal clothing, which is exchanged between residents after each washing/cleaning. Each resident in CH Deçan/Decani had a closet which was located in the hall and each one of them has spare of clothing, sheets and covers.

The number of beds in rooms was acceptable compared to the space of the room. After the opening of the new unit in SISH, now there is no overpopulation like before when 5 beds were located in one room, which was under any standard, now there are 3 beds located in each room.

In general, the hygienic condition was up to par, however there were cases when unpleasant smell was noticed, and also general premises and residents' rooms were not clean enough (ICH Ferizaj/Urosevac, Mitrovicë/Mitrovica, Gjakovë/Djakovica, because in ICH no assistants for cleaning

have been hired, and the cleaning of the premises is mainly done by the residents).

The washing of sheets and covers is mainly done on a regular basis. No defects of washing machines were detected during the monitoring visits, on the contrary spare machines were found. In CIRCPP the renovation of the laundry was conducted and now they are supplied with big (industrial) washing machines.

In ICH Gjakovë/Djakovica, ICH Gjilan/Gnjilane, CH Shtime/Stimlje they face constant power cuts.

All institutions were supplied with fuel for the winter season on a regular basis. In CIRCPP one unit was closed due to problems with heating, therefore the residents were scattered in 3 other units.

The presence of stray dogs within the premises of CIRCPP remains worrisome, which presents danger for the residents, often injuring/biting.

Frequent presence of stray dogs has also appeared in other institutions, but the number of the residents of CIRCPP, who suffered injuries by stray dogs within the institution, is worrisome.

Recommendations:

- *KRCT calls the responsible authorities to undertake all measures to secure the lives of the residents, because the residents are under institutional*

responsibilities and the institutions are accountable for their consequences;

- *Supply with clothes, sheets and blankets to be sufficiently provided by all institutions.*

4.4. Food and kitchen

All monitored institutions have been supplied with food on a regular basis. The food is prepared according to the designated menu. In CIRCPP, SISH, CHs (Community Housing) and CH (Children House), the food is prepared by the relevant staff, while in ICHs, the food is prepared by the residents who are monitored by ICHs' nurses.

Kitchen appliances were functional in all the institutions, where many of the institutions have been supplied with new kitchens during this year. In CIRCPP all the kitchen elements are replaced with new ones, they are also supplied with new tables and chairs in the dining room.

In SISH, CIRCPP and some ICHs, greenhouses are planted with vegetables which are used by the residents for their daily meals.

4.5. Health services

Offering of professional health services remains worrisome in institutions of mental health and social care.

- Around 65 residents are accommodated in CIRCPP, and regular health services which are provided are limited to: psychiatric services. So, in CIRCPP the director of the

institution is a psychiatrist and he/she offers regular psychiatrist services to residents, while other general health services and specialist services are offered only in case of need at MFMC or UCKK.

- In SISH, one full-time general doctor is hired, and one psychiatrist once per week.

- ICHs provide regular psychiatric services, because they are part of the Mental Health Centres, which cover the psychiatric service. While other general health services and specialist services they receive at MFMC, Regional Hospitals or in UCKK. In some of ICHs is hired a psychologist from MHC.

- CHs (Community Housing) and CH (Children House) have no general health or specialist services on a regular basis. Besides Kamenicë/Kamenica CH (Community Housing), which for years has an agreement with the Mental Health Centre in Gjilan, where the residents are being sent 2 times a year for regular psychiatric visits. CH (Community Housing) in Kamenicë/Kamenica also organizes systematic general medical visits, internist and gynaecological. Also CH (Community Housing) in Deçan/Decani in October 2016 signed a contract with a psychiatrist for the realization of regular psychiatric visits, while other specialist services in this institution and other CHs (Community Housings) are carried out only as necessary and not on a regular basis. Thus, there are residents with psychiatric therapy, who use them for months and years without being re-examined by a psychiatrist.

- In CH (Children House) Shtime/Stimlje, there was a child with autism, who was never treated by any professional.

Therefore, there is a lack of systematic general health services, regular psychiatric services, internist, gynaecological, lack of a psychologist, a social worker, speech therapist, physiatrist, etc. - all services necessary for the treatment of persons with mental disorders are treated in institutions of mental health and social care. Also, there is no individual plan and annual plan of treatment.

Despite the fact that half of the residents are women, and of different ages, apart of CH (Community Housing) in Kamenicë/Kamenica, no other institution carries out regular gynaecological visits.

Even though professional and health services are lacking, CH (Community Housing) in Kamenicë/Kamenica, from time to time, voluntarily hires interns. In December 2016, 2 psychologists have commenced their internship in CH (Community Housing) Kamenicë/Kamenica .

Also SISH has also concluded an agreement with the Private College "HEIMERER" where groups of 7-10 students will hold their 6 months practice in SISH, including nursing and gerontologist students.

Also in 2016, around 20 students have held internships in the SISH, including profiles of psychology, social work, gerontology.

The files of residents are not maintained regularly. Responsible staff of institutions often faces difficulties to find the necessary documents as they are not well maintained.

Protocols for identifying the cases are missing, e.g. protocol of deaths, protocol of death cases, attempts / suicides, injuries, self-inflicted injuries, etc. Besides CIRCPP, which this year has prepared special protocols for all possible cases.

Laboratory tests are not followed on a regular basis. Almost all residents use medicines, but their laboratory tests are not followed. General laboratory tests were carried out to all residents of ICH Mitrovicë/Mitrovica, ICH Gjiilan/Gnjilane, CH (Community Housing) Kamenicë/Kamenica, CH (Community Housing) Deçan/Decani CH (Community Housing) Shtime/Stimlje.

Seasonal vaccination has been applied in most of the institutions.

In general, supply of medicines has been regular. In SISH, CIRCPP, CHs (Community Housing), - supply of medicines has been regular and sufficient. ICHs are mainly supplied on a regular basis by MHS, with the exception of ICH Gjiilan/Gnjilane, which constantly faces the lack of supply of medicines. Usually they are supplied only with one type of medicine, while all others must be purchased by the cash money of MHS, or by family members of residents. In ICH Gjiilan, around 90% of medicines are lacking. During the time of the monitoring visit, they were supplied only with Leponex.

Apart from a package with Ampicillin in one institution, which had expired on 05/2016, the monitoring team has not evidenced expired medicines in any other case.

In CIRCPP 3 rooms have been prepared for the residents with TBC, in case of need. Some residents have made the necessary tests and are waiting for the results, who are suspected to have TBC. If the TBC cases are identified, they will be isolated in separate areas according of MH standards.

The nursing staff of ICHs and CIRCPP has held constant nursing trainings. Also some of SISH. Whereas CH's (Community Housing) staff has not held any professional training.

Recommendations:

- *To complete the medical and professional staff, as well as technik;*
- *To conduct systematic medical visits;*
- *To make individual plans of treatment and review of treatment;*
- *To keep records for treatment of each case;*
- *To organize professional trainings for CHs.*

4.6. Activities

In general no regular activities are organized. However different activities are being carried out in some of these institutions. The residents in SISH have the hall for handicraft activities, such as wood crafting, upholstery, sewing, painting etc.

General activities that are organized are as follows: dancing, singing, dominoes, chess, musical instruments etc. In some ICHs they have fitness equipment, but they are rarely used by the residents.

In ICH Gjilan/Gnjilane, a football match for the residents is organized every week, which takes place in a contracted sporting field.

Residents of ICHs are engaged in housework and in the kitchen, under the supervision of the institution's staff.

4.7. Contact with the outside world

Visits by family members and relatives are allowed to all residents of the mental health and social care institutions, but these visits are not so often. There is a slight improvement regarding residents - family relations compared to previous years, but these relations remain rare. The residents of ICHs have more relations with their families, where they pay more frequent visits.

Visits from relatives are also rare, these institutions have no special space for receiving visitors of residents.

Legal guardians, whether family members (who are also legal guardians) or guardians of CSW, do not visit them on a regular basis, apart from several cases.

Residents, who have families and good familiar relationships, have the right to visit their families, during weekends or holidays. But the number of families who accept to spend their time with the residents is relatively small. This is due to

the fact that some of them have no close family, or they are not capable of taking care of them. However it is a pity that there are families, especially intellectual ones and those involved in business who mainly do not express their interest for their family members who are treated in these institutions.

In all institutions, common facilities (rooms of daily stay) have TVs, while in some ICHs they have TVs also in their bedrooms. In the last visit in CIRCPP, in December 2016, contracts with the cable network had expired and TV programs were not active.

In some ICH residents buy the newspaper and read it, some of them have computers, phones etc.

4.8. Cigarettes, alcohol and drugs

The residents of mental health and social care institutions are mainly smokers, but the issue of providing the cigarettes is not regulated in these institutions. In SISH and CIRCP, each of them which accommodate around 65 residents, cigarettes are provided by the institution's budget, even though it does not respond the residents' requests. In ICH the cigarettes for residents are provided by their family members, while in CH (Community Housing) the cigarettes are not provided every time, they are mainly provided voluntarily by the staff.

- KRCT recommends an institutional solution to be found for this issue.

KRCT has not evidenced cases related to alcohol and drug use in these institutions. There have been cases when they were

taken from the street and sent to these institutions, since they did not have families and housing, but over time they were adapted to the treatment in the institution.

4.9. Inter-institutional cooperation

KRCT has continuously recommended having satisfactory cooperation between institutions due to specific treatment needs of the people with mental disorders, such as cooperation between institutions of mental health and institutions of health (primary health care, secondary health care, tertiary health care). In general there is mutual cooperation, but there are cases when institutions of public health neglect the requests to treat people with mental disorders, refusing their hospitalization without constantly being accompanied by nurses of the institutions of mental health and social care, despite the fact that these institutions are facing the lack of nursery staff.

The lack of proper institutional cooperation is evidenced in Gjakovë/Djakovica, where since 2010 when the monitoring of the institutions of mental health commenced, cases of neglect treatment of residents have been evidenced in Gjakovë/Djakovica. In cases when hospitalization of residents of ICH in Regional Hospital in Gjakovë/Djakovica is necessary, these cases are constantly rejected by the specialists of other departments, by recommending that such cases to treat in Psychiatric Department, regardless needs for hospitalization in other departments.

4.10. Duration of stay in the institution

The duration of stay in the institution of mental health or social care for these cases is not usually determined. However the duration of their stay in institutions, is almost eternal. In rare cases (only from ICHs) residents return to their families, whereas all the other cases end their lives in residential institutions.

4.11. Lack of staff

Lack of general staff in these institutions (of nursing and assistance) remains challenging for their treatment. Given the physical and mental state of residents, the number of the hired staff compared to the residents is extremely small.

Also the financial motivation for the staff of the institutions of mental health and social care is very low despite the hard work. Despite the lack of financial motivation, individual willingness and readiness to perform their jobs is noticed.

Their request is that the risk at work and the compensation of risk to be recognized to the staff working in these institutions.

The work during official holidays and duty hours/stand-by are mainly paid, with the exception of some institutions. Since the time when the staff of CH (Community Housing) Shtime/Stimlje passed under municipal competency, their overtime work has not been paid, also the MLSW did not pay for the duty hours/stand-by work for 8 months and so far they have not received it.

- Payment of extra shifts should be paid for the staff of all institutions, regardless from which levels are managed.

4.12. Institute of Forensic Psychiatry of Kosovo

This institute is dedicated to psychiatric examinations of offenders who are suspected that at the time of the offense have been under mental affect or have been diminished intellectual capacity and this institute also serves for the enforcement of mandatory psychiatric treatment.

Its capacity is 36 beds, whilst 12 beds are dedicated for psychiatric expertise and 24 beds for mandatory psychiatric treatment.

The purpose of establishing this institution was psychiatric examination of mental health perpetrators and the execution of the measure of mandatory psychiatric treatment in custody, under the legal provisions of Criminal Code, Procedural Criminal Code and the Law on Execution of Penal Sanctions.

Although this institution required by Law on Mental Health (art.13, para. 1.2), still the statute for his functioning has not been issued yet.

Lack of its statute for this institution, has shown difficulties on managing and treatment of the cases, because Courts have no appropriate information regarding competences for treatment of cases in this institution.

Even though the institution it is established especially for psychiatric examination for detainees or convicts who are in court process, and for the execution of the measure for mandatory psychiatric treatment in custody, in accordance to article 89 of the Criminal Code of Kosovo, Courts very often sends in this institution cases who did not committed any criminal offence.

Few months ago, based on a Court decision, a women who was a trafficking victim and pregnant was placed in this institution. Last months of the pregnancy women had spent in IKFP, from where she was sent to the Gynaecological Clinic in HUCSK to born her child. After birth the same was returned to IFPK where she stayed for another month. Then she was transferred to the CIRCPP in Shtime, following the recommendation of the commission established by UCKK, who assessed that this case should not continue to be held in IFPK.

The recent case is a juvenile (female) 17 years of old, which with a decision from Basic Court of Gjilan, Juveniles Department, has been placed in IFPK for psychiatric examination but she has been placed in the department for holding the measure for mandatory psychiatric treatment in custody. As a matter of lack of special spaces for juveniles, this minor girl kept in same places with men of this institution.

Cases sending for psychiatric examination or mandatory psychiatric treatment in IFPK for persons who did not committed criminal offences prescribed in Criminal Code of Kosovo and the not reasoning of the decisions by Courts

accordingly to legal provisions, besides over-loading the IFPK on their responsibilities for handling such cases, constitutes legal violation and violation of human rights as well.

Recommandation:

KRCT recommends that as soon as possible to be drafted and to approve the Statute for IFPK and to clarify its mandate. Also a continuing communication with Courts and Prosecutors, who should be informed with competences of this institution.

5. ACTIVITIES CONDUCTED DURING 2016

5.1. Regional Conference “Let’s act in regional level for a better respect of persons with mental health problems”, 29th January 2016



On January 29, 2016, the regional conference in Skopje was held on the topic *"Let's act in regional level for a better respect of persons with mental health problems"*. This conference was organized within the framework of the regional project funded by the Swiss Federal Department of Foreign Affairs, and implemented by the Kosova Rehabilitation Center for Torture Victims, the Albanian Helsinki Committee, the Macedonian Helsinki Committee and the Helsinki Committee for Human Rights in Serbia.



In this conference were presented findings and recommendations from the monitoring of mental health institutions during 2015, in four countries (Kosovo, Albania, Macedonia and Serbia). The monitoring was conducted by the joint monitoring team from members of four partner organizations, which was concluded with the publication of the joint monitoring report.

5.2. Visit of Civil Rights Defenders at the Special Institute in Shtime, February 20, 2016

A delegation composed of senior Civil Rights Defenders officials from Stockholm on February 20, 2016 visited the Special Institute in Shtime. Civil Rights Defenders, during 2010-2015, supported the project "*Promoting Human Rights in Mental Health Institutions*", implemented by KRCT.



The Delegation consisting of Board members and Executive Director of Civil Rights Defenders was hosted by the management of the institution from which they were informed about the achievements and challenges in this institution, as well as visiting residents and facilities. The purpose of this visit was to be informed about the developments in this institution, the improvements made in recent years, respectively the changes from 2010 - when KRCT started monitoring the mental health institutions.

5.3. World Bioethics Day, October 19, 2016

The Clinical and University Hospital of Kosovo, the Center for Integration and Rehabilitation of the Chronic and Psychiatric Patients in Shtime and the Kosovo Bioethics Unit,

organized for the first time the "19th October - World Bioethics Day" marking.



In this event, KRCT Executive Director presented the topic *"Ethical and legal bases for involuntary treatment in psychiatric health institutions in Kosovo"*.

5.4. Regional Advocacy Meeting "Challenges and opportunities of regional networks for advocacy in criminal justice reform in the Western Balkans", 1 - 2 December 2016

Civil Rights Defenders and KRCT organized a Regional Advocacy Meeting on the topic *"Challenges and opportunities of regional networks for advocacy in criminal justice reform in the Western Balkans"*, which was held in Pristina, 1-2 December 2016. In this meeting participated representatives of civil society organizations from the Western Balkans, who discussed the challenges and opportunities in criminal justice reform.



It was also discussed about the challenges of monitoring in closed institutions, where representatives of participating organizations share good practices and methodology of monitoring work. In addition to advocating for criminal justice reform, KRCT also introduced monitoring methodology in mental health and social care institutions, achievements in these institutions and constructive cooperation with mental health and social care institutions.

5.5. Annual Conference on "Human Rights in Mental Health and Social Care Institutions", December 14, 2016

Within the mandate of monitoring the respect for human rights in places deprived of liberty, KRCT held its regular - seventh annual conference "*Human Rights in Mental Health and Social Care Institutions*". The conference aimed to present findings from the monitoring of Kosovo's mental health institutions during 2016 and to provide the opportunity to representatives of relevant institutions to discuss and address important issues.



Main achievements presented at the conference:

- *KRCT assessed positively the progress made in recent years in the treatment of people with mental disabilities.*
- *KRCT also praised the support and attention that central and local institutions have had towards the treatment and general conditions of this category of society.*
- *KRCT evidenced the overall progress made in terms of placement and accommodation of people with mental disorders due to continuous renovations, physical capacity building - new community-based housing construction etc.*
- *The sustainability of food and hygiene products throughout the system was highlighted during 2016, including the supply of medicines for these institutions.*

Challenges and deficiencies identified:

- *Lack of relevant professional services in most institutions; Lack of staff; Lack of training and professional developmental / capacity building for staff of institutions etc.*
- *Legal Infrastructure. The lack of implementation of the Mental Health Law, which is in effect since December 2015, was mentioned as the main obstacle to the advancement of mental health and the realization of the legal provisions of this law, which should be ensured through the adoption of bylaws. These by-laws, even one year after the Law on Mental Health has been issued, the Ministry of Health has not taken any steps to draft and adopt these acts.*
- *The Institute of Forensic Psychiatry of Kosovo (IPFK) has been continuously evaluated as a very good example and the only such institution in the countries of the region. However, the lack of legal definition of the status of this Institution is challenging the purpose of the Institute, which is the administration of persons with mental disorders who have been convicted by a court judgment with compulsory psychiatric treatment as well as persons under an investigative process and for those who the court has requested a psychiatric examination.*
- *KRCT has noticed an unacceptable practice in the human rights perspective, where three juveniles with mental disorders were placed together with adults, in same premises and a pregnant woman have been recently placed in this institution (IPFK) for several months and then based on recommendation of the medical team was sent to the CIRCPP.*
- *Representatives of the Special Institute in Shtime and the Center for Integration and Rehabilitation of the Chronic and*

Psychiatric Patients in Shtime (CIRCPP) raised the concern of the presence of stray dogs in the premises of these two institutions. As a result, residents located there are often troubled by stray dogs and there have been a considerable number of residents' injuries on the part of dogs that gather in large numbers there. These concerns were said to have been raised earlier to the municipal authorities, but no solution has yet been found on this issue.

- KRCT as in the past has also highlighted the stagnations in the realization of legal rights for persons with mental disabilities, including the right to inheritance and the right to basic pension age.

Findings and recommendations from this conference are presented in many local media.