

EXTERNAL

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To: Medical professionals
From: Medical Office / Research Department - Middle East
Date: 24 September 1992

MEDICAL LETTER WRITING ACTION

Prisoners needing medical care LIBYA

Keywords

Theme: deprivation of medical care/ill-treatment/prison conditions

Summary

Hundreds of political prisoners are held in Libyan prisons in conditions which fail to meet international standards. Prisoners, many of whom who have been arbitrarily arrested and tortured in the months following arrest, are kept in harsh conditions. Some of those held are prisoners of conscience; others are held without trial or as a result of conviction following unfair court proceedings. Prisoners have grossly inadequate medical care and there are reports of some deaths in custody. Brief information is given about six prisoners reported to be in poor health although the number of prisoners with medical complaints is believed to be much greater.

For additional information on political prisoners in Libya see the external paper *Libya: Further information on political detention* (MDE 19/03/92, September 1992).

Recommended Actions

Letters from medical professionals, preferably written in good Arabic, English, Italian, otherwise your own language, should be sent to the addresses below:

- stating that you are writing solely for humanitarian reasons on an issue of human rights
- expressing concern about the reported conditions in Libyan prisons and in particular the limited availability of doctors to sick prisoners
- seeking information about the provision of health care to prisoners in Libya
- using as examples the cases of the six prisoners described below express concern about the health of all political prisoners currently detained in Libya. You could seek detailed information about current whereabouts of the named prisoners, their state of health and the treatment they are receiving. Seek assurances that they will be given appropriate medical investigation and treatment for their illnesses including transfer to specialist medical facilities if this is necessary. (You could refer to the provisions of the Standard Minimum Rules and the Body of Principles referred to in the attached information.)

- seeking assurances that prisoners will be granted regular access to their families and other visitors

Addresses

Head of State

His Excellency
Colonel Mu'ammr al-Gaddafi
Leader of the Revolution
Office of the Leader of the Revolution
Tripoli
Great Socialist People's
Libyan Arab Jamahiriya

Foreign Secretary

His Excellency
Ibrahim Muhammad al-Bishari
Secretary of the People's Committee of
the People's Bureau for Foreign Liaison and
International Cooperation
Secretariat of the People's Committee of
the People's Bureau for Foreign Liaison and
International Cooperation
Tripoli
Great Socialist People's
Libyan Arab Jamahiriya

Health Secretary

His Excellency
Dr Zaidan Badr Zaidan
Secretary of the People's Committee for Health
Secretariat of the People's Committee for Health
Tripoli
Great Socialist People's
Libyan Arab Jamahiriya

Official responsible for human rights

Mr Muhammad 'Ali al-Jadi
President of the Supreme Court and
Chairman of the Libyan Human Rights Committee
Tripoli
Great Socialist People's
Libyan Arab Jamahiriya

Please send copies to Libyan embassies or interest sections in your own country.

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MEDICAL CONCERN

**Medical care in prisons
LIBYA**

More than 550 political prisoners are currently held in Libyan prisons or detention centres, most in harsh conditions and apparently without access to adequate medical care. In some prisons inmates are held in cells containing up to 14 people. They contain a shower and toilet which prisoners must keep clean. The cell is open to fluctuations in temperature so that it is extremely hot during summer and cold during winter. Prisoners may see a doctor infrequently, possibly in a group consultation, but prisoners in acute ill-health have no automatic right to see a doctor. Medical care appears to be dispensed mainly by nurses. In view of the use of prolonged incommunicado detention and the past practices used against prisoners, Amnesty International fears that large numbers of prisoners are at risk of ill health without access to adequate medical care.

Background

Amnesty International has appealed to the Libyan authorities for many years concerning the imprisonment of prisoners of conscience, the ill-treatment of detainees, unfair trials which failed to meet international standards, the use of incommunicado detention and imprisonment without trial and prison conditions which might constitute cruel, inhuman or degrading treatment or punishment. In March 1988, according to official statements, some 400 political prisoners were released in an amnesty. Currently there are more than 550 political prisoners made up of those who didn't benefit from the amnesty and others who were arrested after March 1988. Individuals arrested after 1988 are being held incommunicado and therefore their conditions are likely to be worse than the conditions experienced by prisoners before the amnesty. Medical care is believed to be inadequate, leaving sick prisoners at serious risk of deteriorating health.

Use of torture: The purpose of torture appears to be to extract "confessions" and also to break the will of the prisoners. Prior to 1988, in Abu Salim prison for example, prisoners were subjected to torture for up to three months following arrest. They were kept hooded during the torture which usually occurred at night in the administration section of the prison and was inflicted on small groups of prisoners taken from different cells. Torture methods included severe beatings (including *falaqa* - beating of the soles of the feet), hanging by the wrists from a ceiling or high window (*ta'liq*) or being suspended from a pole inserted between the knees and elbows, electric shocks and burning with cigarettes. Amnesty International has also received unconfirmed reports that prisoners are exposed to aggressive dogs which inflict bite wounds. Psychological torture in the form of death threats and threats of abuses against the prisoner and his family (particularly female relatives) were also reported. As detailed below, medical care following torture was totally inadequate.

Medical care: Standards within Libyan prisons appear to fall short of international standards for provision of basic facilities such as bedding, in the quality of food and in the availability of medical care. Although a doctor may be present in a detention centre, prisoners will see him rarely, perhaps routinely twice a year in a group examination, though the major part of the health care may be undertaken by nurses. Medication is limited to simple drugs such as aspirin and some antibiotics. Prisoners suffering acutely would not have automatic access to the doctor; prisoners would have to make persistent demands or show signs of serious distress to be taken to the medical centre.

Individual cases

A number of prisoners are reported to be in ill health and not receiving adequate medical care. These include:

Nouri 'Ammoush, detained 1974. He is a married man around 50-years-old and was alleged to have spied for the USA. He is believed to have been tried and sentenced to life imprisonment. Nouri 'Ammoush is reported to be suffering from cardiovascular disease with swelling of the lower limbs. Both legs are said to be "infected" and there is a risk of gangrene developing. He is restricted to a wheel chair and is almost certainly not getting adequate medical care. He is believed to be in Abu Salim prison.

Muhammad 'Ali al-Huwaydi, detained in February 1981 in Benghazi. He is around 40 years old, and is married with one child. He was a naval officer who, in 1978 or 1979 left Libya for Egypt where he remained until crossing back into Libya in February 1981. He was reportedly arrested at the border in possession of political publications and was arrested and tortured. He was tried and sentenced to death but the sentence was never carried out. He is currently held in Abu Salim prison and is reported to be suffering from signs of serious mental disorder, possibly schizophrenia.

al-Za'ir Sa'id al-A'awaj, detained in September 1984. He was born in the mid-1950s in Kikla, Tripoli and is a mining engineer. He is currently believed to be held in Abu Salim prison and is reported to be suffering from mental illness (of which Amnesty International does not have details).

al-Sadiq Ahmad Zarti, detained in May 1984. He was born in Tripoli in the mid-1950s, is married with two children and was a resident of the Suq al-Jum'a district of Tripoli. He was a student of English literature at the University of Tripoli. He is currently believed to be held in Abu Salim prison and is reported to be suffering from very poor health (of which Amnesty International does not have details).

'Imad al-Hasaydi, detained in May 1984. Reportedly arrested during the clash between armed opponents of the government and security forces which occurred at the border between Libya and Tunisia in April and May 1984. He was subsequently treated for bullet wounds and is currently believed to be held in Abu Salim prison in Tripoli. He is reportedly being held without charge or trial and to be in poor health.

Muhammad al-Majrab, detained in May 1984. Arrested possibly in connection with a major armed clash with security forces in Tripoli in 1984. He is reportedly held without charge or trial. He is in his early 40s and prior to arrest was a professor of administration in the National Institute for Administration. He is said to suffer from diabetes and anaemia.

The United Nations Standard Minimum Rules for the Treatment of Prisoners provides that prisons should have available a qualified medical officer with some knowledge of psychiatry and

should "include a psychiatric service for the diagnosis and ... the treatment of states of mental abnormality" [22(1)] and that "sick prisoners who require specialist treatment shall be transferred to specialised institutions or to civil hospitals" [22(2)]. Rule 25(1) specifies that the medical officer should "daily see all sick prisoners, all who complain of illness, and any prisoner to whom his attention is specially directed". Rule 91 permits an untried prisoner "to be visited and treated by his own doctor or dentist".

The UN Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment provide at Principle 24 that:

"A proper medical examination shall be offered to a detained or imprisoned person as promptly as possible after his admission to the place of detention or imprisonment, and thereafter medical care and treatment shall be provided whenever necessary. This care and treatment shall be provided free of charge."