

REPORT ON THE VISIT OF THE HELSINKI COMMITTEE FOR HUMAN RIGHTS OF THE REPUBLIC OF MACEDONIA TO THE SPECIAL INSTITUTION - DEMIR KAPIJA

1. Introduction

In accordance with the strategic and long established practice of visits the closed type institutions in the country, Helsinki Committee for Human Rights in Macedonia visited the Special Institution – Demir Kapija. The visit took place on February 5th, 2016, upon previously acquired permission from the Ministry of Labour and Social Policy no. 10-241/2 on 15.01.2016. The purpose was to determine the actual situation of the conditions and the realization of fundamental human rights of persons with intellectual disabilities who are placed in this institution, and because of their vulnerability represent a sensitive category of citizens and are entitled to special rights based on their special needs. This report focuses on the situation regarding the capacity, the personnel organization of the institution, the living conditions, the hygiene, the accommodation of patients, the treatment and care of the patients, the health care, the program contents and activities, and the patient' contacts with the outside world.

Starting from the National Deinstitutionalization Strategy 2008-2018¹ aimed at raising the quality of care for certain categories of citizens exposed to social risks that have been identified as target groups, through realization of the process of deinstitutionalization, the special institution in Demir Kapija is one of the institutions for accommodation of two of the four target groups² of beneficiaries referred to in the strategy, which according to the Strategy have been identified as most vulnerable and most numerous beneficiaries of institutional forms of protection. This concerns children with intellectual and physical development up to 26 years of age and persons with intellectual or physical development over 26 years of age. Among other things, the Strategy also targets the most pressing problems in the process of protection for these categories of beneficiaries by the Special Institution in Demir Kapija and gives recommendations and proposed actions for providing better care to the abovementioned beneficiaries. One of the aims of the visit to Demir Kapija and of this report is to review which of the

¹ <http://mtsp.gov.mk/WBStorage/Files/Nacionalna%20Strategija%20za%20deinstitucionalizacija%20 2008-2018 %20 2 .pdf>

² Children without parental care; Children with educational, social and behavioral problems; Children with intellectual or physical development disabilities up to 26 years of age; People with intellectual or physical disabilities older than 26 years of age

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measures and activities proposed in the Strategy have been taken and implemented by the Special Institution in Demir Kapija, and as a result, have helped in overcoming the aforementioned problems.

This is the second visit of the Helsinki Committee for Human Rights of the Republic of Macedonia to the Special Institution in Demir Kapija. The first visit took place on 28.02.2012 within the framework of the project titled “Monitoring the Implementation of the National Preventive Mechanism for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment”, for which a report was drafted that includes certain problems and recommendations for overcoming the problems.³

2. Primary Obligations of the Special Institution in Demir Hisar

- accommodation of persons with severe and profound mental retardation
- providing care for the beneficiaries with profound mental retardation especially for those who are immobile and are unable to perform their basic daily hygiene habits
- providing constant health care
- rehabilitation-correctional treatment, psycho-motoric re-education and educational-occupational process
- organizing sporting-recreational and cultural-entertaining activities
- constant engagement of beneficiaries in various activities based on their remaining psychophysical abilities in order to ensure a higher level of occupational training

3. Capacity, Staff and Personnel Structure

At the time of our visit to the institution accommodated 227 beneficiaries, among which, according to information obtained by talking to the director, there were no minors. At the time of our visit, the number of employees in the Special Institution was 153 and it includes: 4 special education teachers, 1 social worker, 18 medical nurses, 70 caregivers, and the rest were employed as administration or technical staff. It is interesting that the special institution has not yet permanently employed a primary care physician, an issue which was also stated in the visit report of the Helsinki Committee for Human Rights in the Republic Macedonia of special institutions and psychiatric hospitals in the Republic Macedonia for the period of 2011-2012.⁴ In a conversation with the Director of the Special Institution, we were informed that in the institution occasionally comes a physician, who is still a resident of family

³ <http://www.mhc.org.mk/publications/104>

⁴ <http://www.mhc.org.mk/publications/104>

medicine. This creates a problem for assisting beneficiaries in other health care facilities in obtaining adequate health care because special institutions are not authorized to issue referrals. It is also worth mentioning that despite having no permanent primary care physician, the Special Institution still hasn't employed a dentist—yet another issue noted in the aforementioned report of the Committee for the period of 2011-2012.

4. Living Conditions, Hygiene, Accommodation

Upon visiting the wards, we realized that the mixed Department C3 was closed. It should be noted that all departments are in poor condition and do not meet minimum living conditions. The outside of the buildings is in poor condition, the walls are damaged, and the facade is falling in several places. The patients' rooms are damp and full of mold. They almost have no wardrobe closets, and the blankets are old and worn out, most of the beds have no pillows, and in some of the rooms, we could see street cats lying on the beds of the patients. The toilets do not meet the standards as well since they were old, damaged and lacked essential cleaning products and tools. It was evident that the tiles in all the toilets had not been cleaned in a while, there were mold and dirt in sinks and bathtubs, and most of the WC shells had feces. It is worth mentioning that the staff at the Special Institution refused to turn on the lighting in some of the toilets because they were in an extremely poor condition. A strong smell of urine could be sensed throughout all departments. The institution's poor hygiene, among other things, is a result of the lack of personnel. In several departments, we could see how the patients maintain the hygiene themselves, that in turn reflects on their personal hygiene which is also very poor. In terms of nutrition, it was observed that there was no separate eating room, but the patients ate their meals in an improvised eating room. The chef did not give us sufficient information about the quality of food and the method of its preparation. In the kitchen, as in other areas, there was a strong smell of mold and dampness was visible on the walls.

5. Treatment and Care of Patients, Health Care, Program Content and Activities, Contact with the Outside World and Inspection

Regarding the health care, we were informed that the patients had been vaccinated for the seasonal flu, the vaccination was carried out with a delay of two months. So, instead of being carried out in October, the patients were vaccinated in December 2015. We did not obtain any information on where the vaccine supply came from. The Special Institution still has no gynecologist or gynecological chair accessible for people with physical disabilities. We have received information that the patients are not

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КОМИТЕТИ И
HELSINKIT
PER DE RECHT A E IJERIJUT
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ХЕЛСИНШКИ
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ПРАВА РЕПУБЛИКЕ
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his concern about certain actions that pose a risk and can lead to degrading and/or inhuman treatment and required the institution's management take specific measures. The report also stated that the material conditions and situations do not meet the desired standards in terms of toilets and bathrooms, which are partially ruined and unadjusted for the elderly, while a great number of the beds and mattresses are old and worn out. The Ombudsman expressed concern that the elevator in the so-called "new facility" was not functioning properly, making access to occupational therapy, physical therapy and outer walking space for the majority of beneficiaries (semi-mobile or immobile) on the second floor of the building significantly more difficult, thus limiting the freedom and movement space of beneficiaries.

The report concluded that there is insufficient staffing at the Institution for the following positions: primary care physician, psychiatrist, speech therapist, social worker and other profiles, while the presence and visits by external collaborators (such as a gynecologist, internist and physiatrist) do not meet the requirements. During the visit, the Ombudsman stated there was a lack of food and food products because meals were not always prepared in accordance with the established list of meals. Another worrying issue is the practice of giving contraceptives without the consent of the guardian or the beneficiary (unless his/her decision-making capacity was suspended), but also beneficiaries were not always properly informed and familiarized with the purpose of the given contraception.

Considering all of the above, we'd like to ask the Ministry of Labor and Social Policy the following questions:

1. Is the Ministry familiar with the situations of the institution's capacity, staff and personnel organization, the living conditions, the hygiene, the accommodation of patients, the treatment and care of patients, the health care, the program content, and activities and contacts with the outside world of the patients?
2. What measures has the Ministry taken for overcoming the aforementioned problems?
3. What measures is the Ministry planning to take for overcoming the aforementioned problems in the future?

With the aim of an immediate overcoming of the problems established during the visit of the Special Institution Demir Kapija, the Helsinki Committee recommends the following:

1. A full implementation of the National Strategy for Deinstitutionalization 2008-2018 at the Special Institution in Demir Kapija;

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Attachment – photos taken during the visit



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