



**MAY-
JULY
2020**

**MANAGEMENT OF
DECONFINEMENT IN
SPANISH PRISONS**

**MONITORING THE DEPRIVATION OF LIBERTY AND
POLICE ACTIVITY DURING THE COVID-19
EMERGENCY**

MONITORING THE DEPRIVATION OF LIBERTY DURING THE DECONFINATION OF SPANISH PRISON CENTRES AFTER THE COVID-19 EMERGENCY

Following the work we at the SIRECOVI Team of the Observatory of the Penal System and Human Rights (OSPDH) are doing to monitor the impact of the pandemic and the measures adopted by the various administrations to deal with it in state penitentiaries, for our research project Monitoring the Deprivation of Liberty and Police Activity During the Covid-19 Emergency, we now present the second monitoring report on the management of the coronavirus in Catalan prisons.

Through constant monitoring of the prison system, our aim is to produce an X-ray (dynamic diagnosis) that reflects, both in a quantitative and qualitative way, the level of impact that the pandemic is having on the two prison systems that coexist in the Spanish State. In this way, we aim to offer information regarding the number of infections, but also about the measures adopted by the administrations and their implications on communications, prison population reduction, health services, social reintegration activities, work and education.

We at SIRECOVI published three reports at the beginning of July, as part of this research project. One, relating to the management carried out in the penitentiary centres dependent on the SGIP (which covers the Spanish state excluding Catalonia) another, relating to the prisons dependent on the Secretary of Criminal Proceedings, Reintegration, and Victim Care (SMPRAV, which covers Catalonia); and a third, in which the main recommendations made by civil society organizations and

entities were systematized, both at the international, state and local levels. We invite you to consult the three reports through the following links:

<http://www.ub.edu/ospdh/es/node/696>

<http://www.ub.edu/ospdh/es/node/697>

<http://www.ub.edu/ospdh/es/node/695>

In our report on the management of the pandemic in Spanish prisons, we analysed the main measures adopted to deal with the health emergency during the State of Alarm. In this second report on Spanish prisons, we address the main measures adopted during the so-called de-escalation phase. This new phase begins on May 13th, when the government relaxed the measures it adopted to deal with the COVID-19 health crisis, and lasts until mid-July, when the Ministry of the Interior repealed the restrictions of the de-escalation phase and published rules to be applied during the 'new normal'.

As in the previous report, in order to prepare this document, in addition to scrutinizing the measures adopted by the General Secretariat of Penitentiary Institutions (SGIP), its operational documents and publicity campaigns, the impact of these measures has been analysed by cross-referencing them with other sources such as

the experiences of prisoners and their families, and the information that comes to us from social organizations, family members and prisoners' support groups throughout the Spanish territory. In turn, special attention has been paid to the communications and complaints made by the different prison workers unions, as they constitute a group directly affected by said management.

An in-depth analysis of newspaper archive material has also been carried out, although it should be noted that unlike what happened during the State of Alarm, where there were numerous news reports about the reality in prisons, during the de-escalation the attention paid from the mass media to the reality of daily life in our prisons has been significantly reduced, resuming the classic trend of no interest by the media in what is happening inside our prisons.

This report follows a format very similar to the previous report in which we collected the main actions taken in Spanish prisons during the State of Alarm, so the information will be presented in various thematic blocks. Firstly, however, a brief introduction will be made in order to clarify how the de-confinement has been rolled out in Spanish prisons.

Once again, we will conclude the report with a series of assessments made after our diagnoses, with the aim of highlighting the measures that have had a positive impact, as well as those that have not, pointing out other measures that could have had the greatest impact, and measures that could be expanded or maintained even after the pandemic.

We at SIRECOVI hope that the results of these diagnoses can contribute to the work being carried out by other human rights organizations, family members' and prisoners' support groups, legal groups, and those responsible for the relevant public administrations.

THE DE-CONFINATION PROCESS IN SGIP PENITENTIARY CENTRES

The COVID-19 pandemic forced the SGIP to adopt a series of restrictive measures aimed at the prevention and control of the disease in all prisons in the Spanish State, which: (1) affected inmates' mobility, (2) reduced prison access for family members and external professionals, and (3) closed down productive, educational and other workshops.

Before the de-escalation of the mobility and social-contact restrictions established for all citizens by Royal Decree 463/2020, on May 13th the Ministry of the Interior published some general rules (Order INT /407/2020), repealing the measures adopted in Spanish prisons to deal with COVID-19, in order to prepare prisons for the new situation.

In that document - which was sent to the Management Teams of all the prisons - the Ministry of the Interior outlined the activities that were to be gradually resumed in prisons including visits, leave, transfers, educational activities and assessment, qualifying that

these measures could be reversed if the epidemiological situation changes, either for all prisons or individually.

Despite the fact that the guidelines described in that document came into effect on May 14th, it did not make any mention of operational instructions and / or protocols for carrying out the gradual resumption of each of the above activities, which led to reluctance and even the filing of complaints by various union groups of prison officers.

In this context, on May 26th, the Spanish parliament urged the government to approve a protocol for de-escalation in prisons that had to be approved by agreement with the workers' representatives.

On June 4th, in view of the advance to phase 2 in most of the national territory, the SGIP sent prison management teams a new document on de-escalation measures, outlining specific rules regarding health and



safety protocols, in accordance with the general rules published on May 13th. It was not until June 10th when the SGIP published the "Technical document on de-escalation measures in prisons in relation to COVID-19" where it compiles, in a more exhaustive way, all the protocols to be adopted in the different areas of each penitentiary.

In this new document, the SGIP addresses the lifting of the restrictive measures in order to gradually and progressively resume the normal development of activity in prisons, in accordance with the action guidelines contained in the "Plan for a Transition Towards a New Normal" approved by the Council of Ministers on April 28th, 2020, which sets out a plan in four phases, phase 0 to phase 3.

The criteria and the rate of de-escalation set by the SGIP were the same as those determined by the health administration for the general population, although the nature of the prison environment required certain adaptations. In this context, specific rules are established for all state penitentiary centres that are located in geographical areas in phases 1 or 2, especially in relation to the mobility of people, in addition to the measures decreed by the government for these phases.

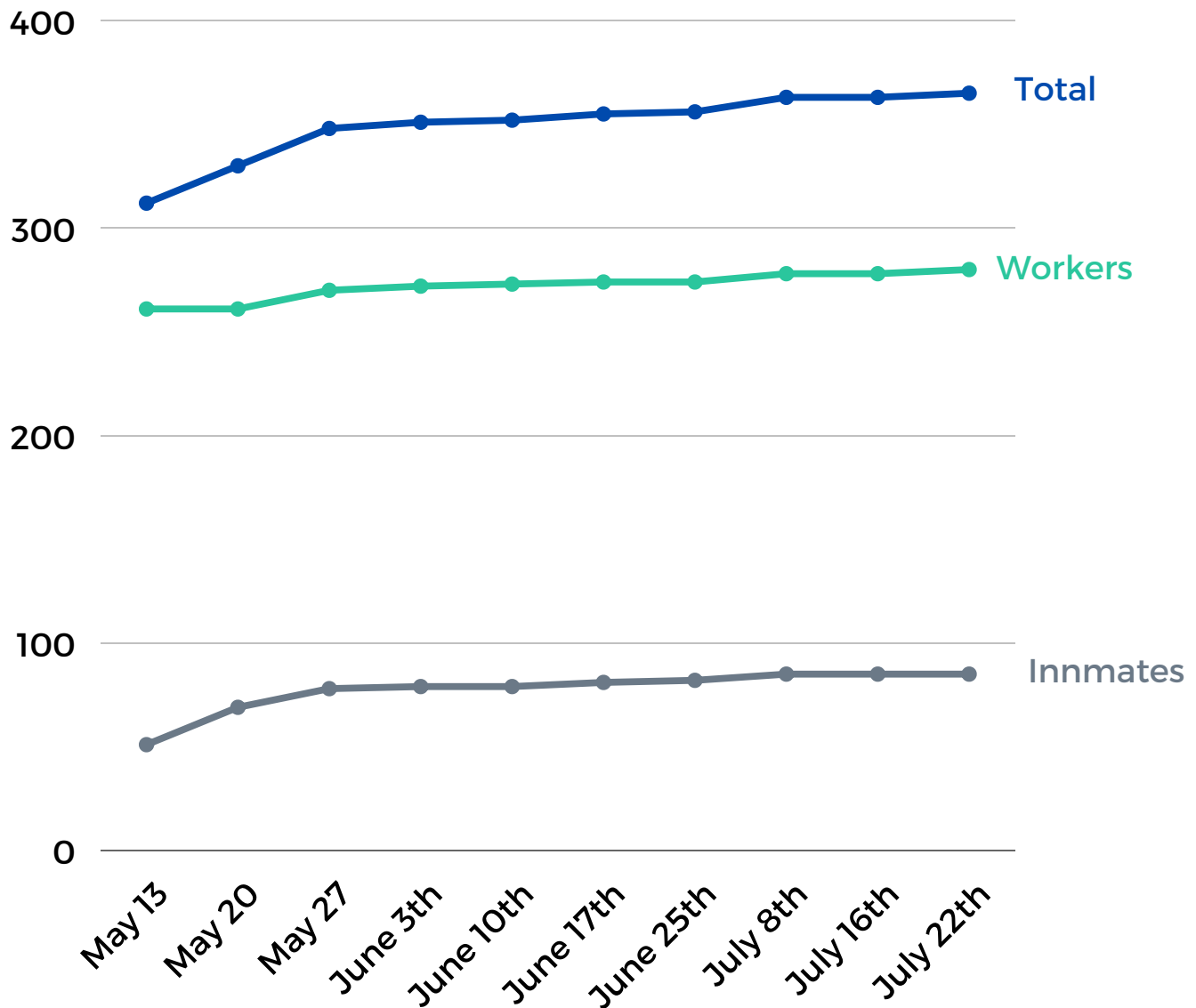
The specific measures described in the aforementioned document include protocols relating to the following activities: verbal communications via intercom booths, transfers, leave (ordinary and extraordinary), interventions, assessment activities and information for visitors. These will be analysed in greater detail in the various sections of the report.



CONTAGION STATISTICS



GRAPH 1: BALANCE SHEET OF COVID-19 INFECTIONS



Source: Own elaboration based on official data from the IIPP press office.

SANITARY MEASURES

May 12th

A total of 16 human rights organizations nationwide present "Proposals for De-escalation in the context of Covid-19 in Spanish State Prisons" to the SGIP.

These entities denounce that despite the fact that the central government approved the different de-confinement phases a week ago, specific information has still not been published on how it will be carried out in Spanish prisons.

The APDHA warns that the "most serious problem in this area is the precarious situation of healthcare in prisons, and its administrative dependence on the Ministry of the Interior" and they demand that the "critical" situation of prison health be improved.

May 13th

The SGIP sends out guidelines to all prisons for the relaxation of restrictions regarding

visits, transfers and exit permits for inmates.

The CSIF Union shows their disapproval of the SGIP's decision to restart family visits and inmates' leave, arguing that it is a premature move that does not offer sufficient sanitary guarantees for either inmates or workers.

Although the SGIP states that 1 million euros have been spent on PPE and that 400,000 masks have been distributed, the CSIF union complains that even after almost 60 days of pandemic, the reality is that not enough material has been distributed, and that masks with an approved use of 4 hours have been allocated for almost 40 of work.

The union also decries the failure to carry out PCR tests on all personnel and demands the delivery of PPE, one surgical mask every 4 hours, FFP2 masks, protective glasses or face shield, gloves, waterproof gowns.

May 15th

The CSIF Union warns that in the prisons of the Community of Madrid there are 99 cases of confirmed positives and more than 500 in quarantine due to suspected contagion, both workers and inmates, giving rise to a climate of insecurity and risk. Given this, they request the immediate supply of more PCR tests for all SGIP workers in the Community of Madrid.





May 20th

An occupational accident in one of the existing production workshops in Estremera prison (Madrid) - the prison with the highest number of people infected with coronavirus, which has spread to 8 of its 15 confined units - uncovers a new outbreak of COVID-19, adding 13 new positives to the inmates of that prison, where now there are 39 infected inmates.

May 21th

CSIF appeals the SGIP official letter of May 13th, claiming that it endangers the health of the inmates, prison workers and their respective families, and reports the SGIP to the General Secretariat of Labour for failing to fulfil its duty to protect the health of workers by providing only a single surgical-type mask, useable for only 4 hours, for a work shift that can reach 40 hours.

May 26th

Following the Ministry of Health's publication of the documents Strategy for Diagnosis, Surveillance and Control in the Transition Phase of the Covid-19 Pandemic, Monitoring Indicators and Guide for the Identification and Follow-up of Contacts in Covid-19 Cases, dated May 12th and 13th respectively, the SGIP modifies once again (fourth version) the rules for prison employees who have contact with people who may have COVID-19. This establishes new health protocols regarding new admissions, visits and the detection of suspected, probable or confirmed cases in prisons. Protocols for the use of the various types of mask are also established.

Regarding masks, it is established that due to the special organizational and functional configuration of prisons, use of masks will not be mandatory, both for internal security reasons and for health reasons, as far as it concerns people who coexist in the same physical space without maintaining a

continuous and permanent relationship with an external environment. Despite this, some exceptions are established including: inmates with suspicious symptoms or confirmed inmates and their contacts during the isolation period, inmates residing in the quarantined units (including the new admissions unit), inmates who carry out tasks that require moving between units, inmates who work in workshops, inmates on leave outside the prison, inmates who participate in interviews or meetings in therapeutic, educational, cultural groups, whenever it is not possible to maintain the interpersonal distance of 2m, or for any other reason determined by the health authority.

Following a proposal from the conservative Partido Popular parliamentary group, the Spanish parliament issues a bill urging the government to: (1) Approve a de-escalation protocol in prisons (after agreement with workers' representatives), (2) Carry out serological tests on all prison workers (3) Place screens and thermometers for the protection of workers (4) Provide FFP2 masks, nitrile gloves, screens, gowns and gels in all workstations (5) Disinfect all workstations daily.

May 27th

The CCOO union reiterates their request that the SGIP include COVID-19 within its health surveillance, and that therefore PCR tests be contracted, as well as the monitoring of confirmed cases and the specific surveillance of vulnerable personnel.

June 1st

Those in charge of the infirmary of Archidona prison (Malaga) report the transfer of an inmate to the Antequera Regional Hospital

on finding that he has breathing difficulties. After testing positive for coronavirus, the inmate is transferred to the Clinical Hospital of Malaga.

Relatives and inmates of Soto del Real prison (Madrid) complain that inmates who leave prison, either due to a court order or due to health problems, have to be, by protocol, confined in unit 9 for fourteen days alone in a cell where they spend 23 hours a day. They explain that they are "treated like maximum security prisoners". The inmates go down to get food from the canteen, but they have to go back to the cell to eat it and they are not allowed in the common areas.

June 2nd

After an inmate of the Archidona prison (Malaga) tested positive for coronavirus, the prison's management orders the sanitary isolation of the unit in which the inmate was previously located. The 112 inmates of unit 4 are now in quarantine and will not be able to access common areas or the prison yard until further notice. The management has established that meals will be served in the cells and the prison officers and nurses who had contact with the patient have been sent home to quarantine.

The SGIP warns of the increased risk of overdose when visits and the entry of parcels in the prisons begin to resume and they launch an intervention program to prevent overdoses that includes an information campaign entitled 'Contáciate de VIDA' (Infect yourself with life!). According to this campaign, special attention should be paid to those inmates who may be drug users, those who have recently started or increased the consumption of methadone, and those who have been prescribed various drugs, etc.



June 4th

After the advance to phase 2 of most of the national territory, the General Directorate of Penal Enforcement and Social Reintegration sends the directors of the centres a new document on de-escalation measures in prisons detailing specific guidelines for sanitary protocols, in accordance with the general guidelines published on May 13th.

A 14-day quarantine (or the time estimated by the health personnel) is established for inmates who return from leave or those who come from transfer from other prisons.

June 10th

The SGIP publishes a Technical Document on De-escalation Measures in Prisons in Relation to COVID-19, outlining the necessary precautions and measures for the gradual resumption of the various activities in prisons in order to minimize the risks of spreading COVID-19.

Basic and specific hygienic and sanitary measures are established (for each activity) to prevent and control COVID-19, among which the following should be highlighted: (1) Frequent and correct hand washing, with soap and water or hydroalcoholic gel; (2) Social distancing; (3) The use of masks by

workers and inmates; (4) PCR tests for all suspected cases within 24 hours. If the PCR is negative and there is a high clinical suspicion of COVID-19, the PCR will be repeated with a new sample from the respiratory tract. If the PCR continues to be negative and several days have passed since symptoms began, other tests may be considered; (5) In confirmed cases that do not require hospital admission, follow-up and isolation will be carried out in the prison itself. Isolation will be maintained until three days after the resolution of the fever, with a minimum of 14 days from the onset of symptoms; (6) Any asymptomatic person who has had close contact with a confirmed case must be quarantined in an individual cell for 14 days undergoing active surveillance (temperature measurement twice a day and symptom monitoring). The quarantine will end if the PCR result of the case is negative; (7) Quarantine happens in the admissions unit (for a maximum period of 14 days) for new admissions and those returning from leave; (8) For inmates who return to the prison from a judicial or hospital proceeding if it is suspected that there has been a risk of contact with a positive person they will be kept in quarantine in their own cell for at least 7 days.

June 20th

Prisoners and family members complain that

in the Villena (Alicante) and Zuera (Zaragoza) prisons the 15-day quarantines are still being carried out after leave and hospital visits, with the isolation regime that this entails, while in other prisons like Albocàsser (Castellón) the quarantines are only 6 days.

June 22nd

Relatives and prisoners complain that in Tenerife prison, the inmates of the admissions unit were being kept together with those who presented symptoms. According to the inmates, they did not request medical services for fear that they would be taken to unit 1 with the symptomatic patients and without their belongings, in a regime practically equal to isolation.

Before the announcement by the SGIP that face-to-face visits of close family and partners will be resumed next Thursday, the CCOO union protests that clear instructions have not been given on compliance in

health matters, establishing a model with which the prison administration intends to evade its responsibilities and transfer them to family and friends who visit the inmates. The union demands that clear instructions be given to the centres on aspects such as: capacity limitations, the mandatory use of a mask, the need to take the temperature of visitors without physical contact, the need to guarantee access to hydroalcoholic gels and cleaning and disinfection of the spaces after each visit, providing plastic mattress covers or replace the existing mattresses with more hygienic ones that allow cleaning after each use, establishing a cleaning and disinfection protocol for the textiles (sheets, towels, etc.) and ensuring adequate ventilation.

June 25th

Relatives of inmates of Soto del Real prison (Madrid) complain that in the units enabled for quarantines - in which inmates who leave the centre for a hospital emergency, court hearing or leave must stay for a minimum of



14 days - all the inmates are mixed, both those who have tested positive for COVID-19 and those who tested negative, and that inmates are also mixing out in the yard or while waiting to make phone calls.

In addition, some prisons have reduced the allotted time for daily calls.

June 26th

The SGIP sends a circular to the management of the various prisons around Spain with new guidelines (general and specific) for progress towards the new normal in prisons. It establishes that the management of each centre must give the appropriate indications and adopt the appropriate measures, in accordance with the resources and possibilities of each prison.

Regarding the new general health guidelines, it is worth highlighting that hygiene, distancing measures and the use of masks are to be maintained, but that preventive

quarantines are to be ended, at the discretion of prison medical professionals.

With regard to specific guidelines, we highlight: (1) new admissions are to be examined by a doctor as soon as possible (24 hours) to assess their clinical situation and if necessary postpone their admission to the prison; (2) Regarding transfers, the previous regulations are still in force; (3) Regarding leave, the sanitary regime of the local authority where the centre is located - and, if different, where the inmate's place of residence is located - is to be consulted and the return date is to be set on a working day to ensure the presence of health personnel; (4) Regarding visits, they will be re-established at the discretion of the management according to the epidemiological situation and the risk of the area. The medical service must certify that the inmate who is receiving the visit does not present any symptoms. Specific health measures are established that will be described in the visits section; (5) The



activities and treatments that had been suspended will begin to develop in a standardized way.

June 30th

The ACAIP-UGT Union files a complaint with the SGIP regarding the “new normal” measures approved by the SGIP on June 25th. The union protests that in the aforementioned document, far from adopting protection measures against the coronavirus, its guidelines regarding risk of exposure to the virus are ambiguous, leaving the real decision-making in the hands of the prison management.

Among the health aspects, the union highlights that the health alarm would be unworkable in many prisons in the event of outbreaks. They highlight that the depleted numbers of health professionals, added to the work overload that is required of them at this time, makes it essential that the problem in prison health must be addressed at once.

The union calls on the SGIP to adopt measures such as: providing masks to the inmates, conducting tests on all people from outside who enter the prisons or participate in face-to-face visits, and the division of common areas of the centres in order to safeguard social distancing according to the activity that takes place in each place (swimming pools, gyms, libraries, movie theatres, for example).

July 2nd

The SGIP issues a new version of the Action Guidelines for prison staff who have contact with people who may have contracted COVID-19, and a new protocol on the use of

masks in line with the new guidelines from the Ministry of Health.

July 7th

The CSIF union appeals the SGIP resolution regarding the measures for the new normal, considering that it endangers the health of prison professionals, inmates and third parties who enter the prisons.

The union considers that the guidelines issued on this matter by the SGIP have been made without correctly assessing the epidemiological situation and the impact of a possible outbreak inside a prison, and that the measures are insufficient, such as the adoption of a preventive quarantine for inmates who enter a prison or return from leave or by allowing 100% capacity of the visiting areas.

July 8th

Eighty inmates of unit 3 of Zuera prison (Zaragoza) are to be confined in sanitary isolation for fifteen days after an inmate tested positive for covid-19 yesterday morning in a PCR test he took in Ponent prison (Lleida), where he was taken last Wednesday.

The two inmates who had shared a cell with the prisoner who tested positive took the PCR test and were transferred yesterday to unit 11, which has been used during the state of alarm for confined inmates.

July 12th

The Prisons section of the Spanish Confederation of Medical Unions (CESM) voices its concern about the possibility of



new outbreaks in prisons during the new normal, highlighting the current precarious situation of prison health. As they explain, 220 doctors and 500 nurses attend the 66 penitentiary centres; 11 reintegration centre and two psychiatric centres, with a workforce where 90% of the doctors are over 50 years old and there are 220 places to fill.

Representatives of the Confederation denounce the lack of a common protocol for prisons in the 'new normal'. They point out that everything is left in the hands of the management of each centre, meaning that there are 66 different models - one for each prison - of adopted measures coexisting. In addition, it leaves everything to the discretion of the doctors, who in many cases do not have the appropriate diagnostic means, for example in the case of transfers, leave or admissions, which leads them to “saturate the units with sanitary isolations and run unnecessary risks”.

The prison doctors demand reliable serological tests for the inmates, as some prisons bought them but others did not.

July 16th

The CSIF Union presents an appeal against the de-escalation measures in prisons (sent by the SGIP to prisons on June 25th) because

they do not comply with the law nor guarantee safety and hygiene in such a complicated time. The Union demands that SGIP resume preventive quarantines in specific units for new admissions and those who return to prison after leave, a measure that is no longer mandatory since June 25th and that the Union considers essential to reinforce security.

July 20th

SGIP isolates all 23 inmates of the Fontcalent Social Insertion Centre (CIS) and urges those who were on weekend leave to remain at home after an inmate has begun to suffer symptoms compatible with the coronavirus. The inmate remains confined to her home.

The CSIF Union reiterates its concerns regarding the measures adopted before the transition to the new normality, protesting that it is 'unthinkable' that quarantine rules should be decided by the management of each prison without clear, stable and transparent criteria, and they demand that the SGIP urgently issue common protection standards for all centres, as was the case in the first wave of Covid-19.

The union is concerned that it is left to the discretion of the head of each penitentiary to quarantine new inmates and those who



return from leave, they are concerned that the quarantine is not applied to the inmates who have had a family or intimate partner visit, they are uneasy that visitors can enter with the sole requirement of a “Responsible Declaration”, an instrument that consists of a simple declaration that may contain an inaccuracy or an omission that could only be detected after an outbreak is caused. Regarding visits, they express amazement that, given the ongoing health crisis, there are no capacity limitations (such as 50% use of the intercom booths and two visitors per inmate), leaving their application to the discretion of the director of each prison, when for daily activities in society at large there are specific limitations due to COVID-19, for example, going to the movies.

COMMUNICATIONS MEASURES

FAMILY VISITS

May 12th

16 human rights organizations present the SGIP with proposals for the de-escalation of restrictions in Spanish state prisons, including: (1) Maintaining video calls to inmates' family members and close friends, increasing the number of mobile phones available, as well as the length and level of privacy of the video calls; (2) Maintaining the phone call protocol agreed during confinement, together with the cost-free nature of these calls for people with no money; (3) The progressive reestablishment of family visits, authorizing family members and close friends to travel to make visits to the penitentiary centres (located both inside and outside a given province) in coordination with the police to avoid visitors being fined.

Union sources meet today with the SGIP in order to advance towards a plan for de-

escalation. The CSIF Union shows their displeasure at the SGIP's call to restart visits (in morning and afternoon shifts every week day except one to carry out disinfection), and inmates' leave (both ordinary and extraordinary previously established), arguing that it is a premature decision that does not offer sufficient sanitary guarantees for inmates or workers.

May 13th

The SGIP sends out guidelines for the gradual relaxation of some of the measures adopted as a result of the COVID-19 health crisis to all prisons. Regarding the measures related to visits, it is established that ordinary conditions will be gradually resumed in all prisons.

May 14th

Pamplona prison (Navarre) reports that the introduction of video-calls has been very well received by inmates. One day shift was established per unit and inmates can make calls in the morning (from 10am to 12pm) and in the afternoon, as long as the numbers they call are registered among their regular contacts. Between 15 and 20 inmates per day have benefited from the measure, and a total of between 400 and



500 calls have been made. The video calls had a duration of 10 minutes each, they were made in the phone booths and the number was dialled by an official.

May 18th

Family visits are resumed by phone call in Pamplona prison as long as the visits comes from the province or health region in which the prison is located.

May 20th

Family visits are resumed at Seville I prison. The prison management informs that the use of family video calls - for which the prison has 4 smartphones - and the free call service for inmates with no money will be maintained.

Family visits are also resumed (by intercom booth) in the Dueso prison (Cantabria), which are carried out in three shifts in the morning and one in the afternoon, and are arranged by prior appointment. The management of the centre informs that these will be from Wednesday to Sunday since Mondays are reserved for intermodular communications, and Tuesdays are reserved for video calls for inmates whose relatives live another autonomous community. According to an estimate of the 400 inmates, some 350 will be able to receive visits through an intercom booth, with the rest unable due to restrictions that prevent movement between provinces.

May 21st

The SCIP reports that visits are being carried out through intercom booths in all prisons that are in phase 1 or 2. They explain that visits are being carried out with all health guarantees, such as the obligation to use





gloves and masks by family members and inmates, disinfection of the booths between visits and a general disinfection once a week. The capacity of the visiting departments has been reduced to 50% and visits have been extended to six days a week in several shifts, morning and afternoon. As explained since the entry into force of this new measure last Thursday, 5,000 inmates have been able to see their families again.

Lawyers and human rights entities report that in the Zuera prison (Zaragoza) neither gel nor masks are provided to the inmates for visits, nor anything to disinfect the telephones in the intercom booth.

The SGIP informs that the video-call service will be maintained (although they do not specify under what conditions), as explained so far, 54,000 calls have been made through this system in Spanish prisons.

Inmates and support groups report that in Zaballa prison (Alava) they have denied video calls to those inmates who receive face-to-face visits.

May 23

The Government Sub-delegation in Cadiz reports that a total of 512 prisoners from the Cadiz penitentiaries have begun to receive family visitors again. According to reports, there have been 60 visits in Puerto II prison; 253 in Puerto III; 194 in Algeciras; and, during this weekend, five visits are taking place at Puerto I.

They also report that during the lockdown of the prisons in the province of Cadiz, around 4,000 video calls took place.



May 25th

Social and family groups complain to the SGIP that they do not know the real numbers of contagion nor a protocol of security measures to re-establish visits in prisons in the de-escalation phases.

Relatives of inmates at Seville 2 prison complain that since the beginning of lockdown they have only been able to see their relatives on two occasions during 10-minute video-calls in which an official was with them at all times.

Lawyers complain that the information that has reached family members from SGIP has been completely biased, which has caused them much anguish due to the proliferation of rumours in relation to infections or deaths.

May 26th

The SGIP sends a circular to the management teams of all Spanish prisons through which it once again modifies the rules of action for prison workers. Regarding protocols related to visits, it establishes that:

1. Professionals dealing with visits must always maintain an interpersonal distance of 2 metres, and wear a surgical mask and nitrile gloves to handle objects (identity card,

money, etc.), in case maintaining distance is impossible, they must wear an FFP2 mask and instruct outsiders to wear a surgical mask at all times.

2. The digital scanner will be cleaned with a disinfectant and disposable paper, before and after each use.

3. In the event of suspected symptoms (cough, shortness of breath or fever) and suspicions of contact with COVID-19 in any of the people who come to visit, the officer on duty will notify the Head of Services to assess the situation and decide, where appropriate, whether to carry out the visit.

4. Regarding the reception of packages: Zones will be set up that respect safety distances, and the surfaces where packages are delivered and deposited must be disinfected before and after each use. The official on duty must use nitrile gloves, an FFP2 mask and a disposable gown on top. Once inspected, the packages will be placed in a plastic bag that will be closed and stored for 5 days. On the 6th day, the officer will search the contents of the package and deliver it to the prisoner.

May 30th

Relatives and close associates of the inmates in Albocàsser (Castellon) and Campos del Río (Murcia) prisons complain that video





calls are only allowed to inmates' family members, and that only the person whose number is called is allowed to participate in the call.

June 10th

The SGIP publishes the Technical Document on De-Escalation Measures in Prisons in Relation to COVID-19, establishing specific provisions for all Spanish prisons located in geographical areas currently in phases 1 or 2, and outlining the necessary precautions and measures for the gradual resumption of the various activities in prisons in order to minimize the risks of spreading COVID-19.

With regard to measures related to family visits, each prison must: (1) provide visitors with instructions on hand hygiene, respiratory hygiene, safety distance and that they come equipped with masks and gloves; (2) ensure that inmates come to visit only when there is no impediment from a clinical / health point of view; (3) reduce the number of visitors to a maximum of two per visit, restricted to authorized persons in the inmate's visit program. (4) establish a 50% maximum capacity of visiting areas for 6 days a week, with two shifts for visits in the morning and two in the afternoon, enforcing social distancing among visitors at all times; (5) recognize that transport for visitors will

be subject to the phase that each province is in; (6) carry out disinfection of surfaces and other elements both between visits and at the end of the established shifts, on a weekly basis. (7) The reestablishment of these visits does not prevent the maintenance of the currently authorized video calls and telephone calls.

Relatives report that in Daroca prison (Zaragoza) it is the inmates themselves who have to request an appointment to receive a visitor, with the difficulties of coordination with relatives that this method entails.

Relatives report that at Albocàsser prison (Castellon) they take the temperature of visitors when they enter and there is a disinfectant gel at the entrance, however, there are some officials who do not wear a mask.

June 19th

Relatives and close friends of inmates from various state prisons report problems in requesting video calls.

At Puerto I first degree (high security) prison (Cadiz) they report that so far no video calls have been authorized despite having been requested in April. Family visits are not

processed nor are Assessment Boards held for grade review.

In Picassent prison (Valencia) they complain that the Assessment Boards are not processing requests for video-calls, nor leave for humanitarian reasons to the inmates classified as first degree.

In Leon prison they report that requests for video calls are routinely denied.

June 22nd

Family members complain that in Villanubla (Valladolid) prison, packages and books are not allowed to enter and that first-grade inmates do not have access to video calls.

June 25th

The SGIP sends a letter to all prisons regarding the transition to new normality. From this moment on, face-to-face visits (family and intimate partners) will begin to progressively resume.

In the face-to-face visits, the same health indications and the same obligations as the general population will apply in general terms: use of masks, safety distance, disinfection of surfaces, hand washing and, avoiding visiting prison in the event of symptoms.

It is established that the return will be progressive. Intimate partner visits will resume first, then family visits and, lastly, children and dependents.

Prison medical services must be notified well in advance to confirm that visitors with appointments have no medical impediment (i.e. possible Covid-19 symptoms).

Authorized visitors must sign and deliver a statement in which they undertake to respect prevention measures and not to go to the prison in the case of infection or symptoms of COVID-19.

From this moment on, restrictions on the occupation of the intercom booths are lifted.

June 30th

The ACAIP-UGT Union files a complaint with the SGIP regarding the “new normal” measures approved by the SGIP on June 25th. The union complains that the de-escalation in prisons in terms of transfers, leave, visits and assessments is unsafe and not gradual.

Regarding visits, they complain that they have resumed without a schedule that satisfies the health criteria related to the province where the prisons are located or the place of origin of the visitors.

The union claims that the full reestablishment of visits by intercom booth might lead to totally avoidable risks, due to limited space in the booths and the waiting rooms of the visiting departments.

July 1st

Procedures to request face-to-face visits at Albocàsser prison (Castellon) are resumed.

July 7th

After two National Police officers guarding the perimeter of Badajoz prison tested positive for coronavirus, the association of prison officers "Your Abandonment Can Kill Me" request that visits and leave be temporarily suspended.



July 11th

Family and intimate partner face-to-face visits are being authorized again in Zuera prison (Zaragoza).

July 16th

Given Zaragoza's regression to phase 2, and the restrictions of movements in that city, the SGIP suspends family and intimate partner face-to-face visits in Zuera prison. The decision does not affect visits by intercom booths, nor does it affect nearby Daroca or Teruel prisons.

The CSIF Union presents an appeal against the de-escalation measures in state prisons, arguing that they do not comply with the law nor guarantee safety and hygiene in such a difficult moment. Among their complaints, it is worth highlighting: that mandatory separation around the intercom booths is not being enforced, that the minimum safety distance is not kept in waiting rooms (so up to 100 visitors congregate in confined spaces) and that packages from outside are not disinfected, nor have thermometers been installed in all prisons.

The Union warns that the resumption of communications among inmates and visits to prisons without adequate prevention protocols puts their health and that of the staff at risk in the event of possible

outbreaks and they demand that the SGIP reduce both the number of relatives that can visit and the number of visiting booths, and that face-to-face visits be postponed in the areas that have taken a step back in the de-escalation, until all safety guarantees are met.

July 18th

Intimate partner face-to-face visits are resumed in Pamplona prison. There is still no official news about the resumption of family members and children's visits.

July 20th

The CSIF Union reiterates their concerns regarding the measures adopted before the transition to the new normality. The union is concerned about the fact that the quarantine measure is not even considered for inmates who have had family and children and intimate partner visits, and that visitors can come and go with the sole requirement of a 'Declaration of Responsibility'.

June 25th

Family members and lawyers report that in Picassent (Valencia) Castellón II and Alicante II prisons, intimate partner visits are happening, and dates are being processed for family visits for the month of August.

ACCESS TO SOJP AND VISITS WITH OTHER LAWYERS

May 13th

Before the decree of Order INT/ 407/2020 by which restrictions adopted to prevent the expansion of COVID-19 in State prisons are relaxed, the General Council of the Spanish Lawyers (CGAE) petition the General Director of Criminal Enforcement and Social Reintegration to expressly authorize verbal visits via intercom booths between inmates and their lawyers. Likewise, they request the resumption of the normal SOJP service (Penitentiary Legal Guidance Service) at the prisons located in geographical areas that are in phase 1 or 2 of de-escalation, always with respect to the prevention measures established by the health authorities.

May 15th

SGIP informs that it is beginning to grant access to SOJP lawyers in all prisons.

May 16th

The face-to-face service of the SOJP is resumed in Dueso prison (Cantabria), although so far no requests have been registered. The CGAE prison law subcommittee report that during lockdown in this prison - unlike in other prisons - there has been no problem carrying out the service and the prison management has offered all possible facilities.

May 18th

The Penitentiary Assistance Shift resumes in

person at Alava prison.

In Pamplona prison, visits via intercom booths with both private lawyers and those from the SOJP are resumed, as long as the lawyers come from the province or the health zone in which the centre is located.

Seville I prison begins to receive visits from SOJP lawyers.

May 25th

Lawyers complain that they were denied access to Picassent prison (Valencia) by verbal order of the deputy director of security despite prison management having previously confirmed by telephone that they would be allowed to enter to visit inmates. According to their complaint, one of the lawyers managed to gain access to the prison after demanding to speak to the head of security, but several lawyers left without managing to enter.

May 27th

Given the favourable health status of the city of Salamanca, SOJP services are resumed in the city's Topas prison. The difference in phases between health zones meant that face-to-face visits to the prison could be made from May 4th, but not by SOJP or other lawyers, given that the Salamanca Bar Association, like most law firms are in different health zones than the prison.

SOJP lawyers report that due to the

preventive and hygienic measures, the procedures are made much slower, which has caused consultations in the prison to be reduced by half.

May 29th

The SOJP re-establishes its face-to-face service in Ourense and Valladolid prisons.

June 1st

Lawyers report that during phase 1 in Estremera prison (Madrid), only one lawyer is allowed access for all visiting rooms, so that a single lawyer must attend an average of 20 petitions each visiting day (which is limited to one day a week). Various lawyers complain that despite having gone to the prison with authorization to interview inmates, they were unable to access it since there was already another SOJP lawyer inside.

June 10th

The SGIP publishes the "Technical document on de-escalation measures in prisons in relation to COVID-19." Measures related to visits by private lawyers SOJP lawyers are included in the same specific provisions as visits with family members and external professionals (see above).

Given the progression of the phase of the Pamplona health region, face-to-face visits of the SOJP in Pamplona prison are resumed. These are held three days a week and are limited to one unit per day.

July 6th

The hours and the pre-COVID visit form are restored in the SOJP of Pamplona prison. Lawyers can attend in person three days a week and visit inmates from all units.

REINTEGRATION MEASURES

TREATMENT AND EDUCATIONAL ACTIVITIES

May 12th

16 human rights organizations present proposals to the SGIP for de-escalation in state prisons, among which they point to the need to reactivate rehabilitation and assessment activities, as these are the ones that allow compliance with the constitutional mandate of the deprivation of liberty: the social reintegration of prisoners.

These organizations emphasize the need to:

- (1) Recover the legal rhythm of holding Assessment Boards and, with this, the adoption of agreements regarding the classification of persons deprived of liberty, granting of leave and scheduled departures;
- (2) Resume, with the due security measures, assessment, sports, education, work and any other type of activities of the Penitentiary Centres, allowing once again the entry of professionals and monitors from collaborating associations;
- (3) Put an end to modular isolation resume activities in common facilities (sociocultural area, sports centre, courses...);
- (4) Resume access to prisons from members of NGOs and the possibility of interviews with prisoners through intercom booths;
- (5) Re-establish leave and scheduled departures;
- (6) Study

possible measures to compensate for the time in which prisoners have not been able to participate in activities and assessment programs, and allow access to third degree or anticipated parole, or a reduction of sentence time.

May 13th

The SGIP sends out guidelines to all prisons for the relaxation of the restrictions adopted to deal with the COVID-19 health crisis. The guidelines establish that reintegration activities will be resumed in state prisons, on the following incremental basis: (1) Parole and extraordinary leave; (2) Leave for third degree inmates and those classified in flexibility regimes; (3) Transfers of inmates when requested by the judicial authorities, for health, regimental or assessment reasons; (4) Educational, training, therapeutic, sports, cultural and religious activities, depending on the situation of the various prisons and the measures that may be adopted by the competent authorities in the matter.

Despite the above, it is established that the guidelines may be reversed if the epidemiological situation so requires, globally or individually for one or more prisons.

May 18th

Management of Seville I reports that although inmates have been submitting their requests for leave since May 14th, leave will not begin to be authorized at least until the end of the month. They explain that those who leave will have to undergo a 14-day quarantine upon their return to the prison and that they are still studying how many will be able to leave at the same time so that they can guarantee proper

quarantine on their return. They estimate that about one hundred permits per month will be authorized.

As for transfers, they explain that those for judicial proceedings have begun to be carried out, and the 14-day quarantines must also be maintained upon return.

With regard to treatment programs (gender violence, sexual abuse, therapy, etc.), and educational and occupational activities which had been reduced to a minimum, they will be directed by prison staff only, gradually resuming programs and activities from today. They explain that volunteer programs with NGOs will be reactivated in the coming weeks.

The CSIF Union speaks out against the existence of 3,500 vacancies in state prisons, among which it is worth highlighting the 195 positions for doctors and the 141 for social educators. The Union requests that the Ministry of the Interior resume the selection process called by the Resolution of October 9th, 2019 and the announcement of an extraordinary public job offer of 3,500 places for admission to Penitentiary Institutions.

May 20th

The SGIP informs that the procedures for leave requests have been resumed in all prisons, and that leave already authorized is beginning to be carried out, provided it is to be taken in the same geographical area in which the prison is located.

Regarding transfers, they inform that the transfer of those inmates progressed to the third degree whose destination is in the same province or geographical area as the

centre of origin will be favoured.

May 21st

The SGIP reports that since the application of law 296, inmates have requested leave but that only leave that is carried out in the province where the penitentiary is located is being authorized, and only when the inmates sign a consent form to remain under observation upon their return for 14 days or as long as the health services determine.

June 2nd

The SGIP implements an intervention program to prevent overdoses or RASUPSI (Acute Reactions to Psychoactive Substances) during the transition phase to the New Normal. As explained by the prisons' technical teams, they will create multidisciplinary commissions in which sports activities and specific therapeutic interventions in relapse prevention are planned and organized. According to reports, anxiety and stress states will also work and workshops will be held on COVID-19 so that prisoners have all the available information on its evolution and transmission.

In the context of the same program, with a view to preventing overdoses on leave, the development of the permit preparation program will be intensified, as well as the control conditions during their stay outside the prison. In turn, social workers, through telephone follow-ups, will support families to be actors involved in this prevention task.

June 4th

After the advancement to phase 2 of most of the national territory, the General Directorate of Criminal Enforcement and Social

Reintegration sends the directors of the centres a new document on the de-escalation measures in prisons that will be launched from next Monday, depending on the geographical area in which each penitentiary is located.

June 8th

The SGIP informs that as of today, intervention and treatment activities in state prisons will begin to resume. Activities that depend on external professionals entering the prisons will be resumed gradually, although it is established that no more than two people per collaborating entity may enter the centre.

Regarding educational activities, these will depend on what is established for each autonomous community. However, in general terms it is established that inmates will be dealt with individually and, if the activity is to be carried out in a group, this will not exceed 10 people.

Regarding transfers, they will begin to resume gradually for those prisons that are in health regions that have approved mobility, and interprovincial transfers are authorized for those inmates in third grade bound for a Social Insertion Centre (CIS). However, it is established that inmates who are in health quarantine units will not be transferred and that those inmates who change centres must remain under medical observation for 14 days or as long as the health personnel determine.

Regarding leave, the inmates who are authorized are informed that upon their return they must remain in quarantine for 14 days or as long as the health personnel deems.

June 12th

The SGIP informs that since March 12th, the execution plans for both community service (TBC) and psychoeducational programs linked to suspended sentences have been paralyzed, with 2,273 educational workshops



and 8,884 programs being interrupted.

As they explain, since then, SGIP technical professionals began to carry out telephone follow-ups of the people who at that time were carrying out treatment programs, especially in those profiles of greater vulnerability and / or risk of reoffending. Now after analysing the results, SGIP announces the extension of IT (telephone, mail, video call, chat, internet, social networks, etc.) to the workshops and programs of Penalties and Alternative Measures (PMA) to avoid new health risks, reduce costs and allow access to people with mobility problems.

June 15th

Lawyers report that since quarantines in Estremera (Madrid) - the prison with the highest number of infections - continue to be carried out, the sanitary isolation units are saturated, paralyzing and delaying leave.

In Aranjuez prison, rehabilitation and treatment programs are beginning to be reactivated.

June 17th

The SGIP informs that in order to give continuity to teaching activity and given that the students do not have access to any digital platform, reinforcement and extension material was provided for all the levels taught. As explained, the material has been delivered to students through the library services of the Penitentiary Centres.

June 25th

In points 5 and 6 of the New Normality Document published by the SGIP it is stated that “in interventions and activities with the

prison population, social distancing (1.5 - 2 metres) should be maintained between participants and, as far as possible, activities should be carried out in rooms that have ventilation. The number of attendees must take into account the capacity of the place where the activity is to take place, in accordance with the indications set by the corresponding Autonomous Community. Objects or material to be used must be for individual use and it will be ensured that they do not leave the room where they are used”.

June 30th

The ACAIP-UGT Union files a complaint with the SGIP regarding the “new normal” measures approved by SGIP on June 25th. The union considers that the de-escalation is not gradual, considering it worrying that decisions regarding interprovincial transfers or the reestablishment of all treatment activities in a normalized manner are delegated to the Directors of the prisons, once again leaving the decision-making process to the discretion of the Directors, without setting measures that allow standardization of guidelines.

July 10th

Assessment Boards once again function at Picassent prison for the progression of inmates classified in first degree.

July 15th

Face-to-face activities and workshops are re-established at Pamplona prison, with the pertinent distancing and hygiene measures.

PENITENTIARY WORK AND OCCUPATIONAL TRAINING

May 11th

The CSIF union requests the immediate closure of the production workshops authorized by the SGIP a few days ago "to prevent more infections by coronavirus, except in the case that they manufacture basic sanitary material". The union rejects the SGIP's unilateral ordering of the gradual reopening of these workshops and considers it reckless to the extent that their activity is not strategic in the fight against the pandemic and can further spread the virus among prison staff and inmates.

May 12th

The State Entity of Penitentiary Work and Training for Employment orders the reopening of ten workshops in five penitentiary centres of the Valencian Community in which 180 inmates work.

The ACAIP-UGT Union complains that the SGIP "seems to be above the health reality and has decided to go beyond it taking into account

only economic and profit criteria." As they explain, the action carried out so far is risky because there is no certainty of the state of health of either the companies' monitors, or of the couriers that access the prisons from the street. They also complain that inmates from different units are mixing in the workshops, and also despite the fact that it is indicated that inmates should not return from the workshop to their unit with work clothes, most workshops do not have a changing room so that inmates can change their clothes.

May 13th

The CSIF union reports the SGIP and the State Entity for Penitentiary Work and Training for Employment (ETPFE) to the Labour Inspectorate for violating the regulations for the prevention of occupational risks, endangering the health of inmates and prison workers.

CSIF has asked the Provincial Labour and Social Security Inspectorate to intervene in



the Albocàsser Penitentiary (Castellon) because it considers that the regulations on occupational risk prevention are being breached during the current health crisis. They complain that the management of Albocàsser has not installed any preventive health protocol at the accesses to the workshops, neither for inmates and prison employees, nor for external company personnel.

May 20th

An inmate suffers an accident in a productive workshop of the Madrid VII CP (Estremera) cutting his fingers with a wiring machine. The inmate is taken to hospital for amputation and when they test him for covid-19, he tests positive. The prison decides to provisionally close the production workshop to avoid further infections and has prohibited access to external workers from said company.

May 29th

The SGIP reports that after the total cessation

of activity in the production workshops (last March 19th), on April 15th the progressive reopening of these workshops began, reaching 70%, with some 1,600 internal employees engaged in work.

The State Entity for Prison Labour and Training for Employment (TPFE) sends a resolution to all state prisons to lift the suspension of productive activity that is carried out in collaboration with external companies in all prisons from next June 1st.

As reported, hygienic-sanitary and organizational measures will be maintained to prevent the spread of the coronavirus. Among those that should be highlighted: (1) It will be the Management of each centre who determines the maximum number of working inmates, guaranteeing physical distancing at all times and the rest of the measures approved by the Ministry of Health; (2) the inmates will be provided with masks as well as personal protective equipment (PPE) that will be provided by the collaborating company or the Penitentiary



Administration; (3) In the entry and exit of raw materials or products, any contact between external personnel and internal workers will be avoided.

June 25th

Relatives of inmates at Soto del Real prison (Madrid) complain that the work carried out in the productive workshops has not been interrupted for more than a few days during the State of Alarm, while communications with families and friends, departures to the outside and the entry of people from the street to carry out educational, cultural and occupational activities was prohibited - and face to face visits are still not allowed. The family members consider that the SGIP is prioritizing economic interest over their duty to protect the health of the inmates to the extent that work activity in the prisons has been the main source of Covid-19 contagion in Soto del Real. They are highly concerned that the virus has spread in this way to units where there is a higher percentage of inmates with a higher risk of mortality from coronavirus due to previous pathologies and / or being of advanced age.



PRISON POPULATION REDUCTION MEASURES

May 12th

16 human rights organizations present proposals to the SGIP for the de-escalation of restrictions in prisons, which emphasize the need to continue advocating for a reduction in the prison population, especially of the most vulnerable prisoners. Among the proposals of these organizations it is worth highlighting: (1) Keeping third degree prisoners who are currently under house arrest with electronic tags, telephone or in-person controls, and progressing third-degree prisoners who are currently in prison to this kind of house arrest; (2) The adoption of generalized measures aimed at granting open regimes and home detention for people under article 100.2 of the prison rules, to people over 65 years of age, to pregnant women and mothers with children in prison, to chronically ill people as well as other groups such as people who, although they do not have a chronic disease, have diseases considered high risk against the coronavirus; (3) Progression to third degree for those with short sentences or who were already enjoying leave before confinement, as well as people who have already served three quarters of their sentence; (4) The study and - when appropriate - the application of alternative measures to deprivation of liberty to prisoners with mental health problems, people with drug addiction problems, and people with family responsibilities.

May 20th

The SGIP sends instructions to all state prisons for the relaxation of the measures adopted in semi-open penitentiary centres. These measures will be applied in those establishments located in areas in phase 1 of the de-escalation and always according to the criteria set out by the health authority for the general public.

In general terms, it is established that the Assessment Boards will evaluate individually the cases of those inmates who are at home with electronic tags favouring that, in general, they can continue in that situation, unless they have to follow an intervention program at the Centre for Social Insertion (CIS) or if there has been a step backwards in their assessment progress.

The study of those people classified in second degree who have applied art. 100.2 assessing the origin of their progression to third grade or their continuity in second grade in art. 100.2 RP, to continue or initiate a treatment program within the CIS.

Regarding the transfers of inmates in open centres, the Boards will prioritise the transfer of third-degree inmates whose destination CIS is in the same geographic area as the centre of origin.

EVALUATIONS

As we concluded in our first reports, it is clear that public administrations face a great challenge in managing the COVID-19 health emergency. The prison environment represents a special challenge since it is a space of deprivation of liberty where the control of living conditions and personal communication are highly regulated and rights are restricted. It is evident that the restrictions that occur in this context are more cumbersome than for those who are at liberty.

With regard to the management of the pandemic in this de-escalation stage by the SGIP, we can make the following assessments:

While in the previous State of Alarm most of the measures adopted by the SGIP were restrictive in nature (due to the period of confinement, but also due to a lack of foresight in the event of the health emergency), on this occasion, they sent out various circulars with specific indications and recommendations to gradually develop many of the most routine aspects of life in prison. However, as in the previous period, these indications have not finally been translated into specific protocols,

leaving their application to the discretion of each penitentiary centre and, specifically, of its health personnel. This lack of specificity regarding the protocols, on many occasions has led to improvised decision-making.

While this lack of specificity has allowed a flexible application to adapt each prison to its specific health situation, depending on the region and de-escalation phase, it has also led to arbitrariness, which has often resulted in unequal access to certain rights (visits, legal guidance) among inmates of prisons which were in the same de-escalation phase.

The continuous changing of regulations and protocols, both between prisons, and in the same facility over short periods of time, has sometimes led to confusion and misinformation among prisoners and their families.

Health continues to be a concern. The SGIP announced at the beginning of the State of Alarm that 40 new doctors would be incorporated at the end of June or early July, but there is still no further information about them. This fact is compounded by the demands of prison physicians who demand greater health equipment and resources, especially in relation to serological tests. All of this, as various civil society organizations



have claimed for years, is ultimately a consequence of the structural deficit of resources that prison health suffers, and which would be largely resolved with the transfer of said competences to the from the Ministry of the Interior to regional public health systems. This transfer should have taken place by law 17 years ago, and would entail the equalization, or at least a resemblance of equalization, of the resources destined to the general public with those available in penitentiaries.

Regarding visits, the cancellation of both online and telephone means for requesting an appointment resulted in requests for an intercom booth visit to be the same as that of face-to-face visit in various prisons, for approximately two months until the restoration of telephone and computer service on July 6th. This entailed many bureaucratic steps that made the procedure difficult, since the prisoner had to request it from the prison and after authorization, he or she had to notify the visitors of the established day and time. We understand that sanitary measures and restrictions on travel between provinces were strictly enforced during the State of Alarm, but we don't understand the increase in bureaucratic procedures and the cessation of telematic reservations at a time like this.

Regarding telephone communications, we are concerned by the reports of relatives and close friends about their cost. The SGIP announced a free phone call service for those inmates who did not have any income, but without providing more detail. According to various reports, the budget provided for each inmate only covers two or three calls per week, the maximum allowed being ten. In addition, a great majority of inmates with very little income, whose fragile family

economies have been further diminished by the economic paralysis of the country, were left out of this measure. This, once again, highlights the need for the right to family contact regardless of the economic resources that the inmate or his support network may have.

Another aspect to take into account regarding communications and family contact is the number of video calls and the possibility of continuing with them once the normality of verbal communications has been restored. The SGIP hailed the completion of 54,000 video calls up to the end of May as a very positive figure, and although both inmates and family members have celebrated the measure, if this number of calls is divided among people deprived of liberty (discounting third degree prisoners) – about 33,500 people – the average is 1.6 video calls per person in just under two months. Taking into account that the regulatory instruction gives the right to 2 video calls per month, the count should have been 3 calls per inmate.

In any case, and as many families report, many first-degree inmates did not have access to any calls. On the other hand, it seems that the SGIP decision regarding the maintenance of video calls in the "new normal" seems to end up depending on the decision of each prison, clearly generating unequal and discriminatory treatment. As we have been pointing out during these months, this good practice of video calls should be established beyond the end of the health emergency, and should exist regardless of the possibility of physical communication with family members or relatives, which has a very decisive impact on the right to family and social relationships and to improve the

environment within the prison.

Regarding reintegration, as mentioned in the previous report, the premature opening of workshops with external personnel has led to an increased risk of contagion for prisoners and workers. Considering that this opening has taken place long before the visits of relatives and close friends via intercom booths and the resumption of reintegration programs with external NGOs, the prioritising of economic considerations over reintegration is clear.

Finally, with regard to reducing the prison population, according to official information, the commitment is to let most of the people who are under home detention due to the health crisis (about 5,000 people) stay in that situation. Although we welcome this decision, we have not been able to access the actual relevant figures, despite the fact that two months have passed since the end of the State of Alarm, so we do not know to what extent the commitment has been fulfilled. We believe that this has been a good measure that should remain, even beyond the health crisis (which will surely continue for a few more months) and that it should, as we have insisted from human rights organizations, be extended to more groups such as pregnant women and mothers, people over 65 years of age, people with serious or chronic diseases, and those who have diseases or pathologies that put them at greater risk with respect to Covid-19.

