

MOLDOVAN HELSINKI COMMITTEE FOR HUMAN RIGHTS

General Report

**ON DOCUMENTARY VISITS IN
PSYCHO-NEUROLOGICAL BOARDING-HOUSES
OF THE REPUBLIC OF MOLDOVA**

*„Respecting human rights supposes, first of all,
fully respecting the Human Mind”*

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Short description of the Moldovan Helsinki Committee

Moldovan Helsinki Committee for human rights is an independent, non-for-profit human rights organization founded by a group of human rights activists in Tiraspol, Transnistria region of the Republic of Moldova in the wake of dissolution of the Soviet Union in 1992. Moldovan Helsinki Committee monitors the respect for human rights obligations undertaken by the Republic of Moldova before OSCE, United Nations, and the Council of Europe. It advocates for respect, protection and promotion of the human rights values through providing independent expertise on human rights, legal and practices compliance. It carries out public interest advocating and litigation, raising of awareness of specific groups and general public of the serious human rights concerns guided by understanding of universal superior values of individual freedoms, social justice, equality and non-discrimination. Moldovan Helsinki Committee is a full member of the International Helsinki Federation for Human Rights (Vienna, www.ihf-hr.org).

Moldovan Helsinki Committee comprehensive subject based and overall reports on the respect of human rights in the Republic of Moldova are known as good and professionally prepared information, solicited and relied on by many specialized entities, including those of the Council of Europe, as for instance, the Council of Europe High Commissioner for Human Rights (<http://www.commissioner.coe.int/documents/translanshighlights.doc>), the European Committee on Prevention of Torture (<http://www.cpt.coe.int/fr/rapports/inf2000-20fr.htm>), PACE Monitoring Committee on the observance of obligations by the Republic of Moldova, US Department of State <http://www.state.gov/g/drl/rls/hrrpt/2001/eur/8304.htm>. Additional and detailed information can be accessed at www.humanrights.md or obtained from vanu@humanrights.md

Introduction

Due to the restructuring process that had started in the Central and Eastern Europe, in June 1990 Moldova proclaimed its sovereignty, and on August 27, 1991 – its State Independence. The Republic of Moldova became a member of the United Nations, the Council of Europe, the World Health Organization and other international bodies. The Republic of Moldova is a small country, favorably situated in the Southeast part of Europe, neighboring Romania to the West and Ukraine to the East.

The Republic of Moldova has a population of 4.2643 million and is one of the most densely populated European countries. Population density is 126.2 persons per square kilometer; its total area is of 33,843 sq. Km. Moldova is populated by different ethnic groups. A breakdown of major ethnic groups is as follows: Moldovans – 64,5%, Ukrainians - 13,8 %, Russians – 13 %, others (Gagauzians, Bulgarians, Jews, Byelorussians, Germans, Gypsies etc.).

A high ratio of the population lives in the rural area. The urban population represents 45 %. The major cities of Moldova include the capital city, Chisinau (over 700,000 people); Tiraspol (about 200,000); Balti (160,000); Tighina (140,000).

The Republic of Moldova is on the 113th place from those 177 evaluated countries in the Global Report of Human Development, annually published, being included the countries with average human development. Though, in the first half of the 90's, Moldova had been one of the most progressive post-soviet republics. As a reforming force, Moldova wasn't been able to keep its position which it had in 1990, when it was on 64th place according to Human Development Report. Now, 14 years later, the position of the republic is almost twice lower from the countries of international community.

Many qualified workers, professors, doctors etc. leaving the country, going abroad, therefore the schools have a severe absence of qualified teaching frame. Even though the

incomes sent home, by the Moldovans that went working abroad, contributes to increasing the country's gross internal production, still this doesn't mean a higher human development level or an economic well-balanced rise. Gross internal

Important is to distinguish the fact that poverty factor is still one of the most acute one, this is the first opinion of International Monetary Fund and World Bank. The Government of the Republic of Moldova have avoided for a long time the observance on poverty problems. In the last few years, the attitude of the Government towards the poverty has become more constructive. It is not excluded the fact that we are in the period before the "second wave" of reforms.

Glossary

Psycho-neurological boarding-house – psycho-neurological institution for maintenance and supervision of persons who suffer chronic mental disorders and who are not allowed to stay in an unspecialized institution for social assistance.

Patient – any person who receives mental health care or treatment and is regarded to all the persons who are admitted in a service of mental health.

The Direction of assistance of the patients in the psycho-neurological boarding-house – a ministry structure subordinated to the Ministry of Health and Social Protection, responsible for the organization, methodic work, and maintenance, supervision control of hospitalized persons.

Social Security – mainly refers to the field concerned with social protection system, representing the institutions on the whole and measures by which the state, the public authorities of local administration sphere and civil society that ensure prevention, limitation or dismissal of temporary or permanent effects of some situations that can generate marginalization or social exclusion of some persons. Social protection has as its main objective to protect the persons, who due to some socially recognized needs, including economic, physic, psychic or social factors are not able to realize their social needs, to develop own abilities and competence for social integration.

Disability - as it is applied to humans refers to any condition that impedes the completion of daily tasks using traditional methods, limitations of activity and restrictions of participation.

Communitarian integration (protection of persons with handicap) - refers to the access and participation, in personal autonomy, to the opportunities (education, work, culture etc.) offered by the community which the person with handicap belongs to.

Person with mental disorders – a person who has a mental illness, person with unstable psychic or insufficiently developed mentally or alcoholic or drug addicted, as well as person who manifest other disorders that can be classified according to the diagnosis norms that exist in medical practice, and recognized as mental disorder.

Communitarian service (protection of the persons with handicap) – service that allows taking care of the patient in his natural environment of life, according to the Law of mental health and of the protection of persons with mental disorders.

Standard – norm that settles the volume, the habitat and the quality.

Quality standards (of the service) – minimal levels of performance of the supplying process with service, compulsory at national level, through which are being realized specific objectives (results), for the benefit of the service user.

Special Requirements (special needs) – specific requirements of the person with handicap, determined by the existent disabilities, by their nature and seriousness.

Staff (of the medical unit of social protection) – a group of employed persons with wages in unit of social protection.

Procedure – is a series of activities, tasks, steps, and other processes, that when undertaken in the sequence laid down produces the described result, product or outcome. Following a

procedure should produce the materials, equipment and necessary documents for utilization, the control and registration of the activity.

The Group that contributed to the Report

- Vanu Jereghi – program coordinator, jurist, expert in human rights protection;
- Natalia Simagustina - jurist, expert in children rights protection.
- Mihai Melnic – psychiatrist, expert;
- Teodor Carnat – lawyer, expert in human rights protection;
- Marina Carnat – project assistant, jurist;
- Valeriu V. Sava – jurist.

The objectives and short summary

This report is a monitoring study of human rights respect of the persons with mental disorders and intellectual deficiencies in psycho-neurological boarding-houses, which formerly were subordinated to the former Ministry of Labor and Social Protection, presently this Ministry was merged with Ministry of Health Protection and is called Ministry of Health and Social Protection of the Republic of Moldova.

The collected information (after it was examined the boarding houses, the legality of hospitalization and the conditions of maintenance, the study of personal files of the patients, as well as conversations with the patients and medical personnel) introduced in this report reflects unanimous position of the Moldovan Helsinki Committee towards the Boarding-houses, the existent normative acts, used practice and hospitalization methods, maintenance conditions of the persons, including their treatment during the period of their stay in these institutions.

General Provisions

The location of the institutions

The psycho-neurological boarding-house from Cocieri village, Dubasari district, is located at 40 km from Chisinau city (the capital of the Republic of Moldova). This institution is activating from 1975 and was repaired capitally after the armed conflict in from Transnistria.

The psycho-neurological boarding-house from Balti village, (psycho-somatic) is located at 130 km from Chisinau city. This institution is activating from 1980 and there were not done any reparations from the year its opening.

The psycho-neurological boarding-house from Branzeni village, Edinet district, is located at 170 km from Chisinau city. This institution is activating from 1980. The building is situated in a park, that represents a historical value, of more than 100 years old. Until today, the building is supporting reconstructions.

The psycho-neurological boarding-house from Badiceni village, Soroca district, is located at 230 km from Chisinau city. This institution is activating from 1953 and was renewed in 1986. The building has a history of about 100 years and until today is supporting reconstructions.

All the institutions are located at the Northern part of the country, a thing that is negatively influencing on communication with the relatives of the patients, in case when the patients are from the Southern part of the country.

The activity of the institutions

The activity of these boarding-houses is settled by the following:

- The law of the Republic of Moldova on psychiatric assistance nr. 1402-XIII from 16.12.97, art. art. 36, 40, 41, 42, 43, 44, 45, 46;
- Type Regulations of social institutions in subordination of the Ministry of Health and Social Protection;
- The instruction nr. 06-34/188 from 16.03.03 on the usage of hospitalization of the patients in the social institutions under the jurisdiction of the Ministry of Health and Social Protection.

These institutions are only competent for hospitalization of the persons "with mental problems and chronic intellectual deficiencies without severe mental turmoil of the behavior", "are excluded schizophrenia, paranoid and catatonic form", „different mental turmoil of aggressive behavior”.

After were done the documentary visits in the up-mentioned boarding-house, according to the documentation and the decisions of doctors, there was ascertained that from total number of persons who are hospitalized (1582), of which 1448 persons are suffering from mental disorders and intellectual deficiencies, the rest suffering from somatic illnesses.

Nosologically the patients are categorized as follows:

- Mentally retarded – 728 persons;
- Schizophrenia – 463 persons;
- Psycho-somatic disorders – 163 persons;
- Epilepsy – 94 persons.

Of which:

- Women – 701 persons;
- Men – 747 persons.

Taking into consideration the international requirements, the medical staff needs 65 unities of work. At the moment the staff of the monitored institutions is the following:

- Chief-doctor – 1 unit;
- Psychiatrist – 1,5 units;
- personal superior physician– 5 units;
- therapist-physician – 2 units;
- Medical nurse - average 18,5 units.

The funds of the institutions for 2004 were fully accomplished according to the established terms, whereas the principal source is taken from the state budget, and partially - from the social insurances. There were not discovered any delay in paying salary to the staff.

Expenses of maintenance of the patients

According to the data of the financial documentation of the institutions that refers to the charged budget for 2004, the real expenses for maintenance of a patient was in average for 14,59 lei (about 1 EUR) per day. From this amount, the alimentation of a patient per day was for 12,38 lei (about 1 USD), whereas for the medicines, in average for 2,21 lei (about 0,14 cents EUR).

Hospitalization

More often, there are the relatives, of the mentally disabled persons, who ask the Department of Social Assistance of the Ministry of Health and Social Protection, to be hospitalized in the boarding-houses. The hospitalization bill is issued to the beneficiary by the psychiatric assistance that is given to him/her, whereas the file is sent to the Boarding-house by the Department of Social Assistance.

Legal grounds of hospitalization

The hospitalization in the institutions is done only with the Direction (agreement) from the Ministry of Health and Social Protection, to which are annexed the results of the examination realized by the specialized Psychiatric Commission. During the stay in the boarding-house there is not reviewed the functional diagnosis – reevaluation of the psycho-social abilities. There is taken as a ground for hospitalization “the reference from the Department of Social Assistance”, “the reference from the Psychiatric Hospital” or “the transfer from another boarding-house”. Another ground for this serves the decision of the Medical Commission, formed from 3 (three) persons, who are deciding if the person needs to be hospitalized or not in the boarding-house.

Procedural rights of hospitalization

Everyone has the right to liberty and security of person.

No one shall be deprived of his liberty save in the following cases and in accordance with a procedure prescribed by law:

(a) the lawful detention of a person after conviction by a competent court;

(e) the lawful detention of persons for the prevention of the spreading of infectious diseases, of persons of unsound mind, alcoholics or drug addicts, or vagrants¹.

At the day of hospitalization, the patient signs the application by which is being confirmed the awareness of the hospitalization.

From 1448 persons with mental problems and intellectual deficiencies, who are hospitalized in boarding-houses, there are 463 persons who suffer from chronic schizophrenia with frequent ingravescence, had been transferred from the Psychiatric Hospitals. The hospitalization of these persons in the psycho-neurological boarding-houses is not recommended, according to the RULES on the way of hospitalization of the mentally disabled persons in the social institutions that are subordinated to the Ministry of Health and Social Protection of the Republic of Moldova from 16.03.05 nr. 06-34/188.

The files of the patients are kept in the staff Section of the boarding-houses. From the examined files, in some cases, there were found formally signed requests (unconsciously) by the patients or their relatives on the regard of their hospitalization. In some cases the signature belongs to other persons (parents or others), even though in the files is absent the judicial decision on the discernment incapacity of the mentally disabled person.

The health state of the related persons, who are hospitalized for a long period of time, is reflected in stationary files.

The stationary medical files are kept in the medical assistance Section of the boarding-house. In the medical files are included the daily medical evidence, that reflects the examination in dynamics of the patients by the doctors. The periodicity of the examinations, according to the evidence, is realized once in 2-3 months.

The analysis done of 300 cases that were directed in the medical boarding-houses, confirms the following initiatives of hospitalization:

- District somatic clinics (56%);
- Psychiatric Institution from Balti city, the Republic of Moldova (22%);
- Medical unit of public psychiatric institution, Chisinau city, the Republic of Moldova (11,5%);

¹ Art. 5 ECHR

- Assigned from the boarding-house for children with mental health problems and intellectual deficiencies (7,25%);
- Were directly sent by the workers of the Ministry of Health and Social Protection (2,5%);
- The relatives brought directly the related person (1,3%).

The discussions with the patients that were unfolded and the analysis of the up-mentioned cases gave us the possibility to conclude that the reasons of hospitalization confirm the presence of the following features:

- Unaware and uninformed consent – „I don't know why they sent me here”, „they sent me for a few weeks” – 57,5%;
- Administrative reference – „they didn't tell me why they took me from home”, „they didn't tell me where am I going” - 30%;
- Aware and informed consent – „I know where I have come”, „I was explained on the living conditions in the boarding-house” – 7%;
- Social factors – „I didn't have what to eat”, „I didn't have where to live”, - 5,5%.

Verification of necessary hospitalization

All the persons are coming with the hinted documents from the workers of the Ministry of health and Social Protection; therefore the Institution is obliged to hospitalize them. In order to be reviewed the treatment, is enough for it only one doctor, and not a commission of doctors, who would decide this moment. The functional diagnosis of the hospitalized person is not being changed within the institution.

Still, in the boarding-houses are not being used the periodical examinations of the patients, in order to confirm the legal necessity of their maintenance in the institution.

Documentation at the moment of hospitalization

Everyone has the right to liberty and security of person. No one shall be subjected to arbitrary arrest or detention. No one shall be deprived of his liberty except on such grounds and in accordance with such procedure as are established by law².

The file of the patient includes the following documents:

- the identity card;
- the official reference from the Ministry of Health and Social Protection;
- the medical references;
- the conclusion of specialized psychiatric medical Commission.

The examination of the files of the patients indicates the fact that the conclusion of the specialized psychiatric medical Commission serves the unique “legal document” for hospitalization in the psycho-neurological boarding-houses.

Consent (personal, of legal representatives or relatives)

The disabled persons shall enjoy a special form of protection from the whole of society. The State shall ensure that normal conditions exist for medical treatment and rehabilitation, education, training, and social integration of disabled persons.

Except for those cases that are provided for under the law nobody may be submitted to forced medical treatment³.

² Art. 9 - the United Nations International Covenant on Civil and Political Rights

³ Art. 51 - the Constitution of the Republic of Moldova

In some examined files is absent the information on patient's consent referring to his stay in the institution and his consent to the treatment⁴, in other files this information exists, but the signature belongs to another person.

At the moment of hospitalization, the patient is not informed about his rights, but the freely expressed consent is more a formality that is not being respected. The patient is not being informed about his illness diagnosis or about his period of stay inside the Institution.

The present patients don't have a definitive judicial decision, by which would be taken the decision to be hospitalized without their free consent⁵.

The period of hospitalization

It was ascertained the fact that the period of stay of the person in the institution is not indicated in any place. The patients have the right to ask for a leaving, that lasts from 2 (two) weeks until one month. But this right is realized more with the consent of the manager (director) of the Institution.

Full legal capacity of the patients

*All citizens of the Republic of Moldova are equal before the law and the public authorities, without any discrimination as to race, nationality, ethnic origin, language, religion, sex, political choice, personal property, or social origin*⁶.

The majority of the patients don't have a judicial decision that would legally limit their full legal capacity.

In personal files and in the medical documentation of the patients there are absent the documents that would confirm the fact that these persons had been admitted as inapt or irresponsible. Therefore, it is impossible to be appreciated the legality of patients hospitalization and their stay in the institutions.

Right to recourse

*Everyone whose rights and freedoms as set forth in this Convention are violated shall have an effective remedy before a national authority notwithstanding that the violation has been committed by persons acting in an official capacity*⁷.

⁴ Art. 11 - the Law of the Republic of Moldova on psychiatric assistance

⁵ Case 1: Man, 56 years old

Has paranoid schizophrenia, aggressive. He was non-argumentatively transferred to the Psychiatric Hospital of Chisinau city. In his file was not found any document that would confirm his voluntary consent to be hospitalized. During the discussion that was carried out with him, resulted the fact that he accepted to be hospitalized in the institution at his wife's insistence, who explained him that the institution is just a sanatorium, where he will be helped to get recovered, just for a month. Still, there pasted more than one month and he wants to go home.

Case 2: Man,

From 2003 he is staying in the medical institution. He was transferred from the psycho-neurological boarding-house of Cocieri village. The reason was that a nurse was beating him. He complained to the director of the institution who transferred him. He complains that he is not mentally disabled, but just an invalid of second group.

Case 3: Woman, 82 years old

In her file is missing the request and her consent to hospitalization. The fact that the patient was hospitalized is non-argumentative, because her diagnostic is – senile Encephalopathy and chronic alcoholism.

Case 4: Man, 45 years old

Her diagnostic: paranoid schizophrenia. In his file is missing the request and his consent to hospitalization. The indicated treatment in the medical file denotes the necessity of being hospitalized in the psychiatric hospital, and not in the respective psycho-neurological boarding-house.

⁶ Art. 16 the Constitution of the Republic of Moldova

No patient from all the 4 (four) monitored institutions knows about the possibility to appeal the decision of the specialized psychiatric medical commission that refers on the hospitalization in the institution.

Maintenance and supervision (the stay in institution)

Assurance of medical assistance. Medical treatment

The right of health security is guaranteed⁸.

Each patient has a medical insurance police that is annexed to the file.

The monitored institutions were not submitted to accredit procedure that has as aim establishing their capacities to give to the population the respective medical assistance. At the same time the boarding-houses don't have clinic standards of performing medical services.

Dispense of psycho-pharmacological treatment. The comparison between the medicines

(1) The treatment of the persons with mental health problems is done with their written consent, except the cases indicated in al.(4).

(2) The physician should explain to the patient information about the diagnosis of the disease, examination and treatment plan in a way, which is understandable to him. The provided information is recorded in the medical documentation.

(3) If this person is a minor or due to the health reasons is unable to be aware of consequences of his actions, the right and responsibility is transferred to the patient's family, in case of no family, closest relatives or legal representatives (custodians or guardians) after what was explained to them the information provided in al.(2).

(4) the treatment can be done without the free consent of the related person or of her legal representative only in case of applying of some medical coercive measures, according to the Criminal Code provisions, and also in cases of hospitalization of without free consent according to art. 28. In these cases, except the cases of emergencies, the treatment is applied on the ground of a decision of psychiatrists commission.

(5) it is not allowed the treatment of the psychiatric illnesses of the specified persons by surgery methods and other nature, that have irreversible sequels, as well as applying new medicines, scientifically grounded, but not allowed yet in mass utilization⁹.

The psycho-pharmacological treatment is indicated adequately, joined with proves. Practically, 568 persons from the number of those hospitalized with delirium agitations are treated and need supervision and care as in the conditions of psychiatric hospital.

Thus, the illegal hospitalization of the patients with "Schizophrenia", with chronic delirium agitations in the boarding-houses, contrary to the national and international legislation, as well as to the Rules of the Ministry of Health and Social Protection is confirmed also by the fact that are daily prescribed of these patients of two dragees of Aminazine and two pills of Haloperidol.

94 patients that suffer from Epilepsy hospitalized in the medical boarding-houses, were symbolically treated, instead of 3-6 pills per day, there was administrated daily one pill of Difenine 0,001 mg. and Finlepsine 0,01 mg.

Referring to utilization of some modern ways of treatment, according to some standards or according to the principle of the medicine based on proves, psychiatric physicians said that usually they use tackles and methods that were formerly studied and which at their opinion is

⁷ Art. 13 ECHR

⁸ Art. 36 the Constitution of the RM

⁹ Art. 11 the Law of the RM on psychiatric assistance

manifesting through a specific efficacy. The institutions don't have standards and new schemes of treatment, whereas to the patients are not assured alternative treatments.

The medicines are kept in a separate room in the responsibility of the chemist, who has the respective evidence registers. The medicines of strict evidence are stocked and kept in a metal board.

Access to medical information and informing the patients about their rights

The patient has the right to receive an explanation from the physician about the diagnosis of the disease, examination and treatment plan and other treatment methods and prognosis in a way, which is understandable to him. The patient has the right to receive information about the treatment process from other medical persons at the level of their competence¹⁰.

From the discussions that were held with the administration of the medical institutions, with the medical staff and patients, there was concluded the fact that at the establishment of the diagnostic and at the administration of one or another medical eradicator, the physicians don't ask the consent of the patients, so the patient doesn't participate at taking decisions on treatment administration. By this, to the patient is being violated the right to "access to information" about the administrated treatment, about the benefices and its risks. The patient is not allowed to acknowledge his medical file, where is indicated the diagnostic and the treatment, that should be administrated. On some files is printed the sign of a stamp with the inscription that prohibits the free access of the patients to their files according to the Order nr. 123 from 20.03.1956 of the former U.R.S.S.

Sanitary conditions

a) *Caranteen*

In all the medical institutions there is provided the same system at the moment of hospitalization: when the patients are kept separately in a room for 14-21 days. When the persons are coming directly from the hospital, this moment is avoided, the reason of it being the fact that these persons had already passed the health state control in the hospital.

„Caranteen”, usually, represents a room where the windows are not strengthened with metallic railing. The bathrooms and toilets are isolated from the rooms with a wood door. The room is isolated from the hall also with a wood door, that is locked from outside with a key.

b) *Rooms and furniture*

Cocieri village: the monitoring group of the Helsinki Committee had established that there are only beds provided by the medical institution, all other necessary furniture is absent. Still the administration had affirmed that the patients who can make up some tables or other things, they are free to do it.

The administration doesn't have financial support in order to buy the needed furniture. Therefore, the patients don't have even ward-robos (for keeping personal things).

Balti city: the patients who suffer from psychiatric agitations are placed in 2nd building of the medical institution. This building had 4 floors. At the 4th floor are placed the women, at the 3rd – the men, at the 2nd – mixed section, and at the 1st floor are placed the persons who are immobilized.

In each room there are 2-3 beds, and the patients have a key from their rooms, so others can't steal anything. Generally, the rooms are clean, so as the patients for themselves are

¹⁰ Art. 27 the Law of the RM on psychiatric assistance

cleaning these. They do have wardrobes, carpets, different covertures that were all brought at the moment of hospitalization or late.

Branzeni village: the patients are assigned in the rooms according to their diagnostic. There are even rooms for a single person, also for two, three, four and five. In the room, all the furniture is brought by the relatives of the patients or even by the patients themselves. At the moment of visit, all the patients said that the bed clothes were changed only in the morning, especially for our monitoring visit.

All the rooms have the minimum necessary things – beds, according to the number of the hospitalized persons; a wardrobe; a bedside table; a table with several chairs; carpets on the floor bought by the administration of the medical institution. Unfortunately, this institution doesn't provide that the rooms would have bathroom with toilet. The windows are not strengthened with metallic railing, as met in other institutions.

Badiceni village: the rooms of this institution are considerably different from those of other medical boarding-houses, by the fact that in a single room are placed from 20 to 30 patients. Each room is divided in three parts.

In the first part stays the medical assistance who is supervising the patients 24 hours.

The second part is also call resting room (in some rooms were installed televisions), that has two long wood tables, chairs, according to the number of the patients, two arm-chairs (in the rooms for women), carpets on the floors.

The third part of the room is called bedroom, where the Committee's group had established the following: 25 metallic beds, a wardrobe, 5 bedside tables, carpets on the floor.

Some windows are strengthened by metallic railing.

c) Bathroom and toilet

Cocieri village: Administration said that hot water is always provided and that the patients can take a bath whenever they want; still the patients said that the days of bathing are Tuesday and Thursday. At the first floor there are two bathrooms and two toilets that were freshly repaired. Still in the bathrooms is cold because it is not heated, the ventilation is a hole in the wall. At some bathrooms was noticed the possibility to close the door from inside, at others this wasn't present.

Balti city: the bathroom and the toilet were in a good state. In 1998 until 2002 the medical boarding-house was financed by a Dutch Foundation, therefore all the common bathrooms and toilets were repaired in a European style.

The patients said that hot water is given on Thursday and Friday, and that a specific program to make bath doesn't exist. Still the administration said that hot water is given all day long, because there are installed boilers, so the patients take baths whenever they wish.

The bathrooms and toilets are divided in three rooms: in one are installed wash-hand basins, wash-leg basins, having taps with dose; in another room are installed washing-cabins that are isolated one from each other by a wall of a special material that cannot be scratched; in the third room are installed the closets, being isolated with the same material.

At the first floor, in the bathroom it was noticed that the ceiling was musty, due to the fact that there was not installed ventilation system; the walls that isolate the cabins are swollen; in the toilet was an unpleasant smell.

Branzeni village: the administration said that there is all the time hot water and that the patients are taking baths whenever they wish, but the patients said that the bathing days are Thursday and Friday.

One of the bathrooms of the institutions is used only in the winter, the hot water is guaranteed by the water heating installed in this bathroom. The second bathroom is opened in summer and has two rooms.

Therefore the patients are taking baths once a week, women and men separately.

Badiceni village: the administration said that in the institution there is hot water all the time, that there is installed water heating, that there were made several reparations and that each room has a sanitary group.

At the day of monitoring visit, there was noticed that not in all the rooms are done reparations; where this is done, the sanitary group is locked (is not allowed to be used).

The bathroom has two parts that are isolated by a wood door. The first room is for toilets, that has two closets. And the second room has a washing-cabin and two wash-hand basins. On the wall is installed a boiler with a capacity of 120 liters, which, administration said, works non-stop.

d) Airing and heating

There is not detected any system of ventilation. The bed clothes are changed in the day of bathing, still if some patients need, the bed clothes are changed more often.

In all the medical boarding-houses the heating is centralized and the system works on gas (except the boarding-house from Branzeni village, where the system works on coals. This room is isolated from the rest of the buildings of the institution and in the cold season consumes about 3-4 tones of coals. The loading and unloading from the cars, that bring the coals, are done also by some patients)¹¹.

Social conditions

*The State is obliged to take action aimed at ensuring that every person has a decent standard of living, whereby good health and welfare, based on available food, clothing, shelter, medical care, and social services are secured for that person and his/her family*¹².

*The Republic of Moldova as a State Party to the International Covenant on economic social and cultural rights recognizes the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions. The Republic of Moldova therefore will take appropriate steps to ensure the realization of this right, recognizing to this effect the essential importance of international co-operation based on free consent*¹³.

a) The clothes

The clothes and the footwear is brought, in average, once in two years, from humanitarian aids (second hand)¹⁴.

b) Canteen

The patients are eating three times a day, and according to the financial documentation of the medical institutions, for daily alimentation is being allocated the average sum of 12,38 lei (1 USD), a sum that is not constant. It is good to mention the fact that the diet patients are not provided with a specific menu (separate)¹⁵. As an example of menu can serve of each institution:

- Cocieri village: *Breakfast: salad, spaghetti, butter, bread, tea with sugar.*
Lunch: soup with beans, soup with potatoes and rice (for diet patient), minced soya beans roll, gruel of wheat, bread, cacao drink.
Dinner: boiled potatoes with skin, gruel of barley with margarine, bread, tea.

¹¹ The report on documentation visits in the medical boarding-house in Branzeni village, Edinet district.

¹² Art. 47 the Constitution of the RM

¹³ Art. 11 the International Covenant on economic, social and cultural rights

¹⁴ Point 2.3 lit. b) the Type Regulations of the Ministry of Health and Social Protection

¹⁵ Point 2.3 lit. c) the Type Regulations of the Ministry of Health and Social Protection

- Balti city: *Breakfast: gruel of buckwheat with milk, bread, butter, tea.*
Lunch: soup with beans and spaghetti on bones bullion, pilaf, bread.
Dinner: boiled spaghetti with souse, cow cheese, bread, kefir.
- Branzeni village: *Breakfast: gruel of buckwheat with milk, bread, 10 gr. of butter, honey, tea.*
Lunch: soup with beans and spaghetti on bones bullion, pilaf, pickle cabbage bread.
Dinner: boiled spaghetti with souse, 50 gr. of cow cheese, bread, kefir and sweets.
- Badiceni village: *Breakfast: smashed peas, vegetables salad, fruit drink, and corn mash.*
11 AM – milk.
Lunch: soup with vegetables, beans with souse, pickle tomatoes, fruit drink, bread.
4 PM – „pancakes”
Dinner: gruel of maize, milk, salad of vegetables, bread.

c) Visits room and access of relatives

The administration said that the patients have the right to receive visitors whenever they wish, and that there is no special schedule for it.

d) Other occupations and the right for rest

Everyone has the right to rest and leisure, including reasonable limitation of working hours and periodic holidays with pay¹⁶.

According to the type Regulations, the medical institution is obliged to organize and develop auxiliary house-holding in order to improve the services for the patients¹⁷. Therefore, the administration should organize the resting time of the patients according to their health state and age. Still, because of the lack of financial sources, the medical institutions cannot respect the type Regulations in order to follow these ideas.

Free access to justice

Every citizen has the right to obtain effective protection from competent courts of jurisdiction against actions infringing on his/her legitimate rights, freedoms, and interests. No law may restrict the access to justice¹⁸.

No patient knows about his rights of free access to justice, therefore no patient complained some actions to the law bodies.

Electoral rights

Except for the persons banned from voting by law, all the citizens of the Republic of Moldova having attained the age of 18 on or by the voting day inclusively have the right to vote¹⁹.

¹⁶ Art. 24 the Universal Declaration on Human Rights

¹⁷ Point 2.2 lit. c) the Type Regulations of the Ministry of Health and Social Protection

¹⁸ Art. 20 the Constitution of the RM

¹⁹ Art. 38 al. 2 the Constitution of the RM

All the citizens of the Republic of Moldova having attained the age of 18 on or by the voting day inclusively have the right to vote, except for the persons banned from voting by law²⁰.

In these institutions, no patient used his right to elect on the 6th of March 2005. the administration says that that these persons cannot vote, as they cannot intellectually exert this citizen right²¹. Talking with the patients, there was established that they wanted to vote, but they didn't have the possibility to do it, because they are not included in the electoral lists.

Right to education and profession

(1) The right to education is guaranteed regardless the nationality, sex, race, age, social origin and situation, political or religious affiliation, criminal record.

(2) The state guarantees equal opportunities of access to state institutions of secondary vocational and higher education, depending on abilities and skills²².

The medical boarding-houses don't have professional schools or vocational schools, where the patients would be able to learn some useful things or even to learn a profession, needed in daily life²³. There are no working-shops where the patients would learn the art²⁴. (Except the institution from Badiceni village where are working one seaming room; and on the territory of the institution from Branzeni village is activating a farm of cows and pigs).

Right to Conscience

(1) The freedom of conscience is guaranteed, and its manifestations should be in a spirit of tolerance and mutual respect.

(4) Religious cults are autonomous vis-à-vis the State and shall enjoy the latter's support, including that aimed at providing religious assistance in the army, in hospitals, prisons, homes for the elderly, and orphanages²⁵.

Everyone shall have the right to freedom of thought, conscience and religion. This right shall include freedom to have or to adopt a religion or belief of his choice, and freedom, either individually or in community with others and in public or private, to manifest his religion or belief in worship, observance, practice and teaching.²⁶

The hospitalized persons said that almost all of them are Christians and attend a village church, especially when comes Christmas and Easter. The administration freely allows the patients to go to this edifice.

So, in the medical boarding-houses were not identified any churches or other cult institutions, where the hospitalized persons would come and participate at different religious and cultural meetings (except the case of the institution from Balti city, where, inside it, is created an orthodox church, still it was not finished to be used).

Right to Privacy of Correspondence

²⁰ Art. 11 the Electoral Code of the RM

²¹ Art. 13 al. 1 lit. b) the Electoral Code of the RM

²² Art. 6 the Law of the RM on education

²³ Art. 13 the International Covenant on Economic, social and cultural rights

²⁴ Point 2.2 let. d) the Type Regulations of the Ministry of Health and Social Protection

²⁵ Art. 31 the Constitution of the RM

²⁶ Art. 18 the International Pact of civil and political rights

The State shall ensure the privacy of letters, telegrams, other postal dispatches, of telephone conversations, and of using legal means of communications²⁷.

The privacy of letters, telegrams, other postal dispatches are ensured by the Constitution, by the present law and by other normative acts. The involved persons in the postal activity are obliged to ensure the privacy of it. It is prohibited violation of the privacy to correspondence or letting up the content of it or of other postal references²⁸.

The patient benefits of the following rights that can be restricted at the recommendation of the physician who takes care of him, of the chief of the section or of the chief-physician, in the interest of the health or security of the patient or other persons: a) to receive the correspondence without censure²⁹.

The patients said that they don't have money for sending to someone letters, because they don't receive the pension. In cases when they receive letters from relative, they are sealed up. The administration said that the post man brings the correspondence personally to the patients. So, as it was concluded, the administration doesn't violate the right to secret correspondence³⁰.

Forced labor

(1) Forced labor is prohibited.

(2) Not to be regarded as forced labor are the following:

a) military-like duty or the activities designed to replace it, carried out by those who under the law are exempted from compulsory military service;

b) Work done by a convicted person under normal conditions, in custody or on conditional release;

c) Services such as required to deal with calamities or other dangers or as considered under the law to be a part of normal obligations of civilians³¹.

The administration of the institutions had assured the monitoring group that the patients are not forced to work; the patients are working from their own initiative³² (except the case of the institution from Cocieri village, where the patients said that if they refuse to work, they would be closed in the isolated room, where they are administrated with different drugs)³³.

Forced abortions

The State guarantees everybody the right to life, and to physical and mental integrity³⁴.

The Republic of Moldova as a State Party to the International Covenant on economic, social and cultural rights recognizes the right of everyone to the enjoyment of the highest attainable standard of physical and mental health³⁵.

²⁷ Art. 30 the Constitution of the RM

²⁸ Art. 6 the Law of Mail of the RM

²⁹ Art. 36 al. 3 the Law of the RM on psychiatric assistance

³⁰ Art. 38 the Law of the RM on psychiatric assistance

³¹ Art. 44 the Constitution of RM

³² Art. 4 the European Convention on Human Rights

³³ The report on documentation visits in the medical boarding-house in Cocieri village, Dubasari district.

³⁴ Art. 24 the Constitution of the RM

³⁵ Art. 12 the International Covenant on economic, social and cultural rights

Some institutions don't have in their staff gynecologists, therefore in case there are discovered cases of pregnancy they are resolved in the close public medical institutions (except the case of medical boarding-house in Balti city, where is working a special clinic inside the institution).

At the same time some institutions don't have and don't use contraceptives. The managers of the institutions said that the pregnancies are rare, and are interrupted by abortion. Taking into consideration the fact that in the medical documentation of these persons, where is absent their informed consent on pregnancy interruption, therefore it was concluded the fact that in all the cases there are used forced abortions³⁶.

Physic coercion of the patients

On the regard of medical sanctions, the administration of the institutions had assured that there is no "isolated room" for such actions (except the case of Cocieri village boarding-house, where the aggressive patients are calmed down by being isolated in a specific room where they get anabolic)³⁷.

Short leaving, argumentation and legality of the leaving

The short leaving is allowed when the patients are writing a request. This includes a period of time from 2 weeks until one month. The patients are going to their relatives or to other persons, who ask the administration to allow them to work for them in housekeeping.

Leaving the institution without the permission of the administration

In cases when the patients leave without permission from the institution, and don't come back within 24 hours, the relatives are obliged to bring them back. Still, from the beginning it is informed the police, which searches the patients during 24 hours.

Release

The administration of the institutions said that annually, about 7-10 patients are leaving the medical boarding-house; whether the relatives take them home or they go alone. The medical institutions don't know about the family situation of the patients and doesn't take any measures to reintegrate them in their families or in the communities or societies in a whole. Mostly, this fact is due to the lack of a Service of reintegration of the patients in the families, because there are no connections with the relatives.

In all these cases, there were not found some proves (signed documents) that would confirm the consent of the patient at the definitive and voluntary leaving from the institution.

If a relative bring the patient to be hospitalized in the medical institution, respectively only this person can release, by their consent.

Cases of Death

In case when a patient dies, there are informed urgently his relatives by phone or by a telegram; if the dead person doesn't have any relative, there is issued a death certificate from the Local Hall and the medical institution is the one who is paying all the funeral procedures.

³⁶ Case 6: In 2004, it was interrupted her pregnancy in district hospital Edinet, without her consent. The administration had motivated that the girl is not capable to take care of another person, even though in her file there is no judicial decision on her full legal capacity.

³⁷ The report on documentation visits in the medical boarding-house in Cocieri village, Dubasari district.

There were analyzed all 14 cases of death from the psycho-neurological boarding-house in Badiceni village, during 2004, of which are mentioned the most relevant:

Drucenco Svetlana, 35 years old.

The cause of the death: cardio-pulmonary insufficiency.

Constantinov Nicolai, 30 years old.

The cause of the death: cardio-pulmonary insufficiency.

Gaiducov Iurii, 25 years old.

The cause of the death: cardio-pulmonary insufficiency.

Orbu Petru, 28 years old.

The cause of the death: cardio-pulmonary insufficiency.

Calmatui Dumitru, 25 years old.

The cause of the death: cardio-pulmonary insufficiency.

Girnet Timofte, 45 years old.

The cause of the death: cardio-pulmonary insufficiency.

Gorbenco Andrei, 23 years old.

The cause of the death: cardio-pulmonary insufficiency.

The objective cause of the causes of death in the up-mentioned cases, in a most are provoked by the lack of a psycho-somatic section and the maintenance conditions, low temperature in the rooms, agglomeration – of 20-25 patients in one room³⁸.

Worries:

1. The conditions of maintenance of the persons with mental health problems and chronic intellectual deficiencies in the institutions should alert the state authorities, which should action in order to change all the negative situations described in this Report.
2. The Committee considers that the persons are detained illegally in these institutions, according to the national and international normative acts ratified by the Republic of Moldova, because there is no person who has given his freely expressed and aware consent in order to be hospitalized or being hospitalized on the ground of a definitive legal decision.
3. Even though according to the national legislation in force, the legal bodies are correctly working, still these actions are against the international legislation ratified by the Republic of Moldova.
4. The Committee considers that to these persons is being violated the right to vote, because they are not legally deprived from this right.
5. These persons don't have free access to their medical files, therefore it is violated the right to information.
6. Contrary to the national and international provisions, the Republic of Moldova is ignoring the creation of a national independent institution that would protect and promote the right of the people with mental health problems and intellectual deficiencies in the psychiatric institutions.

³⁸ The report on documentation visits in the medical boarding-house in Badiceni village, Soroca district.

7. All the cases of death, examined by the Committee's group, were submitted to necropsy and the majority of them don't have contradictions between the clinical diagnostic and morphological one. This moment is important to take into consideration, because most of the persons who died were of a young age, but the cause of the death was set as an illness of cardio-pulmonary insufficiency (very rarely met at youth).

The Committee is open for the competent national authorities in establishing the violations of human rights of the persons with mental health problems and intellectual deficiencies, and also for eliminating these violations, from the existent normative acts, as well as from the actual practice.