



**Convention against Torture  
and Other Cruel, Inhuman  
or Degrading Treatment  
or Punishment**

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**Committee against Torture  
Fifty-ninth session**

**Summary record of the 1467th meeting**

Held at the Palais Wilson, Geneva, on Thursday, 10 November 2016, at 3 p.m.

*Chair:* Mr. Modvig

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*The meeting was called to order at 3 p.m.*

**Consideration of reports submitted by States parties under article 19 of the Convention** *(continued)*

*Seventh periodic report of Finland (continued) (CAT/C/FIN/7, CAT/C/FIN/QPR/7)*

1. *At the invitation of the Chair, the delegation of Finland took places at the Committee table.*
2. **Ms. Oinonen** (Finland) said that the provisions of the Covenant were well integrated into Finnish legislation and policy. Pursuant to article 95 of the Constitution, in order to be legally applicable, provisions of international instruments that were of a legislative nature had to be adopted by Parliament in the form of an Act; non-legislative obligations could be integrated into the legal framework by means of a Decree issued by the President of the Republic. Both were then legally binding. Upon ratification of an international agreement the Government would proceed to the preparation of the necessary enacting legislation. It was natural that the courts would tend to refer to that legislation, which in fact was often more complete and detailed than the provisions of the international instrument. In general the courts tended to apply a human rights-friendly interpretation of the law.
3. The Supreme Administrative Court had made relatively few references to the Convention; it had invoked the Convention in 2012 in a case involving an asylum seeker, in 2013 in reference to interim measures in a case involving refusal of entry and in 2015 in a case regarding a request for extradition. The Court tended to invoke article 3 of the European Convention on Human Rights or article 4 of the Charter of Fundamental Rights of the European Union. The judgments of the European Court of Human Rights provided an alternative source of jurisprudence referenced by the Court. She added that Finland had never extradited to another State a person accused of torture.
4. With regard to training of public officials who came into contact with persons deprived of their liberty, she said that the police, emergency services, correctional services, customs service, armed forces and border and coast guard personnel received human rights training. She drew the Committee's attention to a study by the Human Rights Centre on human rights training referred to in paragraph 113 of the report, a copy of which would be provided to the Committee.
5. Upon ratification of the Optional Protocol to the Convention a working group had been set up to consider options for the creation of a national preventive mechanism. That group had decided unanimously that the office of the Parliamentary Ombudsman was best suited to act as that mechanism since it already conducted inspection visits to places of detention. The Office of the Parliamentary Ombudsman was independent. Parliament decided on the its funding; its budget was not subject to negotiation or modification by the Government, which therefore had no means of asserting its influence over the Ombudsman. The budget for 2017 did not provide for the hiring of further staff, but one additional staff member had been recruited in 2016. The Ombudsman decided how to allocate his budget and how to organize his work.
6. **Ms. Immonen** (Finland) said that Finland was committed to the principle of non-refoulement, which informed the asylum process from the initial contact and interview through the enforcement of decisions. Recent legislative changes had not changed that fact. The country guidelines were not the same as declaring countries safe for the purpose of non-examination of applications. The Finnish Immigration Service interviewed and processed every asylum seeker individually. Country-of-origin information was gathered from various sources taking into account the jurisprudence of the European Court of Human Rights. Asylum was never denied based solely on country of origin; a general

assessment of the applicant's circumstances and the situation in the country of origin was made in all cases, even those involving countries classified as safe.

7. Although Finland applied the Dublin II Regulation, an application could be considered in Finland even if Finland was not the responsible State, in cases involving compelling family or humanitarian grounds, in accordance with the jurisprudence of the European Court of Human Rights. In cases involving the return of a victim of human trafficking to a European Union country, an assessment was always made of whether the victim would receive adequate assistance in the country responsible for that person's application. Upon transfer of such a person the Finnish authorities informed the receiving State of the victim's special needs. A victim could be provided with assistance and support in Finland even in the context of the Dublin II Regulation. All applicants were interviewed by experts from the Finnish Immigration Service, who received two weeks' initial training in recognizing victims of torture and human trafficking as well as in-service training and online and in-person training provided by the European Asylum Support Office (EASO). They could also consult medical experts as needed.

8. The Immigration Service carefully monitored the asylum process and reported to the Ministry of the Interior. It regularly inspected immigration centres, based on EASO standards, which included the lawfulness of decisions and conformity with domestic case law and the case law of the European Court of Human Rights and the European Court of Justice. An applicant had the right to appeal to the Helsinki administrative court as well as the Supreme Administrative Court and could stay in Finland for the duration of the appeal. In the context of the accelerated Dublin II Regulation, pursuant to a legislative amendment adopted in July 2015, applicants had seven days to request an enforcement ban from the court, which likewise had to take a decision within seven days; no removal could take place before the decision on an enforcement ban was made. Between January 2015 and November 2016 there had been 12,764 negative decisions and 7,296 removals had taken place as a result.

9. Amendments had been made to the Aliens Act in May and July 2016 in relation to, respectively, humanitarian protection and family reunification. The Act also set out pre-conditions for the application of precautionary measures, which were: obligation to report, surrender of travel documents and payment of a security deposit. Such measures could only be applied if essential for authorizing entry or stay in Finland or preparing or ensuring removal. The individual must be notified of the measures, which must end when no longer essential. No statistics were available on the use of such alternative precautionary measures. The Government's new proposals on alternative precautionary measures were still before Parliament.

10. Minors over 15 could be detained only if other measures were not sufficient, but such cases were rare; no unaccompanied minors had been detained in 2016, as compared to 11 in 2015. Her Government had proposed alternative measures that would further reduce the number of minors detained. Article 6 of the Aliens Act required the authorities to act in the minor's best interests and the child had the right to be heard; a social worker was always consulted on such decisions. A minor asylum seeker could not be detained until removal became enforceable; in practice it occurred only when removal measures had been planned, and only if absolutely necessary.

11. A minor could only be detained for 72 hours initially, renewable for an additional 72 hours, and was never detained in a police facility or with adults, except in family detention centres or centres for vulnerable groups, for example minors, women or LGBTI persons, where the minor had a separate room, often on a separate floor from adult detainees. No educational opportunities were available because of the briefness of the period of detention before removal. In 2015 one minor with his family and one unaccompanied minor had been detained, each for one day, at the Metsälä detention centre. At the Joutseno detention centre

the average stay was 16.9 days for a minor with his family and 6.5 for unaccompanied minors. She said that those detentions had occurred before the entry into force of the new six-day maximum limit.

12. Detention of a family likewise occurred only when necessary for maintaining the family unit and only in special family detention facilities. In cases involving removal of a family, generally only the father was detained in the closed section of the centre and the rest of the family in the open section. Detention could be appealed to the district court every two weeks.

13. Individuals could be detained in police facilities only if the special centres were full or far away, but only for a maximum of four days. Efforts had been made to increase the capacity of detention centres to prevent such occurrences. No separate statistics were available for temporary detention in police facilities. Detainees could be detained separately or transferred to police facilities if considered necessary for their own safety or the safety of others or in exceptional situations during the investigation of their entry into the country or identity.

14. Detention decisions must be reviewed by the district court within four days; that was automatic and did not require any action on the part of the detainee. It was also possible to request a review by the district court every two weeks. Detention centre directors had a duty to inform detainees of the reason for their detention, the anticipated length of detention and their right to appeal. Legal aid was available to detainees.

15. Her Government was ready to build new detention centres for adult detainees if their number exceeded current capacity. Detainees had the right to appropriate conditions, which included health care, including a check-up upon arrival; a nurse was available every day, the nurse checked on detainees in solitary confinement every day and a doctor was available every two weeks in the Joutseno centre and every week in the Metsälä centre, as well as being on call. Nearly half of staff at Joutseno had social work training. Use of force was avoided and limited to specific restraint measures applied by specially trained staff.

16. Finland was committed to providing appropriate reception centres for all asylum seekers; many new centres had been opened. The functioning of and conditions in the centres were monitored and inspected by the Immigration Service as well as the Parliamentary Ombudsman and the Non-Discrimination Ombudsman, with regard to such aspects as the quality and delivery of services, functional framework and safety, with a view to standardizing the functioning of the centres and ensuring efficient operations.

17. In 2016, in cooperation with mental health experts, the Immigration Service had developed a 16-point model for recognizing and responding to mental health problems among asylum seekers. Training was provided to reception centre staff on identifying mental health problems, dealing with psychiatric emergencies and counselling asylum seekers about the services available to them. Additional funding was being sought to improve the initial health screening of new arrivals, which would also include mental health in order to ensure every individual received the care needed. A special unit had been created for persons requiring long-term mental health care. Every centre had a nurse on duty.

18. A public consultation process had been launched on the 2015 legislative amendment relating to the System of Assistance for Victims of Human Trafficking with a view to further improving that assistance and long-term care, including for those subject to removal under the Dublin regulations. A recovery period was granted to those legally in the country; a reflection period was available to persons illegally in the country, during which they were not subject to removal. The recovery period was granted by the System administrators and the reflection period by the police. Granting of a reflection period was not conditional on cooperation with the authorities; the police and border authorities were aware of that fact. It

was easy to obtain assistance initially, but the initial decision was followed by a more comprehensive review of whether the individual had indeed been a victim of human trafficking, based to a large extent on the information provided by the police. If the individual was found not to be a victim of human trafficking, care would continue to be provided for a reasonable time and the victim would then be referred to assistance programmes for other vulnerable groups. Victims could also be granted a residence permit in exceptional circumstances even if they had not cooperated with the authorities.

19. With regard to the removal of an individual who had entered Finland from a Schengen country for the purpose of selling sex, she said that the individual was still eligible for assistance; furthermore, the police were trained in how to identify victims of human trafficking. New instructions on dealing with possible female genital mutilation issues had been introduced and training in that regard had been provided to the asylum unit of the Immigration Service in 2016.

20. The Tornio registration centre for persons crossing the Swedish border had been established to ensure optimum conditions for the registration and transfer to reception centres of increased numbers of asylum seekers. More than 16,000 asylum seekers had been registered since the centre's establishment in September 2015.

21. **Mr. Martikainen** (Finland) said that the Helsinki administrative court and the Supreme Administrative Court were the competent bodies for appeals on issues of international protection. The appeal procedure had been amended effective 1 September 2016: the number of judges per hearing had been reduced; the appeal periods had been shortened; courts were required to give priority to asylum appeals; better information technology had been introduced; and the criteria for granting leave to appeal by the Supreme Administrative Court had been revised. In order to eliminate backlogs at the Helsinki administrative court the Ministry of Justice had drafted a legislative amendment to allow three other administrative courts to also hear appeals. Those amendments would make the system more efficient and reduce delays and were in line with relevant decisions of the European Court of Human Rights. The average length of proceedings at the Helsinki administrative court had dropped from 6.5 months in 2015 to 4.4 in 2016.

22. Amendments to legislation on legal aid had entered into force in September 2016 whereby only certain asylum seekers, such as unaccompanied minors, had the right to have a State-funded legal representative present during asylum interviews. However, all asylum seekers were still entitled to obtain legal aid during the rest of the application procedure. If a legal representative refused to accept a case, asylum seekers had the right to have an advocate appointed by the public legal aid offices. Only public legal aid advocates or licensed legal counsels subject to appropriate supervision were able to act as counsels in matters of international protection.

23. **Ms. Mohell** (Finland) said that there were 26 prisons in Finland, 15 of which were closed and 11 of which were open. Seventy per cent of prisoners were held in closed prisons while 30 per cent were in open prisons. As a result of additional funding allocated by the Government, all current prisons could be maintained and the activities available to prisoners could be enhanced.

24. **Mr. Martikainen** (Finland) said that, when necessary, handcuffs or plastic ties were used to restrain prisoners when they were being transported. In ordinary circumstances, decisions on whether to restrain prisoners were made on a case-by-case basis. However, when several prisoners were being transported over a short distance in the same vehicle, it sometimes proved necessary to restrain all of them. In order to address that situation, the Criminal Sanctions Agency had ordered special buses that would enable prisoners to be kept separate from each other without the need for handcuffs. The Ministry of Justice had

also prepared legislation that would enable all prisoners travelling in the same vehicle to be restrained in certain limited circumstances.

25. As of November 2016, there were 240 female prisoners in Finland. Under the Imprisonment Act, male and female prisoners were kept in separate units. The special needs of women prisoners were assessed during sentence planning and, in conjunction with non-governmental organizations (NGOs), special programmes had been established to address the needs of female Roma prisoners.

26. **Ms. Mohell** (Finland) said that the prohibition of the use of evidence obtained through torture did not extend to other forms of ill-treatment. The maximum penalty for torture under Finnish law was 12 years' imprisonment, which corresponded to the sentence typically handed down in cases of manslaughter. Under the statute of limitations, charges could be brought against persons accused of torture within 20 years of the date on which the offence had allegedly been committed. According to the Ministry of Justice, Finnish legislation in that area was in line with the principles set out in article 4 of the Convention. However, the concerns expressed by the Committee over the sentences handed down for torture would be communicated to the Ministry of Justice.

27. **Mr. Huhtamäki** (Finland) said that, in line with European Union Directive 2012/29/EU, legislation had been amended and a guidance note had been issued by the National Police Board on the use of video and audio recordings in court cases. Under the guidelines, special protection was accorded to certain victims, including those aged between 15 and 17. Any investigating officer who was unsure about whether to record an interview was obliged by law to seek the opinion of the prosecutor. Audio recording might also take place when a person's health would make it difficult to attend a hearing in court.

28. The Ministry of the Interior had issued guidelines on monitoring the lawfulness of actions carried out by the authorities in the administrative sector. Similar guidelines on monitoring the actions of the police were being drafted and would be implemented in early 2017.

29. The offence of excessive use of force by the police was broadly defined and could range from a verbal insult to the mortal use of a weapon. Although between 800 and 900 complaints of excessive use of force were recorded every year, fewer than half of the 100 or so criminal cases brought against the police concerned that particular offence. The Police University College had developed a nationwide system for monitoring the use of force by the police. The information gathered by the system, which indicated that force was applied in around 2 per cent of arrests, was used for training and other purposes. Although the use of force was always recorded in the database of the emergency response centre, the records in question did not contain any qualitative data on the causes and consequences of the action in question.

30. When a person was detained by the police, the family of the person concerned was notified immediately in all but the most exceptional cases, such as when the notification would disrupt an investigation into a crime suspected of being committed by a member of the detainee's family. Detainees, including foreign nationals, always had the right to access legal counsel from the moment when they were placed in custody, and investigating officers were obliged by law to inform detainees of that right during the pretrial investigation. To the extent possible, foreign nationals were informed of their rights in writing in a language that they understood.

31. According to the instructions issued by the National Police Board on the treatment of persons in custody, detainees must be given the opportunity to access medical services and receive treatment. Detainees were not prohibited from being examined by a physician of their choice, provided that the expenses were borne by the detainee and permission had been granted by the physician assigned by the police.

32. As the number of asylum seekers in Finland had grown rapidly in recent years, it had become necessary to establish new reception centres where support staff from the private sector would be needed to maintain security and ensure that the centres ran smoothly. Under legislation currently being discussed by parliament, private-sector employees who had received the necessary training would be able to fulfil that role. The Constitutional Committee had stated that the legislation, as proposed, did not pose a problem of constitutionality.

33. **Mr. Lahtinen** (Finland) said that, subsequent to the decision issued by the European Court of Human Rights in the *X v. Finland* case, the Mental Health Act had been revised. As of 1 August 2014, hospitals must allow patients subjected to involuntary treatment to obtain an assessment from an independent physician before a decision was made on whether to continue the treatment. Although assessments made by external physicians were not binding on the physicians responsible for making the decision, they must be taken into account.

34. Under the Act on the Rights and Status of Patients, patients must be given information on their state of health, the treatment being given to them and any possible alternative treatments and their effects. If a patient refused a particular treatment, he or she must be cared for, to the extent possible, in another medically acceptable way. If, owing to a psychiatric condition, a patient was unable to decide on the treatment, a member of the family, or a legal representative, must be involved in the decision-making process. Under the Mental Health Act, a patient could be subjected to involuntary treatment only when the absence of that treatment would seriously jeopardize the health and safety of the patient or other parties. Any treatment administered contrary to the patient's will must be identified as a restrictive measure in the relevant medical records and a separate list of such measures must be kept by care units for the use of the hospital's internal control activities and the supervisory authorities. Under the Mental Health Act, the Regional State Administrative Agency must supervise limitations on the right to self-determination in connection with involuntary treatment.

35. So-called chemical restriction, such as that administered in the form of injections in the *X v. Finland* case, was unlawful. Patients subjected to such treatment could complain to the chief physician of the treatment facility or file a formal complaint with the Regional State Administrative Agency or the National Supervisory Authority on Welfare and Health.

36. The National Institute for Health and Welfare was preparing a guidebook for psychiatric hospitals with the aim of reducing the use of coercive measures in psychiatric treatment. The National Supervisory Authority on Welfare and Health had published a booklet for patients on involuntary psychiatric treatment and patients' rights that was distributed to all hospitals providing such treatment. Preparations had also begun on a comprehensive reform of the Mental Health Act which would include an assessment of the need to draft provisions on restrictive measures.

37. Two rehabilitation centres for torture victims received funding from the Slot Machine Association, which provided funds to NGOs engaged in health and social welfare projects. Although the arrangement in question was uncommon, it should be seen in the context of the long tradition of collaboration between the Government and NGOs.

38. **Ms. Iles** (Finland) said that rehabilitative psychotherapy was available for migrants who had suffered torture. Although the costs of the treatment were partly reimbursed by the State, studies had shown that migrants were unable to avail themselves of the service in practice. The psychiatric clinic for migrants in Tampere and the rehabilitation centres for torture victims gave training on the identification and treatment of victims of torture to health-care professionals, public officials and others who worked directly with refugees. The Paloma project, which incorporated the Istanbul Protocol, also focused on training. It

was still in the early stages and it was therefore too early to comment on its impact. The 2014 guidelines on post-traumatic stress disorder also addressed the rehabilitation of torture victims in the light of the Istanbul Protocol.

39. In order to ratify the Convention on the Rights of Persons with Disabilities, which had come into force in June 2016, Finland had had to amend the law governing the care of persons with intellectual disabilities. In particular, the amendments had affected procedures for applying, reporting, supervising and following up on restrictive measures, as well as the responsibility and liability for any damages resulting therefrom. The authorities had organized training on the new legal provisions and new vocational qualifications were being planned for professionals who worked with persons with intellectual disabilities.

40. A working group on the legal recognition of the gender of transsexual persons had submitted its conclusions in 2015. It had proposed the removal of the requirement for such persons to be unmarried and infertile in order to have their gender recognized. The law had, in fact, been amended and, beginning in March 2017, transsexual persons who wished to have their gender legally recognized would no longer be required to be single. Transgender persons who had their gender legally recognized (there had been 105 in 2015 and 120 in 2016) still had to provide a statement of infertility. However, infertility — for example, as a result of hormone treatment — did not have to be irreversible for the purposes of legal gender recognition. The working group had also suggested examining the possibility that transsexual persons be allowed to submit an application for legal gender recognition without having to present a medical statement. Persons seeking treatment on gender identity were directed to one of two specialized hospitals. Around 75 per cent of them were diagnosed and referred for hormone treatment.

41. The National Action Plan to Reduce Violence against Women also catered for vulnerable categories such as women from ethnic minorities and women with disabilities. Guidance on identifying and dealing with violence against such women had been produced, and professionals working in shelters had received special training. Studies had shown that Roma women who suffered violence were often unable to rely on the support of friends and family members, and the helpline for victims of violence had therefore been expanded to include a special service for them.

42. A number of studies over recent years had shown a steady decline in violence experienced by children, particularly in the form of corporal punishment. The proportion of adults who approved of corporal punishment had also fallen sharply, from 34 per cent in 2004 to 15 per cent in 2014. Nonetheless, studies indicated that violence against children was still more widely tolerated than violence against adults. Children were currently at the core of a key government project to reform the public sector and improve services to families. Under a 2014 amendment to the Child Welfare Act, officials who believed that the life or well-being of a child was being threatened had a duty to inform the police. Alko, the national alcohol retail monopoly run by the Ministry of Social Affairs and Health, organized regular media campaigns to raise awareness of the harm caused to children by alcohol abuse among adults.

43. In implementation of the United Nations Standard Minimum Rules for the Treatment of Prisoners, steps had been taken to make the health care of persons in detention an integral part of the national health-care system. Prisoners had the right to receive the same preventive and curative care as the rest of the population. Responsibility for their care had been transferred to the Prisoners' Health Care Unit of the Ministry of Social Affairs and Health. Currently, they could be treated in 25 out-patient clinics. There was also a prison hospital in Hämeenlinna and psychiatric prison hospitals in Turku and Vantaa. In order to facilitate the identification of victims of torture, the Prisoners' Health Care Unit had translated the arrival interview questionnaire into more than 50 languages.



44. Administrative courts could, if the parties so requested, decide to conduct an oral hearing in proceedings relating to the care of mental health patients. Between 2015 and 2016, oral hearings had been held in more than 65 per cent of cases where they had been requested. In practice, the only grounds for denying a request were that an oral hearing had already been conducted for the same patient within the previous 12 months.

45. **Ms. Oinonen** (Finland) said she wished to draw the Committee's attention to the fact that, although the Government had arranged for the Istanbul Protocol to be translated into Finnish, it had faced complex copyright issues when it had tried to publish and distribute the text.

46. **Ms. Racu** (Country Rapporteur) said that the Committee was pleased at the excellent progress the State party had made; the draft decision to transfer responsibility for remand prisoners to the Ministry of Justice was particularly welcome. However, the Committee still had some remaining points of concern, including the use of restraint beds and electroshock devices. Certain means of restraint were inherently humiliating and degrading, and it was to be hoped that the assessment currently being conducted by the authorities would lead to their definitive abandonment. The delegation should also provide more detailed statistics on administrative complaints against the police concerning the use of restraining devices.

47. She would appreciate more information about conditions in the police detention facilities in Espoo, Imatra, Kuopio, Lahti and Vantaa, where the highest number of problems in medical care to prisoners had been encountered. She would also welcome further details about detention facilities currently under construction. When would they be completed and how many persons would they accommodate?

48. While applauding the initiative to develop guidance on the treatment of minors in detention, the Committee was concerned that minors were still sometimes detained alongside adults and it wished to know what steps the authorities intended to take to put a definitive end to that practice. While certain excellent initiatives had been introduced to protect women from violence, insufficient funding meant that some measures — in particular, those concerning legal aid, shelters and social support services — could not actually be implemented.

49. Regrettably, recent amendments to the Aliens Act had introduced restrictions on free legal aid for asylum seekers and lifted provisions safeguarding the principle of non-refoulement. The State party should develop mechanisms to enable the Committee and other treaty bodies to obtain reliable and disaggregated statistics on persons detained under the Act. The Committee appreciated the efforts made to train professionals who came into contact with asylum seekers and migrants, but it would like to know what guarantees were in place to ensure that victims of torture were identified early and received appropriate medical care. She had received no reply to her earlier question about whether the Non-Discrimination Ombudsman was able to monitor the enforcement of deportation orders.

50. **Ms. Pradhan-Malla** (Country Rapporteur) said that she wished to hear more about the steps taken to evaluate the effectiveness of training programmes and about the independence of the agencies responsible for that evaluation. She was concerned by the fact that, although evidence obtained through torture was clearly inadmissible, courts seemed to have discretion about whether or not to admit evidence obtained through other unlawful means.

51. The fact that the statute of limitations seemed to depend not on the gravity of the offence but on the potential sentence it might carry meant that there was a risk of impunity for perpetrators of torture. She asked the delegation to elaborate on alternatives to detention and how they were in the best interests of children. Since the Government was apparently pursuing a proposal to criminalize travel with the intention of committing a terrorist offence,

she would like to know how it intended to establish “intention” and how it would ensure respect for due process.

52. She was concerned that the one-year plan of action for the implementation of the Istanbul Protocol might not be long enough. What steps had been taken to inform people about the services available under the pilot project for victims of sexual violence being run by the National Institute for Health and Welfare?

53. In future reports, the State party should provide statistics disaggregated by gender on immigration, persons in detention and administrative structures. She wished to know how rehabilitation programmes were structured, whether they included medical services and whether they were also available to migrants.

54. She understood that the mandate of the national preventive mechanism had been entrusted to the Office of the Parliamentary Ombudsman but was unsure how the two roles were kept separate. Did the national preventive mechanism have its own budget?

55. The Committee would appreciate information about plans to review treatment practices relating to intersex children and to put an end to harmful and unnecessary normalization surgery. A number of issues raised by members had not been addressed. They concerned the measures taken to prevent suicide among persons in detention, the outcome of the *X v. Finland* case and the designation of certain countries as “safe” for the purpose of processing asylum applications.

56. **Ms. Belmir** said the State party’s argument that delays in the notification of a person’s placement in police custody were due to the short duration of custody and potential adverse effects on investigations did not stand, particularly since the practice was widespread, especially with regard to undocumented persons. She also pointed out that police holding cells had a specific purpose and that continuously shuttling individuals back and forth between detention centres and police stations was contrary to criminal procedure and international law. Noting that the most common situation in which children under 15 were placed in detention was during the execution of expulsion orders, she observed that such proceedings were difficult enough for children without having to be deprived of their liberty as well. She cautioned the State party against detaining foreign nationals pending investigation on the mere suspicion that they had committed an offence.

57. **Mr. Hani** remarked that, given the context in which acts of torture were often committed, applying the statute of limitations to torture was illogical if the State party was serious about exercising universal jurisdiction over such acts. Welcoming the purchase of new prisoner transport vehicles, he asked how long a prisoner might be handcuffed during transport. He also enquired whether it was feasible to add the category of “foreign national” to police custody logs in time for the next periodic report. He urged the State party to continue contributing to the United Nations Voluntary Fund for Victims of Torture. Regarding the national action plan on asylum, he asked how many asylum seekers whose applications had been rejected were in the fast-track procedure and had thus been denied the right of appeal, and what the action plan’s legal status was. He was concerned by the fact that the State party had signed readmission agreements with countries that were unstable and that it was considering making international aid contingent on the signing of a readmission agreement.

58. **The Chair** asked whether the State party might consider involving intersex counsellors in independent counselling services for intersex persons. Regarding changes to the prison health service, he asked what the doctor-patient ratio was compared with the public health-care system, whether the service would remain a single entity under the National Institute for Health and Welfare, whether the medical units were within prisons or required inmates to be transported and how medical attention was provided outside prison doctors’ regular hours.

*The meeting was suspended at 5.25 p.m. and resumed at 5.35 p.m.*

59. **Ms. Oinonen** (Finland), acknowledging that human rights training was currently rather fragmented, said that the Human Rights Centre had conducted an extensive study of the issue, based on which several recommendations had been made, and that the Government had selected human rights education as one of the four themes of the national action plan on fundamental and human rights. The Office of the Parliamentary Ombudsman, in its capacity as the national preventive mechanism, was independent and had autonomy over its activities and budget.

60. **Mr. Huhtamäki** (Finland) said that the mandate of the Non-Discrimination Ombudsman included overseeing deportation proceedings and that the authorities were required to provide all relevant facts pertaining to a given case. Since late 2014, the Ombudsman had been represented on dozens of flights and had found that operations went smoothly and that all persons involved were cooperative. The Ombudsman could make recommendations directly to the police but also in the office's annual report. The goal for the coming years was to give the person concerned more notice of the deportation date. The use of both bed restraints and electroshock devices was under analysis with a view to adopting alternative methods of control.

61. **Ms. Iles** (Finland) said that only the facilities in Vantaa and Kuopio were part of the prison health service. Additional human resources would be assigned to Vantaa, while a reorganization was planned for Kuopio to enhance services. There were currently 23 physicians working for the prison health service, which amounted to a ratio of 130 inmates per doctor. The service would remain a separate entity under the National Institute for Health and Welfare, and the 25 units were located within prisons. When inmates needed medical attention outside of the prison doctor's hours, they were taken to public health-care centres. The new coordination mechanism for the 12-month plan on violence against women would begin its work in 2017, including the development of a longer-term plan on the implementation of the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence. The mechanism would be funded through the budget of the Ministry of Social Affairs and Health. The Committee's recommendations regarding intersex children and the identification of torture victims would be conveyed to the appropriate authorities.

62. **Mr. Lahtinen** (Finland) said that torture victims' access to treatment and rehabilitation centres was not limited; the services available were comprehensive and provided by multidisciplinary teams of professionals.

63. **Ms. Immonen** (Finland) said that the proposal on alternatives to the detention of child migrants remained before Parliament. That being said, detention was rare and should always be a last resort: only 11 unaccompanied minors had been detained in 2015 and none in 2016. As a rule, minors were detained for only a couple of days immediately before removal from the country and only where absolutely necessary. All staff of the Immigration Service who reviewed applications and interviewed asylum seekers were trained in recognizing vulnerable persons, including victims of torture. In 2016, foreigners had been detained for an average of 13 days at the Metsälä facility and 27 days at the Joutseno facility. Under the Aliens Act, foreigners should be released as soon as detention was no longer necessary.

64. No decisions on asylum claims were made solely on the basis of country of origin, and the principle of non-refoulement was a prime consideration in the negotiation of readmission agreements. Referring the Committee to paragraphs 79 and 80 of the report, she said that, while appeals against decisions taken under the accelerated procedure did not have a suspensive effect, the court could ban the person's removal. Between January 2015 and November 2016, over 8,000 applications had been approved, more than 12,700 had

been denied, some 1,175 had been considered manifestly unfounded and over 3,300 had yet to be examined.

65. **Ms. Mohell** (Finland) said that legislation on the transfer of remand prisoners to and from police stations would come into effect in 2017. The goal was to end the detention of remand prisoners in police holding cells as quickly as possible. The Committee's concern regarding the application of the statute of limitations to acts of torture would be conveyed to the Ministry of Justice.

66. **Mr. Martikainen** (Finland) said that it was difficult to keep minors separate from adult detainees because of their small number. Moreover, it was feared that segregating them could harm ties with their family and even result in their complete isolation. Therefore, there were no plans to change current practice. Inmates were not handcuffed for more than a couple of hours during transport and usually for less than one hour.

67. **Ms. Oinonen** (Finland) said she hoped that the delegation's answers had demonstrated the country's firm commitment to human rights and the absolute ban on torture. Thanking the Committee for its questions and explanations, she said that the dialogue would help Finland assess its implementation of the Convention and that civil society organizations would be invited to engage with the Government in giving effect to the recommendations contained in the concluding observations.

68. **The Chair** said that the dialogue had highlighted a number of best practices, which would be shared with other States parties.

*The meeting rose at 5.55 p.m.*