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Assessment of Living Conditions in Prison Centers in Oromia National Regional State, Ethiopia

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Abstract:

The objective of this study was to assess the living conditions of prisoners in Oromia National Regional State prisons. The scope of this assessment was limited to accommodation, food, water, education and vocational training, sanitation and health. To achieve this predetermined objectives, the research employed both qualitative and quantitative research approaches. To describe the state of affairs as it prevails in the prison, the study used descriptive type of research. The study clustered 20 administrative zones into four clusters and a total of 7 zones with their respective zonal prisons randomly selected using lottery method, except for Oromia Special Zone Around Finfine, which has no Zonal level prison. Further, 7 woreda level prisons selected from sampled zones using lottery method, which mean one woreda from each zone. The only prison TVET in the region was purposely included in the sample.

The research used both primary and secondary data. Prison leaders, prison staff and prisoners were the major sources of primary data, whereas secondary data were collected from Oromia Prison Administration Commission reports, prison centers, published and online sources. Both open-ended and closed-ended questionnaire, interviews, FGD, observation and document analysis were used as data collection instruments. The study revealed that prison buildings were dilapidated and most of them were not built to serve prison purposes. Accommodations were poorly ventilated, poor natural light, lack of toilets in the dormitory, highly overcrowded, and no supply of beds and beddings. It was rare to find separation of prisoners based on age, sentence, health and type of offences. Food provided for detainees was insufficient and with poor quality. Most prisons had series problems of water and sanitation. Almost all prisons found to have problem of health professionals, very poor medication and no laboratory. Schools and TVET were found to be poorly furnished with education materials, lack of teachers, workshops and laboratories. Finally, based on the results of the study the following recommendations were made: bringing dilapidated and substandard prisons to the minimum standard, integration and responsiveness of justice institutions, periodically reviewing prison budgets and having different budget code for settling prison bills, strengthening, equipping and staffing prison clinics, schools and TVET.

Keywords: Prison centers, Accommodation, prison, overcrowding, rehabilitation

1. Introduction

1.1. Background of the Study

Prisons have existed in most societies for many centuries. Usually, they have been places where individuals were detained until they underwent some legal process (UN, 2005). The main purpose for establishing the prison centers in all parts of the world is to provide rehabilitation and correctional facility for those who have violated the rules and regulations of their society and enable them show attitudinal and behavioral changes, and become law-abiding, peaceful and productive citizens when integrated into the community. The effectiveness of rehabilitation and reformation processes is largely determined by the prison facilities, services and treatment of prisoners during their time of incarceration.

Prison management and prison treatment practices and rights of prisoners have their roots in different international and national laws and conventions. Accordingly, human rights instruments such as Universal Declaration of Human Rights, The Standard Minimum Rules for the Treatment of Prisoners, The Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment, or The Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment and The International Covenant on Economic, Social and Cultural Rights Convention provide a set of rules that help prison administrations and staff perform their duties through policies and practices that are lawful, humane and disciplined manner. According to FDRE Constitution in Article 9(4) all international agreements ratified by Ethiopia are an integral part of the law of the land.

In Ethiopia, for a prolonged period of time, the public perception of the country described prisons served only as places of confinement and harsh disciplining. The constitution of the Federal Democratic Republic of Ethiopia (FDRE) guarantees respect for

people's rights and freedom, and provides that federal and regional government organs at all levels and their respective officials have the responsibility and duty to respect and enforce said rights and freedoms. Further, the Oromia Regional State Revised Constitution Proclamation No. 46/2001, article 21 (1) and FDRE Constitution article 21 (1) provide that persons held in custody and imprisoned upon conviction and sentencing have the right to treatments respecting their human dignity. According to Regulation No.138/2007 on the Treatment of Federal Prisoners, the condition of premises in which prisoners live or work should have large windows which are enough to allow adequate light for reading and fresh air to circulate; as well as required to allow adequate artificial light for reading during the night without causing hazard to the eyesight. Further, proclamation no. 365/2003, A Proclamation to Provide for the Establishment of Federal Prisons Commission has also stipulated conditions under which prisoners should be treated. Therefore, the objective of prison administrations now set as to admit and ward detainees and provide them with reformatory and rehabilitative services in order to enable them show attitudinal and behavioral changes, and become law-abiding, peaceful and productive citizens

In general, Ethiopian laws provide prisoners with inviolable and inalienable right to life, except as a punishment for a serious criminal offence determined by law. They have also the right to get health services, education, vocational training and education. Therefore, prisons required to having education and training facilities such as such as schools, workshops, laboratories, books, adequate number and quality of teachers etc. equivalent to other public schools and TVETs. It is also necessary for any detention centers, to the extent possible, to have health service station, complete medical equipment, qualified professionals and medication. Facilitating conditions for the maintenance of personal and environmental hygiene, besides helping detainees to become citizens conscious of their health, also prevents the possibility of the outbreak of diseases given the congested and suffocated conditions in the detention centers.

Oromia Prison Administration Commission is one of the state organs which directly involve in administering detention centers and mandated to provide correction and rehabilitation services by creating conducive environments based on proclamation No. 162/2003. Currently, the region has 18 detention centers at zonal level and 17 similar centers at district (woreda) level which add up to make the number of detention centers in the region 36, including one technical and vocational training and education center.

According to International, National and Regional laws concerning treatment of detainees, Oromia Prison Administrations are expected to treat prisoners in humane ways so as to facilitate rehabilitation and reformation processes. In accordance with these laws, accommodations are also required to satisfy minimum standards and prisons have the duty of providing detainees not only with food, shelter, water, clothing but these things are also required to be sufficient and up to the standard.

The standards of services that should be provided, facilities required in the prison centers and how prisoners should be handled are all set in different international standards and rules, and national laws. However, majority of the world's prison systems do not function at the level of these International standards and rules, and National Laws in treating prisoners (ICRC, 2012). Accordingly, prison facilities and services such as accommodation, education and training, food, sanitation, water and health services are inadequate which present major challenges to providing humane conditions of imprisonment and safeguarding compliance with applicable national and international laws, standards and guidelines (ICRC, 2012).

Therefore, this research focused on assessing the level of existing facilities and provision of services in prisons in Oromia National Regional State.

1.2. Statement of the Problem

Prisoners are wholly dependent on the State to provide them with food, healthcare, water, and sanitation and unlike others in the population, have no ability to access these services and resources through their own means while they are held in state custody. This dependency means the State must ensure that they are provided with adequate food, water, sanitation and healthcare, which cannot fall below certain minimum levels (Amnesty International, 2012). Concerning accommodation, The United Nations Standard Minimum Rules for the Treatment of Prisoners stipulate in Rule 10, that "All accommodation provided for the use of prisoners and in particular all sleeping accommodations shall meet all requirements of health, due regard being paid to climatic conditions and particularly to cubic content of air, minimum floor space, lighting, heating and ventilation." Supplying adequate – in terms of both quantity and quality – amounts of water for drinking, for preparing meals, for maintaining personal hygiene, and also for sewage disposal is one of the basic services which must be provided without interruption in prisons (ICRC, 2005).

According to World Health Organization (2013), prison health services should be at least of equivalent professional, ethical and technical standards to those applying to public health services in the community. States have a special, sovereign duty of care for prisoners, and they are accountable for all avoidable health impairments to prisoners caused by inadequate health care measures or inadequate prison conditions with regard to hygiene, catering, space, heating, lighting, ventilation, physical activity and social contacts. (WHO, 2013). This implies that prisoners are people deprived of their right of movement; otherwise, they have the right to access all the services at least equivalent to the services that their county can offer to the public or community.

According to article 12.1 of the International Covenant on Economic, Social and Cultural Rights, "the right to health", as is defined as an inclusive right extending not only to timely and appropriate health care but also to the underlying determinants of health, such as access to safe and potable water and adequate sanitation, an adequate supply of safe food, nutrition and housing, healthy occupational and environmental conditions, and access to health-related education and information, including on sexual and reproductive health.

The United Nations' Standard Minimum Rules, Agreements and Conventions, being designed to apply in widely varying situations, are deliberately worded as general principles which must be translated into more detailed rules in national or regional legislation or prison regulations (EU parliament, 2017). Therefore, Minimum Standard Rules has carried to Ethiopian context by the Federal Prisons Commission Establishment Proclamation, 365/2003 which points out the mandate, structure and objective of prisons and explicitly provides that prisons have the mandate to ensure the rehabilitation and reformation of detained persons. More importantly, the minimum standards for treating detained persons is promulgated by Federal Detainees Treatment Regulation No. 138/2007 which

provides right for accommodation, personal hygiene, food, medical services, clothing and bedding, education and training, separation of accommodation, water, sanitation and work conditions. Therefore, prison administrations in Oromia National Regional State have expected to implement these laws.

Even though there are no universally applicable standards for prison services and facilities, some countries have adapted Minimum Standard Rules quantitatively based on the contexts of their country. For example; The European Committee for the Prevention of Torture (CPT) has developed the minimum standard for personal living space in prison establishments is: 6m² of living space (plus sanitary facility) for a single-occupancy cell, or 4m² per prisoner (plus fully-partitioned sanitary facility) in a multiple-occupancy cell; moreover, the walls of the cell must be at least 2m from each other, and the ceiling at least 2.5m from the floor (EU parliament, 2017). Ethiopia has no specific and quantifiable standards in prisons services and facilities such as education and training, health, water, food, sanitation and accommodation. There is also limited document that shows living conditions and infrastructures in prison administrations in the country as a whole and Oromia Regional State in particular. However, the demand to now the status of services and infrastructures in the prisons in the region has come from Oromia Prison Administration Commission. Because the living conditions in prison are an important prerequisite for achieving the objective of the penalty of imprisonment (Center for the Study of Democracy, 2015). According to this center, the lack of adequate living conditions may have a negative impact on the rehabilitation and social reintegration of offenders.

Therefore, this research aims at assessing the living conditions and adequacy of infrastructures in prison centers in Oromia National Regional State based on the Federal Detainees Treatment Regulation No. 138/2007, Article 110 of the Criminal Law of the FDRE, Federal Prisons Commission Establishment Proclamation No. 365/2003, Article 26 (1), as well as Article 9 of the United Nations Standard of Minimum Rules for the Treatment of Detainees.

1.3. Objectives of the Study

1.3.1. General Objective

The general objective of this study is to assess the living conditions of prisoners/ detainees in prison centers in Oromia National Regional State.

1.3.2. Specific Objectives

The specific objectives of the study include:

- To examine prison accommodation facilities in the region,
- To identify how detainees of different categories have been provided with accommodation services in the prisons,
- To assess accessibility of education and vocational training services in the prisons
- To assess the accessibility of health services in the prisons,
- To examine provision of sanitation and water services in the prisons,

1.4. Significance of the Study

The results of this research may provide the Regional as well as the Federal Governments with reliable information to determine the future of prison centers. It might have significance in the areas of government policy intervention with respect to the living conditions in prison centers. The study findings expected to serve as a reliable source of data for relevant institutions, researchers, students, and NGOs interested in the areas under consideration. Furthermore, it can initiate researchers in the area for further study.

1.5. Scope of the Study

The study is limited to prison centers in Oromia National Regional State. It has covered living conditions in prisons (accommodation, education, health, food, water and sanitation) and related infrastructures.

2. Review of Related Literatures

Prisons have existed in most societies for many centuries. They were legally established in Ethiopia by Proclamation 45/1942 (EHRC, 2012). Usually, they have been places where individuals were detained until they underwent some legal process (UN, 2005). The main purpose of imprisonment is rehabilitation and reformation of individuals deprived of their liberty because of the offences they have committed. The living conditions in prison are an important prerequisite for achieving the objective of the penalty of imprisonment (Center for the Study of Democracy (CSD), 2015). According to this center, the lack of adequate living conditions may have a negative impact on the rehabilitation and social reintegration of offenders. Therefore, prisons required to have accommodations, health services, education and vocational training services, food provision, sanitation and water supply at least to the minimum standard according to international conventions, standards and the laws of the land.

Accommodation is a basic need of a human being and prisoners are also entitled to a minimum space of accommodation during incarceration. The accommodation in which prisoners live must meet certain basic standards (Coyle, 2002). In addition, prison living conditions may be an abuse of human rights by themselves because of the shortage of space, air, light, fresh water and nutritious food (IPCS, 2004). With regard to accommodation, the Standard Minimum Rules for the Treatment of Prisoners under Article 9 indicates that accommodation could be in the form of cells or dormitories. According to this article, when prisons are using cells, two prisoners should not be held together, unless, for temporary overcrowding reasons, and for prisons which use dormitories, careful selection of inmates that suits to one another should be made. Standard Minimum Rules for Treatment of Prisoners Article 10, stipulates that all

accommodations provided for the use of prisoners, in particular, all sleeping accommodations should meet all requirements of health, due regard being paid to climatic conditions and particularly to cubic contents of air, minimum floor space, lighting, heating and ventilation. However, in developing countries, prison buildings are usually dilapidated and many of them are materially unsuited for the confinement of large numbers of individuals on a permanent basis (ICRC, 2005). Prison cells are also characterized by inadequate ventilation, high illumination of night light or total darkness, dilapidated roof, ceilings, mats, and floor, and inadequate toilet facilities (Amnesty International, 2012). According to Article 9 and Article 26 (1) of the United Nations' Standard Minimum Rules for the Treatment of Detainees, Article 110 of the Criminal Law of the FDRE, and Federal Prisons Commission Establishment Proclamation No. 365/2003, premises and compounds should not be dangerous to health; and they should have fresh and clear air and sufficient light. This implies that Ethiopia has also some standards for treatment of prisoners which seems in line with the international conventions and minimum standard rules.

Overcrowding of prisons have been a major issue in many nations worldwide where it can be regarded as the root cause of most human rights violation in prisons (Human Rights Council, 2015). Further Albrecht (2012) indicate that overcrowding of living accommodation is one of the biggest problems in many prisons. According to Center for the Study of Democracy (2015), overcrowding means that "the prison infrastructure can no longer be used according to its original design and that the prison administration has to adapt the facility to accommodate more people that it has originally been designated for." Prison overcrowding is also defined as a situation in which the numbers of persons confined in a prison are greater than the capacity of the prison to provide adequate services to satisfy the physical and psychological needs of the confined persons (Griffiths and Murdoch, 2009).

According to Griffiths and Murdoch (2009), the two major reasons for overcrowding of prison-lack of planning and commitment of adequate resources to construct prisons to adequately accommodate existing prison populations and increases in the numbers of persons being sent to prisons. In many countries, these plans are either non-existent or have fallen victim to budget constraints or higher priority issues (Griffiths and Murdoch, 2009). The world prison population rate has risen by about six per cent from 136 per 100,000 of the world population to the current rate of 144 (Penal Reform International (PRI), 2015). In addition, several African countries have experienced substantial growth of prison populations in recent years as well as deterioration of capacity problems coming with that (Albrecht, 2012). For example, Ethiopia's prison population increased from 55,000 in 2000 to 93,000 in 2011 (PRI, 2015). Where overcrowding exists, there will also be a real danger of illness and the spread of disease. In many prisons, for example, tuberculosis, sexually transmitted diseases and HIV/AIDS present an increasing threat to health. In some extreme cases, the failure to provide appropriate living environment can even qualify as inhuman and degrading treatment and thus constitute violation of international human rights law (CSD, 2015).

Griffiths and Murdoch (2009) recommend prison construction as a key component of any strategy to reduce prison overcrowding, which also provides prison systems with the capacity to house offenders in safe and humane conditions. However, there is broad agreement that increasing prisons' capacity is never, alone, a solution, as the prison population tends to rise together with its capacity; broader criminal and penitentiary reforms (not limited to temporary measures, such as amnesties, which have short-term effects only) are therefore also needed in order to reduce overcrowding ((EU parliament, 2017). In this context, it is important to be aware of the types of crimes committed by most sentenced prisoners, to understand which offences lead to such overcrowding (EU parliament, 2017).

According to Standard Minimum Rule 10 of the United Nation, for prisons in all places where prisoners are required to live or work, the windows should be large enough to enable the prisoners to read or work by natural light, and shall be so constructed that they can allow the entrance of fresh air whether or not there is artificial ventilation. In addition, artificial light shall be provided sufficient for the prisoners to read or work without injury to eyesight. This requires the medical officer to regularly inspect and advise the prison authorities concerning sanitation, heating, lighting and ventilation of the institution. Adequate temperature and heating are extremely important in ensuring acceptable living conditions. Proper ventilation also contributes to preventing disease and ensuring a healthy environment.

Further, the Federal Prison Administration Pro. No. 365/2003, Article 25 (1), female prisoners required to have prison premises entirely separated from male prisoners. In addition, Regulation No.138/2007, Article 5 (1), prescribes that separate premises shall be allocated for male and female prisoners and, the premises allocated for female prisoners required be guarding and supervising only by female wardens and officials; except for teachers and health officials for professional duties. The same Regulation, Article 5(2) states that prisoners on death roll should be separately accommodated from other prisoners. Further, Regulation No.138/2007, Article 5 (3), juvenile prisoners under 18, prisoners detained under judicial remand and prisoners with records of serious crimes, recidivists and indecent should be separately accommodated to the extent that circumstances allow. This implies that prisoners should be separately accommodated based on their age, sentence, offences and health condition.

Accommodating prisons separately on the basis of duration of sentence, age, sex and health status not only facilitates the correction and rehabilitation processes but also helps reduce the rate of human rights violations in detention centers. Separate accommodation of detainees is an essential pre-condition in stopping transfer of communicable diseases in prisons; avoiding unacceptable influence on healthy detainees by close personal contact with those with bad behavior, facilitating social renewal of detainees and proper upkeep and treatment of detainees. For instance, female detainees, children staying in detention centers with their mothers, juvenile delinquents under 18, detainees living with HIV/AIDS, detainees with mental cases, and detainees with disabilities in relation to shelter, food provision and other social services were among the activities needs due attention by the Prisons.

Article 11 of the International Covenant on Economic, Social and Cultural Rights ensures the right to adequate food as a component of the right of everyone to an adequate standard of living. Rule 20 article (1) of the Standard Minimum Rules for the Treatment of Prisoners states that every prisoner should be provided by the administration at the usual hours with food of nutritional value adequate

for health and strength, of wholesome quality and well prepared and served. Furthermore, Rule 26 of the Standard Minimum Rules article 1(a) requires the medical officer shall regularly inspect and advise the director upon the quantity, quality, preparation and service of food. Further, Article 27 of the Federal Prisons Establishment Proclamation No. 365/2003, Article 10 of the Federal Detainees Treatment Regulation No. 138/2007 as well as the regional detainees' treatment directives, proclaim that detention centers have the duty to provide detainees with sufficient and healthy food.

Governments have a duty of care to prisoners and must provide adequate health care in prisons equivalent to the standard provided in society (IPCS, 2004). This is because; improving prison health care is important in itself and usually necessary for prisons to meet basic human rights requirements. The Federal Prisons Establishment Proclamation No. 365/2003, Article 27 and the Federal Detainees Treatment Regulation No. 138/2007, Article 11, as well as regional regulations and directives on the treatment of detainees indicate that detainees have the right to free medical services. It is also indicated that any detention centers must, to the extent possible, have health service station, complete medical equipment, qualified professionals and medication. Facilitating conditions for the maintenance of personal and environmental hygiene, besides helping detainees to become citizens conscious of their health, also prevents the possibility of the outbreak of diseases given the congested and suffocated conditions in the detention centers. Prison administrations need to ensure that access to general medical care is available at any time and without delay in cases of urgency (Standard Minimum Rule 52).

As a minimum, the prison administration should provide in each prison: initial medical screening on admission to the prison; regular out-patient consultations; emergency treatment; suitably equipped premises for consultation with and the treatment of prisoners; an adequate supply of appropriate medicines dispensed by qualified pharmacists; facilities for physiotherapy and post-treatment rehabilitation; any special diets which may be identified as medically necessary.

The availability and accessibility of toilets, running water and bath is an indication of the level of hygiene within the prison (CSD,2015). Waste water and refuse disposal is often the most intractable sanitation problem in places of detention and attention must be paid to waste disposal systems to keep the detainees in good health (ICRC, 2005).The Standard Minimum Rules for Treatment of Prisoners article 13, considers prison sanitation stipulating that accommodations required to have adequate bathing and shower installations so that every prisoner may be enabled and required to have a bath or shower, at a temperature suitable to the climate, as frequently as necessary for general hygiene according to season and geographical region, but at least once a week in a temperate climate. The standard proclaims that Prisoners must be provided with water and toilet article to keep their person clean. Drinking water must be available at all times. The United Nations General Assembly **Resolution 64/292 (2010)**, explicitly recognized the human right to water and sanitation and acknowledged that clean drinking water and sanitation are essential to the realization of all human rights. Further, this Resolution calls upon states and international organizations to provide financial resources, help capacity-building and technology transfer to help countries, in particular developing countries, to provide safe, clean, accessible and affordable drinking water and sanitation for all. Accordingly, prisoners must also be provided with utensils to take care of their hair and beard to maintain their dignity. In the same manner, Federal Detainees Treatment Regulation No. 138/2007 article 9 stipulates that prisoners should be regularly provided with enough water and necessary materials for cleanliness and with toilet facilities.

Article 11 of the International Covenant on Economic, Social and Cultural Rights ensures the right to adequate food as a component of the right of everyone to an adequate standard of living. Further, Article 27 of the Federal Prisons Establishment Proclamation No 365/2003, Article 10 of the Federal Detainees Treatment Regulation No. 138/2007 proclaims that detention centers have the duty to provide detainees with sufficient and healthy food.

Apart from changing the attitude and behavior of detainees, education is a ladder of progress and development that can determine the future of the detainees and their country. With regard to the significant value of education for detainees, Article 6 (4) of the Federal Prisons Commission Establishing Proclamation No. 365/2003, and Articles 71(5) and 77 of the UN Standard Minimum Rules for Treatment of Detainees provide that detainees should have access to academic education, vocational training and social work services to facilitate their post release rehabilitation. Regulation No. 138/2007 Article 23 (1) stipulates that prisoners should be provided with the opportunity to attend academic and different vocational training classes. In the same article, it puts emphasis on illiterate people, women and juveniles to get priority and the education and training need to be delivered according to the curriculum approved by competent body and detainees completing education or training should get certified certificates. Universal Declaration of Human Rights, Article 26; everyone has the right to education and this education should be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms.

Therefore, this research focused on assessing the living conditions (accommodation, food, health, sanitation, water and education and training) in Oromia National Regional State Prison Administrations from the aforementioned theoretical and legal perspectives.

3. Research Methodology

This chapter deals with methods and procedures used by the researchers to accomplish the research objectives. It contains research design, sources of data, sampling methods, sample size, instruments used for data collection and techniques of data analysis.

3.1. Research Design

The study employed both qualitative and quantitative research approaches. The main objective of this study is describing the state of affairs as it prevails in prison centers at the time of study and therefore descriptive type of research design was used.

3.2. Sources of Data

The study used both Primary and Secondary data sources. Accordingly, primary data were collected from prison management, staff and detainees through structured interview, questionnaire, focus group discussion and checklist guided observation of existing facilities and infrastructures in the prisons. The secondary data were collected from institutional plans, minutes, reports official records, published documents, internet and literatures.

3.3. Sampling and Sampling Techniques

The sampling frame for this study was the prison administrations in Oromia National Regional State. Since it was difficult to cover all the 36 prison centers in the region, the Eighteen Zones in the region grouped into four clusters (East, west, South and Central), least the sampled Zones may be concentrated in the same geographical area. Accordingly, Guji Zone from the southern cluster, West Shewa and East Wollega Zones from the western cluster, West Hararge and East Shewa Zones from eastern cluster, and Special Zone and North Shewa Zone from the central cluster were selected using lottery method. From each zone, one zonal prison center included into the sample from randomly selected zones (except for Special Zone where there is no zonal prison), and one woreda prison center was randomly selected using lottery method from each Zone so that each woreda level prison centers in the zones were given equal chance. Further, the only technical and vocational education and training institution for prisons in the region was purposely included in the sample. In general, 6 zonal prison centers, 7 woreda prison centers and 1 technical and vocational training center were selected for this study. This made the sampled prison centers 14 from the total 36 prison centers in the region. Therefore, the sampled institutions make about 39% of the total prison centers in the region.

Further, from each prison, 5 leaders were purposely selected and two top leaders for interview and the other three to fill questionnaire. In addition, 12 prisoners were selected for focus group discussion and other 20 prisons were selected to fill questionnaire randomly. Moreover, 10 prison staff were selected to fill questionnaire and 8 of them involved on focus group discussion and they were randomly selected from different prison departments.

3.4. Instruments for Data Collection

In this study, the following data collection tools were used;

3.4.1. Questionnaire

Relevant Questionnaire that reflects the objectives of the study were prepared for all respondent categories (management, prison staff and detainees) participating in filling questionnaire. The questionnaire was composed of close- and open-ended questions. In close-ended questions Likert and nominal scales were used to enable respondents to express their perception easily and quickly. Open-ended questions intended to give chance to respondents to express their opinion and views that might not be addressed by close-ended questions.

3.4.2. Interviews

Sampled management members were interviewed using structured interview questions. This was intended to get in-depth information from the management of the institutions.

3.4.3. Focus Group Discussions (FGD)

Focus group discussions were used for generating qualitative information in the major themes of study. Two focus group discussions were conducted at each prison center- with prison staff and prisoners. This gave them an opportunity to discuss and express their views and feelings on major issues provided to them by the mediator.

3.4.4. Document Review

This instrument was used for gathering secondary data from documents, reports and other similar sources relevant to the objectives of the study.

3.4.5. Observation

The team assigned for data collection undertook observation using relevant checklist prepared in line with the study objectives.

3.4. Data Analysis

Quantitative data collected were reorganized under each themes of the research (accommodation, food, health, sanitation, water, education and vocational training) and analyzed. SPSS software **version 20** was employed to analyze quantitative data and relevant statistical measures of ratio, mean, and percentage were used and interpreted. The qualitative data obtained from focus group discussion, interview and observation were transcribed, organized around each themes of the research, triangulated against quantitative data and discussed and interpreted to arrive at final conclusion.

4. Data Analysis and Interpretation

The quantitative data obtained through questionnaires and extracted from secondary sources were organized, tabulated, and analyzed using different descriptive statistical tools including percentage and mean, and displayed using tables, charts and graphs. The

qualitative data gathered through interviews, observation and focus group discussions were also analyzed, interpreted and triangulated with quantitative data analysis result under each theme and category.

4.1. Respondents' Category, Age distribution and Sex Composition

As can be seen from **Table 1 below**, youths with the age range 18-30 made 64% of the sampled detainees followed by detainees with the age range 31-45 which also made 29% of the sample. This implies that youths at their productive age frequently involved in committing crimes and put in jail. Respondents with the age range 46-60 and above 60 made 6% and 1% of the sample. When we see from gender perspective, among the sampled detainees 91% are male while only 9% are female. This shows that women imprisonment is low and has very less involvement in committing crime as compared to males. The female staff and management member made 22% and 19% of the sample respectively. This implies that the management and staff of the prisons are also dominated by males which indicate that the proportion of female in prison administration is low as any other public institutions in the region.

Criteria		Detainees		Staff		Management	
		F	%	F	%	F	%
Age of Respondents	18-30	184	64	85	58	11	29
	31-45	82	29	50	34	22	58
	46-60	16	6	10	8	5	13
	61 and above	4	1	-	-	-	-
	Total	286	100	145	100	38	100
Sex of Respondents	Male	256	91	114	78	31	81
	Female	27	9	31	22	7	19

Table 1: Respondent categories characteristics

Overall, the study was planned to include 28 management members through interviews and 462 (prison staff, management and detainees) through questionnaire and 280 (detainees and prison staff) via focus group discussion which made the total sample size 770. However, the research addressed 799 people through questionnaire, interview and FGD which make the response rate 104%. This was because of ease of access of the prison population (prisons) without additional costs, which also expected to increase the reliability of the research findings as well.

According to **Table 2 below**, the sampled detainees have different education background. Hence, grade 9-10 made the largest proportion of the respondents (35%) followed by diploma holders (14%), and grade 5-8 (13.5%), grade 11-12 (13%), first degree holders (11%), grade 1-4 (10%), not write and read (2.5%) and second degree and above (0.7%). This indicates that respondents from different educational backgrounds were included in the sample, which in turn ensured inclusion of diverse ideas.

Measure	Educational Status of Respondents								Total
	Not Read and Write	1-4	5-8	9-10	11-12	Diploma	First degree	2 nd degree and above	
Frequency	7	29	38	97	36	39	32	2	280
%	2.5	10	13.5	35	13	14	11	0.7	100

Table 2: Educational status of sampled detainees

Occupationally, farmers made 30% of the sampled detainees followed by students which made 26%, whereas civil servants accounted 20% of the sample. Detained businessmen made 12%, others made 8.5% whereas unemployed people made 3.5 % of the sampled detainees. This indicates that people from different occupational background were included in the sample. This helped the researcher to see issues from different perspectives so as to improve the quality of information obtained and the reliability of research output.

Previous Occupation of sampled Detainees	Farmer	Business person	Students	Civil Servant	Un Employed	Others	Total
Frequency	83	35	74	55	10	24	281
%	30	12	26	20	3.5	8.5	100

Table 3: Previous Occupation of sampled Detainees

4.2. Types of Offences Committed

Table 4 shows, the type of offences committed by the sampled detainees and the frequency of their occurrence. Among the offences considered in the study, manslaughter was committed by 40% of the sampled prisoners for this study. Next to manslaughter, most of the detainees (18%) were imprisoned for the offences which were not specified in the list and entitled as 'others' (e.g. Tax evasion, VAT, Civil matters, etc.). Corruption and Rape made the third largest offence committed as indicated by 8.5% of sampled detainees followed by theft which constituted 8% of the sampled detainees.

Offences committed	Manslaughter	Theft	Violent Attack	Corruption Case	Rape	Abduction	Beating	Robbery	Threats and intimidation	Inflicting bodily harm	Destruction to property	Resources embezzlement	Others	Total
Frequency	114	22	5	24	24	4	11	11	1	7	7	4	52	284
%	40	8	2	8.5	8.5	1	4	4	0.3	2.4	2.4	1	18	100

Table 4: Type of offences committed by sampled detainees

When we look at these criminal offences from prison centers perspective, the largest rate of man slaughtering crime was observed in prisoners sampled from Fitchie and Kimbibit prison centers in which 15 prisoners in the sample found committing this offence in each center (**Table 5**). Ciro and Negelle Borena prisons followed with 13 and 11 people respectively. Nekemte, Ambo and Batu were in the third place with 10 detainees in the sample imprisoned due to manslaughter. The other evil offence, corruption was seen to be maximum offence in Burayu prisoners sampled for this purpose.

Offences committed	Detainee Center														Total
	Ciro	Habro	Adama	TVET	Negele	Adola	Batu	Nekemte	Arjo	Ambo	Ejere	Fichie	Kimbibit	Burayu	
Manslaughter	13	0	6	6	11	7	10	10	1	10	9	15	15	1	114
Theft	2	4	0	2	2	0	3	1	4	0	2	0	1	0	21
Violent Attack	0	1	0	0	0	1	2	1	0	0	0	0	0	0	5
Corruption	2	0	2	1	2	0	0	4	0	0	1	0	0	12	24
Rape	2	0	2	1	0	5	1	2	1	5	1	1	1	1	23
Abduction	0	0	0	1	0	0	0	0	1	0	1	1	0	0	4
Beating	0	5	0	1	0	0	0	1	0	2	0	1	1	0	11
Robbery	1	1	5	0	0	0	1	1	0	2	0	0	0	0	11
Threats & intimidation	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Body harm	1	2	1	0	0	1	0	0	1	0	1	0	0	0	7
Destruction to property	2	0	0	0	0	0	0	1	1	1	0	0	0	0	5
Embezzlement	0	0	0	0	1	1	0	0	0	1	0	1	0	0	4
Others	3	4	4	6	4	7	4	5	3	0	4	0	3	5	52

Table 5: Sampled prison centers and frequency of offences committed by the sampled detainees

4.3. Accommodations

Imprisoned individuals have different rights given by international declarations, conventions, standards and the laws promulgated by respective countries. There are certain basic physical requirements that must be met if the state is to comply with its obligation to respect the prisoner's human dignity and fulfill its duty of care. These include adequate provision of accommodation, hygienic conditions, clothing and bedding, food, drinking water, health and exercise.

Criteria used for Renting	Measures	Rating Scale			
		No/ very poor	Poor	Good	Very Good
Lighting in dormitories	Frequency	47	278	59	85
	%	10	59	13	18
Fresh air circulation	Frequency	68	272	39	90
	%	15	58	8	19
Floor space per detainee	Frequency	101	289	30	49
	%	22	62	6	10

Bed provision	Frequency	154*	237	43	35
	%	33	51	9	7
Mattresses	Frequency	352*	82	24	11
	%	75	18	5	2
Blanket /sleeping bags	Frequency	361*	74	22	12
	%	77	16	5	2
Laundry tab/ place for washing clothes	Frequency	56*	227	119	67
	%	12	49	25	14
Toilet facilities	Frequency	31	221	134	83
	%	7	47	29	17

Table 6: Conditions of rooms and related facilities
*no provision of such services and facilities

However, as indicated in **Table 6 above**, prison centers sampled for this research rated for their accommodations and related facilities by different respondents from detainees, staff and management members and the overall analysis result shows that the regional correction institutions have poor accommodation and related facilities. The analysis result shows that from the sampled population, 69% believe that they lived in rooms which were dark and allow very poor/ poor light and, 73% of the respondents opined that the rooms were with poor/very poor aeration. Further, 83% of the respondents opined that the rooms were highly crowded which has also compromised the right of prisoners for health and impeded rehabilitation process. The international standards make clear that prisoners should have enough space to live in, with access to enough air and natural and artificial light to keep prisoners healthy. Results from qualitative data also show that overcrowding, poor ventilation and lighting were the problems in most prison centers because of lack of new construction and because most of the prisons were not built to serve the purpose of prison. For example, West Hararge, Burrayyu, Negelle Borena, Adama and Nekemte prison centers are typical examples where detainees lack reasonable space and sleep in shift. Most of the rooms were with mud floors and dusty which also compromise the right for health exacerbated by absence of beds and bedding. Here is a paradox and where the problem lies, even to solve it in the future. It is obvious that the expansion of prison is not as important as other development projects. The analysis from the Commission documents show that the number of prison population has been increasing for the last three years at a rate of 14% and at the moment of data collection there were about 36,000 detainees in the region. This implies that besides establishing a system to create legal awareness within the public, post release follow-up and support, and a strong rehabilitation program in prison institutions to minimize the level of offences committed; it is also important to construct prisons. The information obtained from Oromia Prison Administration Commission officials shows that there has been no budget allocated for construction of new rooms/ blocks in prison administrations in the region. The budget has been allocated only for the purpose of maintenance which was very small to address the problems in the detention centers. According to the officials, most of the budget for maintenance obtained by changing detainees' food budget to maintenance when it becomes surplus.

However, the officials as well as the research team agreed on that there was no legal background that hampers the expansion and construction of new rooms/ blocks in the prison administrations so as to bring the centers to the required standards. The reason for refusal of budget allocation for construction was simply attributed to attitudes of the concerned rather than legal issues. Therefore, without meaningful decline in the number of offences committed, it is not sound and lawful to hesitating building and upgrading of prison institutions to bring prisons to international and national minimum standards. Majority of the respondents (75% and 77%) agreed that the prisons were not supplied them with mattresses, and blankets/sleeping bags respectively. Only 16% of the respondents rated the provision of bed service good, whereas the remaining 84% (33% no supply, 51% poor supply) opined no/poor supply. According to the observation of the researchers, except for women prisoners in some centers where charity organizations involved, almost all prison centers did not supply beds, mattresses and blankets/ sleeping bags. Most prisoners' beds were built of local eucalyptus in bunk forms (up to three levels in some detention centers) which sometimes collapsed and caused the loss of life (e.g. Ejere prison center were 11 died). According to the observation of the research team, most detainees have been using mattresses made of grass and plant remains which may attract some insects and parasites to the prisons which also challenge the health of the detainees. Furthermore, 53% and 61% of the total respondents agreed that there were poor toilet and facilities for washing clothes in their prison centers respectively. The problem of toilet is common for almost all prison centers even though different in its severity because of the involvement of some charity organization in some centers. The case in Negelle Borena Prison Center was very severing where the waste from the toilet pit over flowed and accumulated as a pool above the well which is the only source of water for Negelle town. The problems were exacerbated by lack of water truck and truck to remove liquid wastes. There was only one truck for waste removal for the 36 prison centers in the region, whereas no water truck and prisons have used detainees' labor to fetch water from different sources. Almost all detention centers have no laundry tubs and use cement built concrete for manual washing. Almost all prison centers lack toilet in dormitories that could be used during the night when nature demands thereby forcing the detainees to use buckets and plastic bags that could expose the inmates for health problems.

In general, rooms and buildings are old and some of them are not initially built to serve as detention centers. For example, Chiro, Negelle Borena, Adama, Nekemte, Burrayyu and Habro were not built to serve the purpose of prison. Some were private residential buildings with no or minimum expansion works. This situation together with the gradual increment of number of detainees have exacerbated and challenged the rights of prisoners to have better treatment according to International and Ethiopian laws.

4.4. Separation of Accommodations

International standards, conventions and Ethiopian laws required prison centers to separately housed detainees based on categories such as sex, age, sentence, health condition and criminal offences.

Criteria used for Renting	Measure	Responses	
		Yes	No
Premises allocated for female detainees separately	Frequency	417	52
	%	89	11
Female detainees are guarded and supervised only by female wardens	Frequency	401	67
	%	86	14
Infants living with their mothers are accommodated separately	Frequency	89	378
	%	19	81
Detainees on death roll are accommodated separately	Frequency	36	433
	%	8	92
Juvenile detainees under 18 years of age have separate accommodation	Frequency	79	388
	%	17	83
Remand in Custody detainees are accommodated separately	Frequency	51	418
	%	11	89
Detainees with serious criminal record and indecent behavior are accommodated separately	Frequency	48	419
	%	10	90
Mental case inmates and communicable disease carrying detainees are kept separately	Frequency	71	396
	%	15	85

Table 8: Accommodations and Categories of Detainees

According to **Table 8 above**, majority of the respondents (89%) agreed that female prisoners were accommodated separately, while the remaining 11% believe that they were within the same premises with male prisoners. Qualitative analysis results show that almost all detainees were in the same premises except demarcated by fences. According the observation of the research team, female prisoners were denied of free movement within the compound and limited to a small area allocated for them. Majority of the respondents (86%) opined that female prisoners were guarded and supervised by female wardens, while 14% of the respondent disagrees with this idea. As indicated by 81% of the respondents, infants living with their mothers were not accommodated separately and treated similarly with other female prisoners. Juvenile delinquents under the age of 18 had no separate accommodation as indicated by 83% of the respondents except in few detention centers in which they had separate dormitory only during the night, however, shared all the other facilities with the adults during the day time. Further, detainees on the death roll, detainees with serious criminal record, detainees with mental problem and remand in custody detainees have no separate accommodations which were agreed up on by 92%, 90%, 85% and 83% of the respondents, respectively. These issues likely make the reformation and rehabilitation of prisoners in order to duly contribute their part in crime prevention after their post release. Especially, accommodating juvenile, infants and children with other prisoners may have psychological impacts and may imitate the behaviors of some indecent and recidivist which is not important in their future life.

4.5. Access to Health Services

According to the laws of the land, it is a basic requirement that all prisoners should be given a medical examination as soon as they have been admitted to a prison or place of detention, and any necessary medical treatment should then be provided free of charge. This requires special concern for health professionals, laboratories, medicine and medical equipment to be available in the prison administrations so as to respond accordingly.

In this regard, the situation of the sampled prison centers indicates that the concern for health of prisoners and services in relation to health can safely be said poor. According to **Table 7 below**, from the total sampled population (detainees, management and staff), 37% agreed that there was no medication and 35% opined medication was very poor; while only 4% of the respondents rated medication in the prisons as it was good. Further, 37% of the respondents agreed that there were no qualified health professionals and the existing ones were also with very low qualification (33%). For example, there was one psychologist in Batu, two nurses in Negelle and one health expert in Adola prison centers. The interviews made with officials from Oromia Prison Administration Commission also confirmed that there were some prison centers with no health staff.

According to the respondent, the laboratory services were poor (20%) and not available at all (60%). For example, there is no laboratory in Negelle, Batu, Chiro, Adola, Habro, and Burrayu prison centers. In almost all prison centers in the region, thermometer, esthete scope and visual examination were used as the major tools to identify health problems. Because of this, the same medication has been prescribed for almost all patients in most of the prison centers covered by this study. This seems dangerous especially, if the disease is communicable and needs quick refer of the patient to higher health institutions such as public hospitals. Further, 69% of the respondents opined that health experts assigned at detention centers lack commitment to serve the prisoners. The likely reasons for these problems were boredom because of limited number of health experts and lack of incentives, medication, medical equipment and appropriate building to serve the purpose.

Criteria used for Renting	Measure	Rating Scale			
		No	Very Poor	Poor	Good
Health service station	Frequency	77	193	155	44
	%	16	42	33	9
Medication	Frequency	174	165	111	18
	%	37	35	24	4
Medical equipment	Frequency	173	184	95	16
	%	37	39	20	4
Laboratories	Frequency	316	94	45	13
	%	67	20	10	3
Qualified health professionals	Frequency	174	153	115	27
	%	37	33	24	6
Committed health professionals	Frequency	192	132	107	37
	%	41	28	23	8

Table 7: Health services and facilities in prison center

4.6. Food Provision in the Detention Centers

International conventions, standards and national laws ensure the right to adequate food as a component of the right of everyone to an adequate standard of living and proclaim that detention centers have the duty to provide detainees with sufficient and healthy food. These rights include the availability of food in a quantity and quality sufficient to satisfy the dietary needs of individuals, free from adverse substances, and acceptable within a given culture; and need to be accessed in ways that are sustainable.

Criteria used for Renting	Measure	Responses		
		Yes	No	I don't Know
Timely Provision of Food	Frequency	327	124	18
	%	70	26	4
Sufficient Provision of Food	Frequency	173	272	24
	%	37	58	5
Quality Food Provided	Frequency	170	272	27
	%	36	58	6
Provision of separate food items for detainee having health problems	Frequency	121	315	30
	%	26	67	7
Continuous supervision of hygiene in food preparation	Frequency	122	295	52
	%	26	63	11
Transparency in the procurement of food items	Frequency	176	173	116
	%	36	38	25
Food supply is as per the budget allocated for individuals	Frequency	202	172	95
	%	43	37	20

Table 9: Food Provision in the detention centers

In the **Table 9** above, prisons were evaluated by different respondent categories for food provision based on criteria such as timely provision, sufficiency and quality of food, and 70%, 37% and 36% of the respondents opined that food was provided timely, it was sufficient and with the required quality respectively. However, 26%, 58% and 58% of the respondents agreed that food provision was not timely, it was not sufficient and with poor quality respectively. This implies that the respondents (management, staff and detainees) agreed that the food served in their detention centers had quality problem and insufficient, even though mostly served timely. In addition, detainees with health problem were rarely given different meal (67%) and health experts hardly made frequent supervision on the preparation and sanitation of detainees' food (63%).

To understand the reason for the low quality and insufficiency of food, the respondents posed with questions of transparency in the procurement of food items and whether the food supply has been according to the budget allocated for individuals. Hence, 38% of the respondents felt that the processes in the procurement of food items were lacking transparency and 36% opined that procurement was transparent; whereas the remaining 25% of the respondents indicated that they had no idea about the food procurement processes. Further, 43% of the respondents agreed that the food was supplied according to the budget allocated for individuals, whereas 37% believed as it was not according to the budget. The remaining balance (20%) replied that they had no idea about this issue.

According to the discussions made with management, staff and detainees, food procurement was corruption prone area in prison centers. Moreover, detention centers covered some bills such as electricity, firewood, transport and water from individual detainees' budget because of lack another sources budget. Therefore, we can safely conclude that the low quality and food insufficiency was attributed to the lack of transparency in the procurement and lack of supplying food according to the budget allocated for each detainee. According to discussants, another problem for the deterioration in quality and quantity of detainees' food supply was related to outsourcing of food supply to SMEs. One of the major reasons for this was that those enterprises contracted food supply for prison

centers were profit makers and need to make profit from this limited budget allocated for detainees. Secondly, in addition to this limited budget, and profit making intent, the cost of food items gradually increasing while the budget is fixed. Thirdly, there has been no strong supervision and control on the food providers (MSEs) whether they stick to predetermined menu or not. And fourthly, the bidding process for outsourcing and how the enterprises established were not transparent

4.7. Education and Vocational Training

As indicated in **Table 12** below, respondents tried to evaluate the general situations and some facilities in relation to training and education. Even though, 59% of the respondents recognized the existence of school in the detention centers, 66% and 81% of these respondents opined that these schools lack adequate number of teachers and teaching materials respectively. Further, 68% and 79% of the respondents agreed that these schools had no libraries, and laboratories /workshops respectively. The support and supervision from the concerned Education Office or Education Bureau was rare, especially for some detention centers and intermittent for others. Therefore, 67% of the respondents indicated that there was no frequent supervision from their respective education offices whereas, 33% agreed that they have received frequent supervision and support by same. In addition, almost half of the respondents agreed that there is adult education program currently running in their prison center.

Criteria used for Renting	Measure	Responses	
		No	Yes
The Detainee center have a school	Frequency	193	276
	%	41	59
The schools have adequate number of Teachers	Frequency	308	161
	%	66	34
The Schools have adequate teaching materials	Frequency	378	91
	%	81	19
The schools have library	Frequency	321	148
	%	68	32
The schools have laboratory and workshop	Frequency	372	96
	%	79	21
Frequent supervision and support from education office	Frequency	314	155
	%	67	33
Detainees have access to adult education	Frequency	242	227
	%	52	48

Table 12: Prisoners access to education and education facilities in prisons

Concerning Technical and Vocational Education and Training, the region has one institution dedicated to about 36 detention centers in the region. This is likely inadequate relative to the number of prisoners as well as geographical area of the region. The only TVET that exists in the region is located at Adama and the facilities for this institution were judged by the management members, staff and detainees of this specific prison center as follows.

Criteria used for Renting	Measure	Responses	
		No	Yes
The training center has adequate trainers	Frequency	30	1
	%	97	3
The training center has adequate training materials	Frequency	11	20
	%	35	65
The training center has laboratory	Frequency	23	8
	%	74	26
Accreditation of the training center	Frequency	8	23
	%	26	74
Criteria for recruiting detainees for training (TVET program)	Frequency	318	151
	%	68	32

Table 13: Prisoners access to training and training facilities in Adama TVET

Besides well-developed curriculum, there are also other determinant factors for the quality of technical and vocational training. These may include adequate trainers, training materials, laboratories and workshops among others. As we can see from **Table 13** above, 97% of the respondents from Adama TVET indicated that the training center had shortage of teachers whereas, 74% of the respondents agreed that the laboratories are poor and not well equipped. However, 65% of those respondents agreed that the center had adequate training materials such as books and other equipment. This shows that in the absence of laboratories for practical exercises and well qualified teachers, the trainers may not be expected to gain the knowledge and skills required at this level. Focus group discussion and interview results indicate that the opportunity to get into TVET is highly limited as compared to the number of prisons and the demand

for training to have some sort of technical skill and knowledge from the part of prisoners. Accordingly, 68% of the respondents agreed that criteria for recruiting prisoners for TVET were not clear.

5. Summary of Major Findings, Conclusions and Recommendations

5.1. Summary of Major Findings

The following major findings are identified;

- There was a serious prison overcrowding problem which also compromised the basic rights of prisoners, and impacted the reformation and rehabilitation processes. The problem was harsher in male dormitories than female dormitories owing to the number of female prisoners and the involvement of charity organization in building female dormitories.
- Most of the prison buildings in the region were old, dilapidated and not constructed to serve the purpose of prison. Hence, they lacked enough windows for aeration and did not allow adequate natural light.
- Besides the law of the land guarantees prisoners to get bed and bedding, there were no such services in almost all prisons except for female prisoners in some prison centers (e.g. Nekemte, Arjo, Ambo, Ejere, Adama, Kinbibit (Sheno), Adola, and Batu) which were provided by charity organizations.
 - Almost all detention centers did not provide separate accommodation on the basis types of offences, sentences, age, and adjournment and health problems as required by law.
 - The study revealed that the health services provided in almost all detention centers were so poor and characterized by inadequate medication, equipment, absence of laboratory, and lack of health professionals both in number and quality.
 - Food provision was not adequate and with low quality. This was attributed to insufficient budget allocated for detainees and some parts of this small money used to cover bills such as electricity, water, transport and for purchase of firewood. In addition, processes of food procurements were rarely transparent and it was among corruption prone area in most detention centers.
 - There was a serious water scarcity in some of the prisons. Most detention centers (e.g. Negele, Adola, Ejere, Arjo, Nekemte, Chiro and Habro) suffered shortage of water both for drinking and hygiene purposes. In some prisons, water fetched from unclean and unprotected water sources such as river, well and spring using detainees' labors.
 - In almost all prison centers, there were no toilets that could be used during night time, thereby forcing detainees to use buckets and plastic bags when nature demands, a practice that could expose inmates to health hazards.
 - Most detention centers had poor waste disposal schemes, so that liquid waste leaking from the toilets spoiled the local environments and sometimes raised complaint from the local communities.
 - There was only one Training and vocational education center for 36 prison centers in the region. It also found to have shortage of teachers, and laboratories were poor and not well equipped.
 - Prison schools were characterized by lack of teachers, teaching materials, libraries and laboratory and workshop. Further, the supervision and support from respective education offices and Regional Bureau of Education were poor.

5.2. Conclusion

The study was conducted to assess living conditions in prison centers in Oromia National Regional State. It mainly concerned with accommodation, food, water, education and TVET, health and sanitation. Accordingly, the following conclusions were drawn from the research findings:

- Most of the prison centers were highly overcrowded. Prison accommodations were old, dilapidated and substandard. Some of the buildings were found to be private residential or business buildings and initially, they were not built to serve the current purpose. Most of the accommodations were with mud floors, with poor aeration, dark during daytime and no bed and bedding. Prisons in the dormitory used mats and mattresses made of plant remains and grass for sleeping which complained to harbor parasites and pests. Beds were built of eucalyptus in bunk forms which fail and caused loss of life in some prisons.
- Corrupt practices in the process of procurement of food items and incompetent food service contractors attributed to insufficient and poor quality food provision in prison centers. In addition, lack of separate budget codes for settling prisons bills also significantly contributed to problems of inadequacy and poor quality of prisoners' food provision.
- Prison centers were identified to have poor health facilities, health professionals, medication and equipment. Most prison centers had no health professionals, and those prison centers which had health professionals claimed that they were with low qualification. No detention center identified to have laboratory. Therefore, similar prescription of medicine, if any, made without identifying the type of diseases. This has a devastating effect on prisoners as well as the public if the disease is communicable type. In general, health services in prison centers were very poor. However, serious overcrowding, poor quality and insufficient food, poor aeration in the dormitory, lack of bed and bedding, mud floor, poor toilet facilities, shortage of water and very poor liquid waste disposal mechanisms are fertile grounds for diseases to occur in detention centers.
- Education and TVET have significant contribution in the process of reformation and rehabilitation of prisoners. The knowledge and skills gained also helps prisoners to lead better life after reintegration. However, Schools and TVET in prison centers were not managed, supervised and supported as in other schools and TVET in the region. They were characterized by poor facilities, lack of teachers, teaching materials, laboratories and workshops. Therefore, they are not expected to transfer skills and knowledge as equivalent as other government schools.

5.3. Recommendation

Based on the findings of the study, the following recommendations were made so as to ameliorate problems related to service provision and infrastructure in the prisons;

- The Regional Government and Oromia Prison Administration Commission required to bring those dilapidated and standard prison centers to the minimum standard required in order not to compromise the reformation and rehabilitation programs and human rights. This could be through construction of new prisons and/ or upgrading of the existing ones.
- Justice institutions (police, public prosecutors and courts) need to work in an integrated manner. They should improve their responsiveness to investigation of cases, bring the suspects before the court within the time frame enacted in the law and minimize procrastination to complete the cases.
- Prison centers have to provide food services by themselves or outsource it for capable businesses or private sectors with full responsibilities and with transparent bidding procedure rather than to government organized incapable and inexperienced SMEs. Further, it must also be supported by continuous monitoring to make the contractors to stick to the predetermined food provision standards (menu).
- The Regional Government and the Regional Prison Administration Commission need to periodically revise the budget allocated for individual detainees. Regional Prison Administration Commission also required developing different budget codes for settling bills such as electricity, water, firewood and other administrative costs from detainees' food budget.
- Prison health is public health, and it is advisable for the prison centers to have health institutions at least to the clinic level with the required medication, equipment, laboratory and health staff with a mix of professions.
- Access to Technical and Vocational Education is so limited to address the demands of prisoners across the region. Therefore, it is recommended that the region need to have more TVET and well equipped workshops. Further, more emphasis should be given for education access, teachers, laboratories, text books and class facilities to the level of other government schools in the region. Continuous supervision and support by respective education and TVET agency, bureau and office is very important.
- The Regional Government and the Regional Prison Administration Commission are advised to improve prison waste disposal mechanisms and accessibility of potable water in the prisons. Sanitation problem must be managed and it is advisable to have additional numbers of waste removal trucks that help remove liquid wastes at least to the level it can be responsive upon request from the prisons.

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