COVID-19
FEAR IN IRAN’S PRISONS

Iran Must Do More to Protect Prisoners

SUMMER 2020 UPDATE

Abdorrahman Boroumand Center for Human Rights in Iran
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Summary

Nearly half a year has passed since Iranian officials acknowledged the grave threat posed by the novel coronavirus to the country's prison population. In late February 2020, high-ranking officials in the prison and judicial systems announced new protocols to head off a health catastrophe in the country's chronically overcrowded and underfunded penal system, including furloughs for certain classes of prisoners, a reduction in intake of new prisoners, daily rounds of disinfection, hygiene training for prisoners and prison staff, distribution of hygienic supplies, and the formation of full-time task forces to monitor prisoners' health. In April of 2020, Abdorrahman Boroumand Center for Human Rights in Iran (ABC) released a report, COVID-19, Fear in Iran's Prisons, detailing the scope of a COVID-19 crisis that was spreading across multiple prisons despite administrative measures taken to prevent it -- including the release of thousands of prisoners -- as well as the unrest sparked in late March by heightening fears of the virus and the subsequent violent crackdown by security forces.

In its analysis of key risk factors such as overcrowding, which makes social distancing next to impossible, the report identified shortcomings and inconsistencies in the implementation of Judiciary directives. It pointed to persistent overcrowding in some prisons; an unjustifiable insufficiency of fundamental necessities, such as cost-free cleaning products and hot water to ensure prisoners' personal hygiene and to the glaring absence of systematic disinfection procedures in prison wards and common areas. In view of addressing these problems, the report also set forth recommendations that were in line with best practices formulated by international health and human rights authorities.

In conjunction with the Human Rights Activist News Agency (HRANA), ABC conducted a follow-up investigation into the evolution of these problems since April. The findings of this report indicate that the hygienic conditions in Iranian prisons, rather than improving, have significantly deteriorated. The research sheds light on Iranian officials’ failure to adequately decrowd prisons and implement prevention protocols, which led to a proliferation of COVID-19 cases in several prisons. Disinfections by prison officials have stopped across several investigated prisons, apparently due to a lack of budget. Some prisons were found to have reduced supplies of free food, basic hygiene products, and personal protective equipment to prisoners, and the steep price markups in prison shops render these items inaccessible to less-affluent prisoners, who can then not afford to ensure their own protection.

Quarantine procedures were shown in many cases to be self-defeating, due in part to a constant flow of newcomers and continued commingling in common areas such as bathrooms, hallways, and kitchens (ex: Zanjan, Greater Tehran). Initial efforts across several prisons to reduce the prison population in March and April seem to have been abandoned by May, coinciding with the return of prisoners who had initially been sent on furlough. Avoidable arrests and detentions for petty crimes and for crimes not recognized under international law, including for social media posts, religious activities and drug use, have countervailed releases and pardons that were issued in an attempt to keep inmate numbers low. These problems are compounded by a systematic and long-standing tradition of opaque governance and heavy-handed securitization. Consequently, Iran remains secretive about COVID-19 cases within prisons and the number of prisoners who were hospitalized or
died, generating anxiety among incarcerated people and preventing an actionable assessment of the problem.

The human cost of this neglect continues to mount: confirmed or suspected cases of the novel coronavirus -- some resulting in death -- are cropping up in increasing numbers across the country, including Mashhad Central Prison (where three halls, with a cumulative capacity of around 600 people, have been designated as holding spaces for both confirmed and suspected cases), Evin (where at least eight people in the political prisoners’ ward have recently tested positive), Orumieh (where medical staff went on strike to protest a lack of preventative measures after prison personnel, including one doctor, fell ill and eight prisoners were transferred to the hospital with high fever and seizures), Greater Tehran (where two men exhibiting severe symptoms were held in a prayer room of Building 5 when the overwhelmed prison clinic couldn’t accommodate them, and a ward of Building 5 was placed under quarantine after an outbreak caused by the introduction of sick newcomers into a previously health ward), and Shahr-e Rey women’s penitentiary (known also as Qarchak, where scores of prisoners who tested positive have languished without much medical care).

Iranian officials have sung the praises of their coronavirus response in prisons, which they tout as exemplary for the region, if not for the world, yet the credibility of their claims is undermined by their blatant under-reporting of cases, their denial of prison access to independent human rights observers, and the persecution of citizens who disseminate accurate information about the virus. Documents recently leaked to Amnesty International indicate that Iran’s Ministry of Health has repeatedly ignored urgent appeals from the Prisons Organization to remedy the widespread shortages of the protective equipment, disinfectant products, and medical supplies needed to fight the pandemic.

Sanctions have indeed proven crippling to the economy of the Islamic Republic of Iran, and its leaders are facing hard choices in terms of resource allocation. But this adversity cannot account for the continued shortages of certain vital products such as soap, which has been produced in Iran for close to a century. Ordinary citizens, Iranian officials, hospital staff, and sources with knowledge of medical supply chains have told ABC and HRANA that domestically produced masks and disinfectants, hard to come by at the beginning of the outbreak, are now available in adequate supply.

The dire state of Iran’s prisons is a long-standing systemic problem that stems from policy choices of Iran’s leaders. Responsibility for the failures highlighted in this report rests with the Judiciary, parliamentarians, and successive governments who have, for four decades, failed to reform a draconian criminal code -- as repeatedly recommended by experts and prison officials -- or resource the carceral system while continuing to overload it with hundreds of thousands more people each year. In normal times, prisoners are more vulnerable to disease than the general population; in a time of pandemic, when an increase in COVID-19 infections and deaths have been reported in several prisons, it is reckless to disregard prisoner’s rights to health and life, rights which Iran is obligated under international law. If Iranian prisons become hotspots for COVID-19, thousands of prisoners will get infected, constituting a real threat for the prison population and the communities outside prison walls.

Iran has ratified several UN Conventions, which bar it from arresting individuals for crimes not recognized under international law and obligate it to protect the health and life of individuals deprived of liberty. The International community must hold Iran accountable for violating prisoners’ human rights, the lack of administrative transparency, and denying access to independent human rights monitors. It is imperative to distinguish Iran’s systemic failures of resource allocation from current international tensions and the hardships they have placed on trade. Iran does have the resources it needs to improve prison conditions and save lives, but decision makers have simply chosen to allocate
precious resources to non-essential causes instead, such as the rebuilding of golden shrines in Iraq or the funding of religious studies for foreign students. Releasing prisoners who do not belong in jail is also a budget-neutral measure that, if implemented, would reduce the strain on prison resources while helping prisons’ staff who are themselves at risk and under tremendous pressure in the fight against the pandemic.

Iran must immediately allocate the resources prison officials have repeatedly asked for. It must allow implementation of the preventive measures recommended by the World Health Organization, as well as the Judiciary's own directives, including but not limited to:

- daily and thorough disinfection of prison facilities,
- ensuring that essential personal hygiene items such as soap and sanitizer are made available at no cost and in sufficient quantities to all prisoners,
- systematic testing and monitoring of prisoners,
- provision of proper medical care inside and outside prisons to prisoners who are infected
- allowing independent monitoring and health assessments by human rights groups and civil society.

It is imperative to note that the measures above will fail to curb the spread of the pandemic if they are not paired with a significant reduction in the number of incarcerated people to enable prisoners to respect sufficient social distance and avoid mass infections. The vital decision to release prisoners -- including prisoners of conscience and human rights defenders, individuals accused of petty crimes, and those guilty of crimes not recognized under international law-- is in the hands of Iranian leaders alone. They must not allow lifesaving measures to be hindered by administrative and political obstacles.

Methodology

Research into human rights conditions in Iran faces severe limitations. The Iranian authorities do not permit independent human rights monitors to access the country and prisons, and individuals who report on human rights abuses face arrest and prosecution, and increased punishment if they are already in prison. Many Iranians, including human rights activists and lawyers, have been imprisoned or are currently serving prison terms for reporting on human rights violations by various government bodies and the judiciary. Others have been forced into exile.

This report relies on official statements published in online news channels and judiciary websites as well as information reported by former prisoners and lawyers on social media and in reports published by various human rights organizations in Persian and English.

Abdorrahman Boroumand Center for Human Rights in Iran has also carried out interviews, granted on condition of anonymity, from June through August 2020, with at least 10 current, recently-released, or former prisoners, seven lawyers, and several individuals including a hospital director, a chemist, and ordinary citizens. Reports by HRANA cited below were based on interviews with at least 36 current or recently released prisoners and other informed sources inside prisons, six individuals close to prisoners, five lawyers, and staff from five hospitals. The information they provided on various prisons are for the most part included in this report, but considering the sensitivity of the information, names have been withheld in order to not compromise interviewees’ identity and safety.
Background

A second wave of COVID-19 has been raging in the Islamic Republic of Iran since June 2020, following relaxed restrictions on business and social activity in April and May. With a record mortality rate in the last three months and an infection count estimated at 25 million according to President Rouhani, new restrictions have been announced in Tehran and several other cities. Some six months after the Judiciary announced directives aimed at preventing the spread of COVID-19 in prisons, judicial officials commend themselves for the purported success of these directives without providing any data to support their alleged effectiveness. Research conducted by Abdorrahman Boroumand Center for Human Rights in Iran (ABC), supported by additional reports on prison conditions from other human rights organizations including Human Rights Activists News Agency (HRANA), suggests that there is little cause for celebration: the Judiciary’s directives have gone unheeded, as necessary material and financial resources have not been allocated to the prison system. As a result, incarcerated people -- including political prisoners and human rights defenders -- are falling ill by the hundreds.

In early spring of 2020, the Judiciary’s directives on COVID-19-related measures, including furloughs for certain classes of prisoners, a reduction in intake of newly incarcerated people, daily rounds of disinfection, hygiene training for incarcerated people and prison staff, distribution of hygienic supplies, and the formation of full-time task forces to monitor prisoners, were implemented partially and inconsistently at best. At that time, ABC published a report, “COVID-19 Fear in Iran’s Prisons: Iran Must Do More to Protect Prisoners,” to draw attention to the pressing dangers of prison overpopulation, lack of proper hygiene and medical care, and prison authorities’ inconsistent implementation of the judiciary’s directives on virus control and prevention. It also called upon Iranian authorities to observe best practice guidelines formulated by the World Health Organization and the Office of the United Nations High Commissioner for Human Rights, which include ensuring the availability of personal hygiene items, routine disinfections, the de-crowding of prisons to allow for social distancing, and allowing independent agencies to monitor for overall compliance.

ABC’s recent research confirms that its concerns expressed in its April report were well-founded, and that its recommendations remain valid, relevant, and urgent. In the face of the health crisis, Iranian officials have failed to ensure continued compliance with prevention directives, putting prisoners’ health and lives at risk. Based on recent interviews with incarcerated people and informed sources


- “Pro-active measures... to ensure that essential personal hygiene items such as soap and sanitizer... are made available at no cost throughout their continued use beyond initial distribution point;”
- “provision of adequate space between people, adequate air exchange, and routine disinfection of the environment;”
- “release of individuals [which prioritizes] children, persons with underlying health conditions, persons with low risk profiles and who have committed minor and petty offences, persons with imminent release dates and those detained for offences not recognized under international law;” and
- “[granting access] to human rights networks, National Human Rights Institutions and civil society organizations [to] detention centers [to] gather information, conduct health assessments, activate available monitoring on situations in places of detention and identify advocacy opportunities.”

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with access and/or insight into several prisons across the country, the directives have been largely abandoned, save for those requiring the quarantine of prisoners with suspect symptoms, confirmed infections, and those coming back from furlough. Prison officials have not received the resources necessary to fight COVID-19 and adequately protect prisoners. Now, in overcrowded prisons lacking medical care and consistent methods of protection, the virus is spreading.

With some scattered and irregular exceptions, prison authorities have stopped disinfecting facilities. Free nutrition and hygiene provisions have plateaued or been cut, leaving vulnerable the tens of thousands of prisoners who cannot afford the overpriced products available in prison stores. The effectiveness of designated quarantine areas is diminished by common areas like showers and recreation yards -- which are frequented by both quarantined and non-quarantined prisoners -- and by the fact that newly arrived prisoners are quarantined with those whose quarantine is about to end. In at least one prison (Orumieh), healthy incarcerated people were transferred to a quarantine ward as a punitive measure. In other prisons (Zanjan and Greater Tehran), prisoners known to have the virus ended up endangering and contaminating their fellow incarcerated people when they were dispersed among different wards. Even incarcerated people with the means to organize internally to disinfect their wards -- including some political prisoners, or those convicted of white-collar crimes -- are powerless to escape the systemic lack of protections and fall ill (Evin, Orumieh, and Greater Tehran).

The initial effort to reduce the prison population through early releases and furloughs, implemented in many prisons in March and April, seems to have been abandoned by late spring, when prisoners were called back from furlough. In several prisons, prisoners are taken to courts and sent back to their wards without quarantine (Sanandaj, Greater Tehran, and Shahr-e Rey among others). Arrests and detentions continue to take place on grounds that pose no threat to the general public, including non-violent crimes and crimes not recognized under international law, such as political offenses, converting to Christianity, being active within the Baha'i community, posting wedding photos on Instagram, or using drugs. This last charge accounts for 7,702 arrests over the past three months in Tehran province alone. Such arrests inevitably interfere with de-crowding efforts, and counteract thousands of early releases and pardons issued for that express purpose. These problems are compounded by a systematic and long-standing lack of transparency in Iran’s criminal justice system, which itself is characterized by heavy-handed security protocols: prison officials are secretive about COVID-19 cases, breeding uncertainty and fear among incarcerated people, while some suspected of having been infected are denied hospital transfers on the pretext of national security (Borazjan). At a time when the second wave of COVID-19 is raging outside prison walls, relaxation of even the bare-minimum precautions, prescribed more than five months ago, defies reason.

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5 On July 1st and 2nd, 2020, nine Christian converts were arrested in house raids in Tehran, Karaj, and Malayer (HRANA, [https://www.hranews.org/2020/hranews/a-25812/](https://www.hranews.org/2020/hranews/a-25812/)); In the spring of 2020, 77 Baha’is were arrested or tried and sentenced to prison in provinces across Iran (Baha’i World News Service, June 11, 2020, [https://news.bahai.org/story/1433/](https://news.bahai.org/story/1433/))

Iranian authorities provide spurious data, reporting a nationwide death toll three times less than indicated by detailed statistics leaked to the BBC Persian service. The Iranian Ministry of Health denies having underreported these numbers. At the same time, authorities have ordered the arrest of individuals publishing information or views that criticize the authorities’ handling of the pandemic, such as Ebrahim Shuriani, a civil society activist and the administrator of the Telegram channel *Voice of Baneh’s People*. From late March to the 10th of May, 320 such people accused of “spreading rumors” about the pandemic and causing “concerns and anxiety” were arrested, said Hossein Ashtari, head of FATA, Iran’s Cyber Police. Even lawyers are not immune from COVID-19 related arrests: Payam Derafshan was sentenced to two years in prison for “spreading lies with intent to disturb public opinion,” and “propaganda against the regime” after revealing his client's infection with COVID-19 and calling for her release. His client, 18-year-old Instagram celebrity Fatemeh Khishvand (Sahar Tabar), had been detained in Shahr-e Rey Penitentiary since October 2019 when she was infected in April. Authorities initially refused her request for medical leave and opted for quarantine, where her condition worsened to the point of needing hospitalization and a ventilator.

The secrecy surrounding the scope of COVID-19 infection and mortality both inside and outside prisons is far from reassuring, yet Iranian officials continue to advance bold claims of positive outcomes. In a late June address to foreign dignitaries, Prisons Organization head Mehdi Haj Mohammadi called the prevention, treatment, and control measures against COVID-19 in Iranian prisons “some of the best” in the region and world. Mohammadi spoke of a unique “COVID-19 screening, diagnosis, care and treatment plan” that had been rolled out in all of the country's prisons and medical universities, which involved testing for all new entrants, a three-stage holding protocol for patients (i.e. quarantine, isolation, and convalescence), and the provision of medical supplies. Meanwhile, prisoners' testimonies and official statements indicate an absence of initiative to test prisoners, scant medical attention, and limited budget to ensure proper hygiene in overcrowded prisons that fail to meet international standards of safety.

**Prison Conditions**

**Zanjan Prison (Zanjan Province)**

In Zanjan Prison, where anti-death penalty activist Narges Mohammadi has been held among the general prison population since December 24, 2019, authorities' reported failure to isolate an infected prisoner has exposed the entire women’s ward to coronavirus. In a letter sent from prison and

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7 Detailed lists provided anonymously to the Persian service of the BBC complemented by BBC’s investigation estimates the death toll to be close to 42,000 since the beginning of the outbreak. The initial rise of deaths is far steeper than Health Ministry figures and by mid-March it was five times the official figure. The overall trend of cases and deaths in the leaked data is similar to official reports, albeit different in size (BBC, August 3, 2020, [https://www.bbc.com/news/world-middle-east-53598965](https://www.bbc.com/news/world-middle-east-53598965); BBC, August 2, 2020, [https://www.bbc.com/persian/iran-53629265](https://www.bbc.com/persian/iran-53629265))
published on July 12, Mohammadi -- who suffers from severe pre-existing health conditions -- reported that she and 11 of her wardmates experienced suspected COVID-19 symptoms at the end of June 2020. According to her letter, this happened one month after approximately 30 new prisoners, some with suspected coronavirus symptoms and one with confirmed viral infection, were sent to her ward.\(^\text{14}\) The letter, she wrote, is “my legal complaint about the imposed hardship and lack of medical care in Zanjan Prison over the past six months.” In another note from prison, released on July 22 by a former political prisoner on Twitter, Narges Mohammadi writes:

> “July 5: There are twelve of us in the ward who have come down with the coronavirus. In the last few days since the disease was discovered, they separated us from the healthy people. There are absolutely no facilities or medical care here in the ward. We don’t even have hand sanitizer. They just give out ibuprofen. ... I can’t breathe. The pain is terrible... I’m exhausted. This is how it is for all of us... The guard has said they’ll bring in a doctor: so where are they?”

It was only after Mohammadi’s July 12 letter that authorities finally gave her access to a doctor. Based on her continued reports, however, the authorities who sent the doctor appeared to have been motivated more by concerns of optics than of prisoner rights and health:

> “July 11: I’ve written a public letter describing the situation in the ward. Today they gave a mask to each of us. Yesterday, finally, they gave us the hand sanitizer we’d been begging for and paid for with our own money: just three bottles of it. Our general condition is disastrous. All my strength has left me...

> July 13: Nausea. Vomiting. Fatigue. My sense of smell has gone away. I’m thinking that this disease is tougher even than the three surgeries I’ve had...

> July 14: Again, no doctor yesterday. Today they came and said the doctor’s here, you ought to go see him. I said I don’t have it in me physically. They said it was mandatory. I dragged myself to the doctor’s room... The doctor asked how I was doing. I told him I was totally out of energy... “Take a deep breath!” he said. I did: my breath caught in the middle of my chest, and I fell into a coughing fit. It’s taken over my lungs. The doctor wrote a prescription: an IV drip, a B complex, and a 10 cc injection of something I don’t recognize... I wish they’d let us eat properly for a few days and recover a little spirit. The food here is awful. The stuff we can buy from the prison is even worse.... And they don’t let you buy anything from outside.

> July 15: They came last night and gave me the injections... The doctor came again. They said, “it’s mandatory for Mohammadi to come in for a doctor’s visit.” I’m better than I was yesterday. The medications have had an effect. The doctor asked me how I was: I said fine. The prison guard said I’ve improved since last night when they gave me the IV drip. “Deep breath” said the doctor. I took one and started coughing...

> After a few hours, I went back into the ward. I watched the 20:30 News Program [which featured a video of Mohammadi’s second doctor’s visit] there... Right then I realized why they made me go

to the doctor, and that the [initial] footage wasn’t suitable for broadcast because I was in bad shape. They gave me the shots and drips so I could sit up for the film. Even then, they couldn’t broadcast it in its entirety. The cough wouldn’t let go of me. What their own prison guard had to say wasn’t fit for broadcast, either...

July 17: No word from the doctor since the 20:30 News broadcast. We’ve gotten by with the single masks they’ve given each of us. That fake, ugly video has really upset the incarcerated people. The day after the 20:30 News segment ran, they brought in two kilos of ground meat from the prison’s general manager and passed it out. They told us we had to eat it... We told them after that lie-filled video of yours we don’t want any meat from you; they said you “have to” eat it, and we felt just as degraded.

July 22: I’m better. I still can’t go for a walk in the garden. But I’m better.15

In her July 12 letter, Narges Mohammadi requested an inspection of Zanjan Prison by the Ministry of Health. The letter’s content was reported by Persian-language media outside the country on July 13 and widely disseminated on social media thereafter.16 On July 14, a journalist from Etemad Newspaper questioned Gholam Hossein Esma’ili, the Judiciary’s spokesman, about Narges Mohammadi’s complaint. Esma’ili was vague in his response to questions about the lack of hygiene in Zanjan, and on the judiciary’s plan to either transfer Mohammadi to Evin or send her on furlough to accommodate her pulmonary issues. He instead stressed that the health of all prisoners is a priority, and that the judiciary takes all necessary measures, in addition to general hygiene protocols, when a prisoner is suspected to have been infected: “...we have taken the same measures in Zanjan Prison,”17 he insisted. Starting July 16, Iranian media began disseminating the video clip of Mohammadi in brief moments where she was less symptomatic -- filmed covertly, without her consent -- in an attempt to undermine the accounts provided in her letters.18

Mohammadi’s leaked notes triggered a statement by several special rapporteurs from the United Nations who called for the release of Mohammadi and all other prisoners with pre-existing conditions.19 Three weeks after the publication of Mohammadi’s request, however, the Health Ministry had not communicated any impending plans to inspect the sanitary conditions of Zanjan.

Khorasan Razavi Province:

Mashhad Central Prison (Vakilabad)

At Mashhad Central Prison Complex (commonly known as Vakilabad Prison), where the infection rate is reportedly high, the quarantine ward comprises five separate halls that have each been designated for specific uses since the pandemic: Halls 2, 3, and 5 are reserved for incarcerated people infected with coronavirus or with suspect symptoms. Hall 4 is reserved for incarcerated people who have recovered from the infection; they return to their wards after convalescing here for only a few days. Based on available information, these four halls hold between 540 and 660 incarcerated people, many of whom are confirmed to have been infected.

Hall 1 is a two-story prefabricated building with eight rooms and 700 beds. This hall serves as quarantine for up to 1500 newcomers, some sleeping on the floor and sharing beds, who are held for 21 days before being introduced into the general population. Prisoners receive a towel, a toothbrush and toothpaste, one piece of soap, and a small quantity of washing powder upon arrival; during this period, they share living spaces with prisoners who, upon returning from the hospital, are confined in Hall 1 for two to three weeks before being sent back to their wards. New arrivals are thus held shoulder-to-shoulder with prisoners at all stages of quarantine, rendering ineffective the entire isolation process.

Meanwhile, prisoners continue to be transferred to court appointments, though in fewer numbers than before. While masks are distributed to prisoners for these appointments, social distancing is not observed.

The women’s section of Mashhad Central Prison has seven wards that in total hold approximately 700 prisoners. Ward 5, usually reserved for political prisoners, has been repurposed for those with suspected COVID-19 symptoms or confirmed infections. The ward measures approximately 35 square meters and has two restrooms, one of which is used for storage. Limited space has thus pushed Ward 5’s political prisoners to Ward 3, usually reserved for minors. It consists of one large common area furnished with fifteen three-tier bunk beds, two showers, and two restrooms. Prisoners have access to a library and a gym during work hours, which closed briefly after the outbreak of the virus but have since been reopened.

Prison officials have not provided disinfectants or gloves to prisoners since the outbreak of COVID-19. Twice a week, prisoners are provided a spray canister to disinfect the wards. Prisoners can buy masks, but they are made within the unhygienic conditions of the prison.

Before the pandemic, new prisoners were quarantined in a two-story building for a week before being sent to the general population. Since the pandemic, prisoners have been kept for two days on the first floor, which lacks minimum standards of hygiene, and for 12 days on the second floor. Political prisoners are not quarantined at all; and are instead transferred immediately to their wards when they are brought into the prison. Prisoners being transported between court hearings and their cells use only hand sanitizer before being released into the general population.

Tayabad Prison

In Tayabad Prison, the pandemic has been raging since early June. incarcerated people here are still being taken to court as usual and are not being tested. Fearful families reported in early August that seven prison guards had tested positive for coronavirus and kept it secret, endangering approximately 300 incarcerated people as well as the prison staff.

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Birjand Women's Prison (South Khorasan Province)

In June 2020, the quarantine ward of the women's section of Birjand Prison held about 120 prisoners, according to an IranWire report. The overcrowded ward had two usable toilets, near which are located sinks which prisoners use to wash utensils and baby diapers, as well as four showers. The prison provided liquid soap but no disinfecting products, masks, or gloves. Prison administrators and the National Headquarters for Fighting Coronavirus eventually responded to appeals from the prisoners' relatives on June 8 by providing three more toilets and distributing masks and gloves among the incarcerated people. If they want to communicate with or ask support from anyone on the outside, prisoners in quarantine must wait hours for a turn to use the ward's only phone.

Four Baha'i prisoners -- Saghar Mohammadi, Sheida Abedi, Simin Mohammadi, and Maryam Mokhtari -- were released on furlough at the beginning of the pandemic in March, and are suspected to have been infected since being summoned back on May 26. As of mid-June, they were still quarantined and had yet to be allowed visitation. According to a source that spoke with IranWire: “Upon arrival [in the quarantine ward], they found out that a number of women prisoners were suffering from fevers and chills, sore throats and aches. The problem was reported to prison officials, who ignored it. In the first week, Sheida Abedi suffered from these same complications and her illness worsened to such an extent that, last Friday (June 12), she suddenly fainted from the severity of it. Three other Baha'i women developed fevers, chills and sore throats over the following week.”

With prisoner after prisoner falling ostensibly ill, a doctor came to the ward on June 14 to examine 80 patients, concluding that they had all come down with a simple cold. They were given acetaminophen pills and cough syrup. When Sheida Abedi and another prisoner were tested for coronavirus, they were told that their results came back negative.24

Tehran Province

Greater Tehran Prison (Fashafuyeh)

At the end of June, information from the Greater Tehran Prison25 laid bare the extent of the virus's spread in some wards. In Building 1, 52 prisoners were reportedly infected, and one prisoner was seen throwing up blood in Building 5, Room 4.26 According to information obtained by ABC, the number of incarcerated people in Building 1, which has poor aeration and air-conditioning, had increased to more than 600 by June, close to three times its capacity. Such severe overcrowding has made social distancing impossible for all those trapped inside. Provisions of free personal hygiene products have not been increased to meet the demands of the risky environment or the accelerating spread of the virus. In Building 5, soap is available in restrooms for handwashing, but prison authorities do not disinfect the wards or provide disinfecting products to prisoners.

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On a single occasion, a small truck was brought to disinfect the prison during a visit of an expert from the Ministry of Health. In late March, volunteers from the Red Crescent cleaned the ward in Building 5; prison officials have not disinfected it since.

In practice, prisoner protection hinges on whether or not they can afford the cleaning and disinfecting products necessary to take prevention measures themselves. Masks are available only for those who can afford to buy them from prison stores. The prison guards, for the most part, wear masks.

Limited hot water and general water shortages have made cleaning in the time of the pandemic more challenging in Greater Tehran, particularly in wards where prisoners have fewer personal resources to protect themselves. Prisoners usually have access to showers for four to six hours per day, and hot water is only available after midnight. Due to recent water shortages, however, some prisoners in lower rungs of the social hierarchy may have to wait for weeks or months to shower. By June 19, one of the wards of Building 5 had been without hot water for two weeks, and older prisoners forced to bathe in cold water were getting sick. On one occasion the water was cut off across the building for an entire day, leaving hundreds of incarcerated people without drinking water. Prisoners are told that conflicts between prison and city officials are to blame for the low water pressure and hot water scarcity.

Prison authorities’ response to the water shortage has been to lock prisoners in their rooms to avoid unrest. ABC’s source reported that authorities have brought in several armed guards to instill fear among prisoners and prevent the circulation of information during the pandemic. Quarantine protocol is the same in Greater Tehran as it was before the pandemic: prisoners are held for 14 days before being integrated into the wards. Yet even during their quarantine period, prisoners must circulate between prison common areas and are in regular contact with others. Transport of prisoners to various buildings for visitation is done in a cramped, outdated bus whose passengers have no choice but to sit elbow to elbow. In Buildings 5 and 2, space designed for sports and cultural activity has been repurposed as holding quarters, commingling the visibly ill with those who have only mild symptoms.

Only prisoners in the direst and most rapidly deteriorating condition are transported to outside hospitals. Prisoners are very rarely tested, if at all, even when exhibiting severe symptoms or after returning from furlough. Protocol for transport to and from courts has not been adapted to the pandemic: up to 300 prisoners from various buildings are brought into the same room, in shackles, to be transferred to court by soldiers standing by. After their court appointments are finished, prisoners are brought back to the ward without being quarantined.

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27 ABC interview with two informed sources, June 13 and 15, 2020
28 Ibid. At the time of a December 2017 budget proposal, for example, the Prisons Organization was 80 billion tomans (c. 22,500 USD in the official government-subsidized exchange rate of the time) behind on water, gas, and electricity expenses, and already facing a shortfall of 1.5 trillion tomans (c. 422,000 in the official government-subsidized exchange rate of the time; Radio Farda, December 30, 2017, https://www.radiofarda.com/a/iran-prison-budget-problem/28947378.html ).
30 ABC interview with an informed source, August 4, 2020
31 ABC interview with an informed source, July 31, 2020
A source with knowledge of Building 5 in Greater Tehran relates that, by the beginning of August, a previously healthy ward in that building was put under quarantine after seven people took ill with COVID-19 symptoms following the introduction of new incarcerated people. As of that time period, two individuals were being held in a prayer room without medical care after being told there was no room for them in the central prison clinic; one of these, an older man, was in critical condition and could not use the bathroom unassisted. These suspected COVID-19 patients used common toilet and bathing areas. The source reports that the ward for suspect infections is located next to the one holding arrestees from the November 2019 protests. In light of the pre-existing conditions of incarcerated people in the ward, and of the fact that some have undertaken hunger strikes, the source expressed concern over the serious risk of an outbreak in their vicinity. It is only after the news about these patients was reported in Persian-speaking media outside Iran that prison officials moved them out of the ward. Prisoners suspected of COVID-19 infection, the source stated, are sometimes held alongside those who have been diagnosed.

Fashafuyeh Camp for Drug Offenders

The Fashafuyeh Camp, located more than 55 km outside the capital, near the Greater Tehran Prison, has been operational for about five years and according to statements by the camp’s director, Mohsen Shams, has three wings built around the prison, which spreads over 271 acres. The prison buildings cover 70 thousand meters and consist of 38 sulehs or metal frame buildings, partially buried in the ground, 12 of which are dedicated to the support staff. 26 buildings were designed to hold 300 prisoners each, but it is unclear how many prisoners they currently hold.

The continued mass arrest and detainment in camps of drug offenders is also exacerbating infection rates. Seventy-four per cent of the 7,702 drug users arrested in Tehran Province were sent to Fashafuyeh Camp. Sixty-six of these detainees have shown symptoms and were quarantined, according to a July statement by Mansur Hadizadeh, head of the Anti-Narcotic Coordination Council.

According to the Head of Tehran prisons, drug users were sent to Fashafuyeh because Article 16 detoxification centers ran out of space. The Fashafuyeh Camp is not equipped to meet the medical needs of thousands of people arrested.

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32 ABC interview with source with knowledge of Greater Tehran, August 4, 2020
33 ABC interview with an informed source, August 12, 2020
34 ABC correspondence with source with knowledge of Greater Tehran, August 1, 2020
35 Tasnim, July 21, 2015, https://tn.ai/800463
for using drugs. The camp is an Article 42 camp, which holds prisoners convicted of drug-related crimes carrying jail sentences of 15 years or more. Article 42 specifies that such prisoners should be held in “normal or harsh conditions,” and “in conditions harsher than prison conditions.”

Director General of Tehran Prisons Sohrab Soleimani confirms that camp conditions conform with the law in this regard. Iranian authorities have consistently refused to provide information about the treatment of prisoners at Fashafuyeh Camp. Likewise, they have not released information about the medical care being provided to detainees in COVID quarantine there.

Shahr-e Rey Penitentiary for Women (Qarchak)

Shahr-e Rey Penitentiary, commonly known as Qarchak Prison, has 12 wards to accommodate a prison population that fluctuates between 1200 and 2000. The majority of its incarcerated people are accused of drug-related crimes. Sanitary conditions in the prison are substandard, and political prisoners from other facilities are sometimes moved to Shahr-e Rey as punishment.

Every day, Shahr-e Rey’s sewer system overflows into the wards' courtyards, filling the grounds with a terrible stench that draws in swarms of insects. Prison authorities have long been aware of the problem. The prison’s water is salty, resulting in hair and skin problems for the incarcerated people who have no choice but to shower in it. In the summer, the source of this salty water is sometimes cut off. The purportedly drinkable water -- which has an odor of sewage -- comes from a different source that is also cut off periodically in the summer, as it is the same source used for the air conditioning. Prisoners must buy bottled water from the prison store at a steep markup.

Since the outbreak of COVID-19, prison officials have distributed disinfectants to prisoners once, and have never distributed additional cleaning or personal hygiene products. Masks made inside the prison in unsanitary conditions are distributed free of charge. Servings of Shahr-e Rey’s food, notoriously low in quality and quantity, have been cut to one fourth of pre-pandemic portions. The best remedy available to those who can afford it is canned food, which they are unable to heat up. Owing to the fact that non-standard gas lines installed in the prison have gone unaddressed, kitchenettes meant for prisoners’ use have never been opened.

The Supervision Ward (also called the gym) that held individuals arrested during protests is now a quarantine space for prisoners returning from furlough. Prisoners coming into Shahr-e Rey are supposed to be quarantined for 14 days in this ward. However, based on privileges gained through connections with prison staff and authorities, some prisoners are brought into the wards after only a few days of confinement. Whether or not prisoners remain quarantined for the full prescribed period,

“Qarchak is the end of the world; the cost of staying alive in Qarchak is exorbitant.”
- Labor activist Sepideh Qolian, in a series of tweets

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39 Prisoners convicted of drug offenses are held in two wards 1 and 2, Ward 3 hold detainees, Ward 4 holds individuals convicted of theft, Ward 5 holds 18 to 25 year-old women, Ward 6 holds white collar prisoners, and Ward 7 is dedicated to individuals convicted of prostitution, murder, or corruption. A ward is dedicated to pregnant women and women with children. Several cells are used as solitary confinement ([HRANA, July 14, 2020](https://www.hra-news.org/2020/hranews/a-25652/)).
40 In late July, Kylie Moore-Gilbert, the British-Australian scholar who was invited to talk at a seminar and arrested and tried and sentenced to prison on trumped up charges, was transferred from Evin to Shahr-e Rey without notice ([BBC, July 28, 2020](https://www.bbc.com/news/world-middle-east-53562435)). Saha Mortezai, a student activist on hunger strike in Evin to protest the high bail amount, which her family could not afford, was transferred to Shahr-e Rey without notice on December 31, 2019 ([Iran International, January 2, 2020](https://bit.ly/3jLMWdM)).
41 HRANA, July 14, 2020, [https://www.hra-news.org/2020/hranews/a-25652/](https://www.hra-news.org/2020/hranews/a-25652/). On July 26, 2019 Neda Naji’s husband tweeted that the sewer has overflowed and prisoners have lost access to the restroom. The week before he had tweeted that incarcerated people have not showered for three days due to low water pressure ([https://twitter.com/jamal_ameli/status/11524624270805630465](https://twitter.com/jamal_ameli/status/11524624270805630465)).
they still come into contact with the general population when charging their phone cards or buying from the store.\(^{43}\) The gym is also the designated holding area for prisoners suspected of having contracted COVID-19; by early August, it housed more than 30 such cases. A room above the clinic is dedicated to prisoners who are more severely ill, but not in critical condition. By mid-July it was reported that 30 incarcerated people were being held in that room. Prisoners in critical condition or with confirmed diagnoses are quarantined across at least seven conjugal visitation rooms, which as of early August house about 30 patients each. Patients are taken to the hospital as a last resort.\(^{44}\) Meanwhile, since July 7, the increase in the number of infected incarcerated people in Ward 5 has led to the quarantine of the entire ward; yet infected and healthy prisoners circulate in the same hallways and use the same kitchen.\(^{45}\)

On May 28, 2020, HRANA had reported an increase in the number of infections in Shahr-e Rey. The working days of the much-needed prison store had been reduced to two days since April, increasing the number of incarcerated people waiting in line, in proximity to each other, for long periods of time.\(^{46}\) On June 8, information published on social media by an Iran-based journalist and former political prisoner indicated that eight prisoners were infected after a symptomatic prisoner returning from furlough was transferred to a ward without quarantine. Those who tested positive were isolated and left unattended. The confirmed-positive prisoners were left without food that day until 5:00 PM.\(^{47}\) On June 9, a source from Shahr-e Rey indicated that political prisoner Zeinab Jalalian was among the infected. Upon publication of the news of her illness, authorities finally agreed to transfer her to the hospital, where a scan showed blood clots in her lungs.\(^{48}\) On July 10, Parastu Moini, a political prisoner awaiting trial, contracted the virus and was moved from Ward 5 to a room above the prison clinic where she was also left without medical care.\(^{49}\)

**Evin Prison**

In the six months since the coronavirus took hold in Iran, Evin prison officials have given incarcerated people only two masks and two pairs of gloves each. Supplies have been made available for purchase at the prison store at the incarcerated people' own expense.\(^{50}\)

On August 9, 2020, 12 of 17 incarcerated people tested in Ward 8, which houses political prisoners, were announced COVID-19-positive. Of these 12, Majid Azarpey, Amir Salar Davudi, and eight others began to show symptoms around August 2, at which time they were given nasal swab tests. The twelve were taken to Evin’s prison clinic, a facility used by other incarcerated people, raising concerns that the virus would spread there;\(^{51}\) a second COVID-19 test was then performed, the results of which were announced on August 11. Eight prisoners, including Amir Salar Davudi, Mohammad Ali Mosayebzadeh,

\(^{43}\) HRANA, July 14, 2020, https://www.hra-news.org/2020/hranews/a-25652/

\(^{44}\) Unpublished correspondence with HRANA, August 2020

\(^{45}\) HRANA, July 14, 2020, https://www.hra-news.org/2020/hranews/a-25652/


\(^{47}\) Twitter account of Jila Baniyaghoob, June 8, 2020, https://twitter.com/jilabani/status/1270027826247895044


\(^{51}\) ABC interview with an informed source, August 9, 2020; HRANA, August 9, 2020 https://www.hra-news.org/2020/hranews/a-26084/
Saied Sharifi, and Reza Kianian, were confirmed positive and kept in the clinic. The four prisoners whose second test was negative were immediately returned to Ward 8, which caused additional anxiety for their wardmates. Esma’il Abadi, who suffers from asthma, was released on furlough on March 18 and returned to prison in May. His cellmate Ja’far Azimzadeh suffers from kidney and cardiovascular problems. Both tested positive the first time and negative the second time, but spent the interim period at the clinic with those who tested positive both times. Majid Azarpey, who also tested positive the second time, was sent on furlough soon after.

The authorities’ response to reports about infections among prisoners was a televised news report in which they denied it: during a state-sponsored TV news program, footage of Evin’s Wards 4 and 8 showed what they claimed to be a disinfection tunnel, and prisoners with blurred faces stating that they had what they needed, and that no one was ill. The airing of the Evin visit on state TV triggered an immediate reaction from Ward 8’s political prisoners who noted, among other things, that Ward 4 held former officials convicted for corruption and embezzlement, including President Rouhani’s brother, who were in a position to improve their conditions. The images of Ward 8, they pointed out, were fuzzy, and only the Workers’ Hall (7) was shown, notably during hours that they were away from their rooms. The cameras never entered the overcrowded and filthy halls 8 and 9, where political prisoners are held. Moreover, no sources report having ever seen the purported disinfection tunnel.

Alborz Province

Qezelhesar Prison

In Qezelhesar Prison, located 20 km northwest of Tehran, it was reported in March that authorities ordered prisoners from several wards to take their belongings and go into the courtyards, apparently in an attempt to create the impression of a sparser prison population for COVID-19-related news news coverage. According to one source, in the early days of the pandemic, a benefactor provided hand disinfectants and masks for the Workers’ Ward. The ward, which is relatively less crowded, houses prisoners who work in various capacities and circulate inside the prison. Masks are not regularly distributed, but prisoners can buy masks at the prison store, if they can afford it. Prison authorities disinfect the ward’s walls, windows, and phones with a disinfectant diluted with water a couple of times per week. Prisoners were not tested for the virus, but thermometers were used every couple of weeks to take the incarcerated people’ temperatures. By early March, at least two people -- Basat Ali Khazaei and Gholamhossein Abolfava’i -- who were held with 500 prisoners convicted of drug offenses had been moved to quarantine in the health ward due to having been infected.

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55 See video uploaded by HRANA on March 12, 2020: https://youtu.be/eqt0FRJDB0Q
57 ABC interview with an informed source, August 12 and 18, 2020
According to an ABC source, those showing symptoms in the early days of the pandemic were moved to the quarantine ward, where isolation protocols were initially inadequate. Later, the quarantine process became more organized. All newcomers are quarantined for 48 hours together, then moved to different rooms corresponding to their entry date for a 15-day quarantine. Sometime in June, newcomers were also tested for the virus with nasal swabs. Still, these prisoners are not fully isolated, as they share hallways and bathrooms with the general population. Only prisoners in critical condition have been taken out of prison for treatment.\(^{59}\)

On March 1st, 2020, authorities announced that 1,123 prisoners had been sent on furlough.\(^{60}\) On August 4, the Head of Tehran Province Prisons announced that 208 prisoners from Qezelhesar, who had less than six months to serve, were sent on leave.\(^{61}\) Nonetheless, systemic factors and the constant flow of new prisoners prevent proper de-crowding.

**Rajaishahr Prison**

The hygiene situation in the political prisoners’ ward of Rajaishahr Prison has deteriorated since the outset of the pandemic in Iran. Disinfecting products are scarcer in Rajaishahr than they were at the start of the pandemic. Before the pandemic, prison authorities would distribute the following supplies every 50 to 60 days: one shampoo, one soap, one pair of underwear, and one toothpaste to each prisoner, as well as trash bags, dishwashing liquid, and washing powder to each ward. Prisoners now

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\(^{59}\) ABC interview with an informed source, August 12, 2020


wait up to 120 days for their ration of personal hygiene supplies, which were hardly sufficient in normal circumstances, and while authorities continue to provide trash bags, dishwashing and hand washing products at the regular intervals, disinfecting chlorine is almost non-existent. In the political prisoners’ ward, there is no opportunity for prisoners to work. Those with fewer resources therefore have to save on food to buy personal hygiene products.62

According to ABC’s source, prison authorities have not raised awareness about the coronavirus among incarcerated people, and the disinfection of the hallways, performed once or twice per week, is done with a product which can be mistaken for plain water. The source went on to say that Rajaishahr Prison’s initial no-new-entries pandemic policy did not take long to fade from practice: “The policy suddenly changed, and new prisoners were brought in, and those on furlough were brought back…”

Amid rumors of increasing infections, prison staff remain secretive about the virus’s spread. Anxious prisoners, in an attempt to shield themselves from contamination, avoid leaving the ward as much as possible. Prison authorities attribute inadequate supply of essential items to budgetary restrictions.63

In early May, 2020, Hossein Negahdar (convicted of violent crimes according to HRANA) died in Rajaishahr Prison of an illness with symptoms similar to those of COVID-19. Prison officials announced a stroke as the cause of death. On May 23rd, two incarcerated people were sent to hospitals outside prison. They both had been summoned back from furlough.64 In June, Iraj Hatami, a prisoner in the political prisoners’ ward who had previously shown coronavirus symptoms and was released on furlough, tested positive. This prisoner was sent on furlough in March, summoned back, and re-entered his ward after spending 14 days in quarantine. His wardmates include Arash Sadeqi, who has cancer, and Abolqasem Fuladvand, who suffers from a heart disease.65

Kurdistan Province

Kamyaran Prison

Information on Kamyaran Prison, where overcrowding and lack of hygiene have been reported, is limited. In late June, however, inmate Rostam Qorbani was transferred to hospital after his condition rapidly deteriorated; he died from COVID-19 two weeks later on July 8, 2020.66

Sanandaj Prison

At Sanandaj Prison incarcerated people are divided among 11 main wards and two quarantine sections. Wards 1 through 6, known as “Puyesh,” each designed to accommodate 35 prisoners, housed at least 41 at the time of this report; in all but one of these, incarcerated people are forced to sleep on the floor. In Ward 1, political prisoners are held alongside those convicted of murder. Qur’an Wards 1 and 2 each house between 110 and 170 people, many of whom also have no choice but to sleep on the

62 ABC Interview with an informed source, June 15, 2020
63 Ibid.
65 HRANA, June 20, 2020, https://www.hra-news.org/2020/hranews/a-25275/
floor. According to the media report covering the opening of the Quran Ward 9 years ago, the entire ward (sections 1 and 2 combined) was intended to hold no more than 170 incarcerated people.⁶⁷

Hygienic supplies and facilities are not available in Sanandaj, and incarcerated people have routinely been denied furloughs to which they were legally entitled. In August, the prison’s air conditioners were currently out of service, at a time of the summer when regional temperatures climb as high as 36.1 Celsius / 97 Fahrenheit.⁶⁸ At the outset of the coronavirus crisis, Sanandaj Prison officials procured and distributed a number of masks; these were discontinued sometime later. As of early August, masks were not even available for purchase from the prison store, and officials, citing contamination concerns, did not allow prisoners to wear masks that their relatives had brought in for them. Wards are fumigated every ten days. Since the crisis began, referrals to medical facilities outside the prison have been stopped, even though the prison clinic has no eye specialists, dentists, or internists, with only one generalist physician available to provide care.

The poor control of infection in this facility can be seen in its isolation procedures. Quarantine Ward 1 had already been designated as a general quarantine ward prior to the coronavirus crisis; more recently, Quarantine Ward 2 was established for shorter-term isolation needs. Newly incarcerated people are isolated for 14 days before being transferred to the general population. As of August 2, 2020, incarcerated people with symptoms of COVID-19 infection were also being taken into a hall normally used for conjugal visits; three more incarcerated people showing COVID-19 symptoms were reportedly being held in the clinical isolation room in critical condition, and had not yet been transferred to hospitals. Due to a high number of suspect symptoms among the incarcerated people of Quran Ward 2, they, too, were placed under quarantine.

As before, incarcerated people at Sanandaj often leave prison grounds to go to courts and Prosecutor’s Offices. Soldiers and other escorts on such trips often fail to abide by preventative protocol and do not wear masks or gloves. Upon their return from these judicial appointments, incarcerated people are returned immediately to the general population, and are denied even hand sanitizer.⁶⁹

Khuzestan Province

In April, ABC reported that prisoners’ fear of the pandemic led to unrest in several prisons in late March, and that the violent quashing of these uprisings left scores of incarcerated people dead and injured, including in Khuzestan’s Sepidar and Ahvaz Central Prisons. More recent news indicates that their fear was justified. In May, a communique from the public relations office of Khuzestan prisons noted that local prisoners had begun contracting the virus as the number of infections increased in Khuzestan Province. The communique stressed that these prisoners were quarantined, and “have been cared for according to the Ministry of Health’s protocol,” but predicted that the virus will likely be introduced into the wards by incoming prisoners, even after a 14-day quarantine.⁷⁰ The prison organization has not provided data on the number of prisoners infected since May.

Ahvaz Central Prison (Sheyban Prison)

In Ahvaz Central Prison (known also as Sheyban Prison), unrest broke out on March 31. Documents obtained by HRANA reveal that five incarcerated people were killed by anti-riot forces during the uprising and that prisoners involved are now being prosecuted for “disrupting public peace and order

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through pandemonium and commotion,” “causing the murder of four Muslim men,” “causing the murder of five prisoners,” “complicity in (also called "aiding and abetting") the commission of crimes,” “willful and intentional destruction and arson of public property,” and “disrupting public order.”

Sepidar Prison
On July 16, 2020, HRANA reported the July 15 passing of inmate Saeed Heydari, who succumbed to the virus in Ahvaz's Sepidar Prison. Heydari was 37 years old and had diabetes. He was arrested in 2019 for a physical altercation and was still awaiting trial. A source close to his family attributed his death to the lack of medical attention and general prison neglect.

Behbahan Prison
Prisoners, including political prisoners, have taken ill in Behbahan Prison, among the Iranian provinces with the highest infection rate as of August 2020. HRANA reports that in late July and early August, at least 20 prisoners with suspected COVID-19 symptoms, including Mehran Qarabaghi, were moved from various wards into quarantine. One of the prisoners, who was too ill to walk, had to be carried by other prisoners in a blanket. It is also reported that, in a prison where incarcerated people cannot afford to buy masks, gloves, and disinfectants, the prison's Director, known as “Shahbazi,” has placed severe restrictions on the granting of furloughs.

Despite the pandemic, prisoners are taken to courts and back and prison officials do not properly enforce quarantines, sending newcomers and prisoners returning from furlough to wards.

Borazjan Prison, Bushehr Province
A report from Borazjan Prison indicates that high infection rates and limited space have led authorities to house sick prisoners among the healthy. Two of Borazjan’s Kurdish prisoners, Reza Mollazadeh and Mozaffar Sekanvand, are among those infected. Prison officials are reported to have refused their transfer to the hospital due to the national security nature of their cases.

Esfahan Province
In Esfahan Province prisons, 11 incarcerated people were infected with coronavirus and in quarantine, and five more were hospitalized, according to the then Esfahan Prisons Head, Assadollah Gorjizadeh. In a July 13 interview, Gorjizadeh said that though prisons do not have the capacity to test all prisoners, they do test prisoners suspected of having contracted the virus. Gorjizadeh did not provide data on the number of deaths, stating only that "the [recent] deaths in Esfahan Province prisons were not all due to Corona[virus]."

71 HRANA, August 11, 2020, https://www.hra-news.org/2020/hranews/a-26128/; Article 506 of the Islamic Penal Code of 2013, defines Causation as follows: "Causation of a crime consists of when a person causes death or injury to another without directly committing the crime, in a way that the crime would not have occurred without his/her actions, such as when a person digs a well into which another falls and gets injured."
73 HRANA, August 14, 2020, https://www.hra-news.org/2020/hranews/a-26171/
74 HRANA, August 14, 2020, https://www.hra-news.org/2020/hranews/a-26171/
West Azerbaijan Province

Orumieh Prison

By and large, trends of viral spread among the general public are worse behind bars. Recent updates about the spread of the virus in the city of Orumieh, for example, raise concern about the conditions of the local prison.77 ABC reported in April 2020 about the lack of hygiene, insufficient cleaning products, and slapdash disinfection procedures in the women's ward of Orumieh Prison, where one inmate had already died from COVID-19 that she contracted while detained there.78 As of the date of this report, the quarantine ward has been divided into three sections designated for new prisoners, those with suspected COVID-19 symptoms, and infected prisoners returning from the hospital. The quarantine's effectiveness is questionable, however, as these prisoners use the same courtyard and bathrooms as the general population. It is only after several staff members, including one of the prison's doctors, were infected and hospitalized that guards started wearing masks; these infections also occasioned a strike on June 5 by nurses and clinic staff, who protested a lack of preventative measures at the prison.79

As of April 13, infections were reported in many wards of Orumieh Prison and at least four prisoners were in Taleghani hospital in critical condition. It was reported that authorities had sent 50 prisoners from affected wards to the hospital for testing.80 By April 15, 2020, scores of Orumieh prisoners suspected of having been infected with the virus were either moved out of Ward 15 to external medical centers or transferred from Wards 1 and 2, 3 and 4, and 14 to the quarantine ward (Band Pak). In mid-May, prisoners from Wards 14 and 15 whose tests had come back negative were sent to the “Dormitory 3” ward.81 In late May, at least eight prisoners with symptoms including high fever and seizures were transferred to Taleghani Hospital, possibly from Wards 14 and 15. 800 incarcerated people had visited the prison clinic in a seven-day period. Dr. Kazemzadeh, the presiding clinic physician, refused entry to the clinic to new patients owing to scarce supplies and medication, and expressed concern for the danger an outbreak would pose given Orumieh’s high prison population, particularly of methadone users. By early June, at least four male prisoners -- Anvar Qorbanzadeh, Seifodin Bamradi, and Fariq Mohammadi, Hossein Javadi -- had died from COVID-19 in the prison.82 As of August 12, four women in Hall 1 of the women’s ward -- Mohebat Mahmoudi, Fatemeh Mirabi, Donya Piri, and Simin Seyyedi -- had contracted COVID-19. Rather than being transferred to a hospital for treatment, they were moved to a small room within the ward.83 Human rights sources report that prison authorities have used security concerns as a pretext for withholding furloughs, medical care, and hygienic supplies.84

Information obtained on Orumieh Prison’s men’s wards indicates continued overcrowding and very few prevention measures. In a July 8, 2020 report, HRANA reported that incarcerated people are physically incapable of respecting social distancing in many wards. Four to five thousand people are held across 17 wards referred to as dormitories. Across dormitories 1 and 2, groups of 15 prisoners

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77 In June, Orumieh’s Governor announced an increase in the number of infections and made the use of masks in public places mandatory (Iqna News Orumieh, June 16, 2020, https://orumiyeh.iqna.ir/fa/news/3905201/). On July 7, 2020, the dean of the Azarbaijan Gharbi medical school reported that the two main hospitals in Orumieh had no capacity to hospitalized patients infected with the virus (Andalou Agency, July 7, 2020, https://bit.ly/3XJuiP).
on average share 12-square-meter rooms, each furnished with only six beds. A total of 40 such rooms comprise the two dormitories, whose approximately 600 total incarcerated people must share four showers and four restrooms. While the approximately 270 prisoners of dormitories 3 and 4 have their own beds, they all bunk and live in the same common space, and must share only four restrooms and four showers. In dormitories 5 and 6, which hold almost three times as many prisoners (360 to 450) as they do beds (150), prisoners also share a common space. Prisoners convicted of drug-related offences, including simple use, are most commonly held in dormitories 5, 6, and 11. The incarcerated people of dormitory 15, which has 120 beds and holds between 300 and 350 prisoners, also suffer from dire overcrowding.

Dormitory 12 (or Band Pak), which has been converted to a quarantine space since the outbreak of COVID-19, holds up to 500 prisoners who each spend 14 days there before being released into general population. For unexposed, uninfected prisoners that have been deemed unruly, dormitory 12 has also served as a de facto detention quarters.85

Though prisoners and prison staff did disinfect common spaces in the early weeks of the pandemic, such measures have all but ceased. Disinfecting products, rarely available in the prison’s store, are sold at several times market cost outside of prison.86 Industrial workshop operations, which stopped in the spring, resumed as normal at the end of May 2020.87 According to prisoners and human rights sources, water is intermittently cut off in the prisons; they also indicate that the nutritional value of food in Orumieh Prison has deteriorated significantly, and that prisoners who cannot afford to buy food from the store report going to bed hungry. Prospects of improvement are bleak: as one prisoner remarked, “There is neither budget nor plans.”88

Bukan County Prison

Based on information provided to ABC on Bukan County Prison, in the early days of the pandemic every inmate was given a mask and a pair of gloves upon arrival. Now gloves and masks aren’t even available in the prison store. Disinfectants can only be found in the prison store at a considerable markup.89 Both newcomers and prisoners returning from court appointments are quarantined for a period of seven to ten days.90

Tabriz Prison, East Azerbaijan Province

Tabriz Prison was one of the penitentiaries where unrest was reported in late March. The prison has 14 wards and holds about 4000 of East Azerbaijan’s total prisoner population of nearly 7000. According to prison authorities, this results in a lack of space, and former prisoners confirm that social distancing is impossible due to extreme overcrowding. On July 12, 2020, the head of the Ministry of Justice office of East Azerbaijan stated that 54% of the province’s prison population had been granted leave, 23% of whom did not return to prison thanks to legal alternatives.91 Iranian officials announced that the percentage of newcomers in Tabriz prisons decreased 15% in the three months of spring.92 However, a source with knowledge of Tabriz Prison has told ABC that fear is prevalent among

85 HRANA, July 8, 2020, https://www.hra-news.org/2020/hranews/a-25573/; ABC’s source on Orumieh’s prison wards interviewed July 14, 2020 reports higher populations for Dormitory 1 and 2 (about 950 prisoners) and dormitory 15 (181 beds and 485 prisoners).
88 Orumieh prisoner as quoted by Rebin Rahmani (Kurdistan Human Rights Network) in interview with ABC, July 14, 2020
89 Information provided by Kurdistan Human Rights Network, July 11, 2020
90 Information provided to ABC by a source with knowledge of Bukan County Prison, August 21, 2020
prisoners owing to the fact that prison authorities, after granting 30 to 40-day furloughs to a high
number of prisoners at the outset of the outbreak, are now doing little in terms of virus prevention.

A source with knowledge of Tabriz Prison conditions described the hygiene situation as “catastrophic.”
Newcomers are brought in without quarantine, and these individuals, coupled with those taken out
and returned for court appointments, make for high turnover within wards, which has led to high rates
of suspected COVID-19 infection. The juvenile ward, where several prisoners have reportedly died, and
the women’s ward are in especially bad states due to lack of facilities, among other reasons. The wards
housing individuals whose sentences have been finalized is relatively better due to their limited traffic
to and from outside prison. Hygiene conditions in the “Seganeh” Ward are especially dire.93

Quarantine durations have not changed since the start of the pandemic and prisoners are kept only
two or three days before being sent to wards. Neither newcomers nor prisoners in contact with
prisoners suspected of having been infected are tested. Prisoners have very limited access to the prison
clinic: every ward is assigned a time one day of the week during which the ward’s prisoners may visit
the clinic, and outside of these prescribed times, it seems that only those in critical condition are
allowed in the clinic.94

Prisoners suspected of being infected with the virus, those with symptoms, and those in critical
condition have been taken out of wards and not returned. Prison officials have told prisoners who have
inquired about the health of wardmates taken out of the wards that they have been granted furlough.95
Jaber Irandust, detained in Ward 11 of Tabriz Central Prison on charges of purchasing a stolen
mobile phone since early March, died on or around March 27 after presenting COVID-19-like
symptoms and being transferred to a hospital a few days before.96

Adelabad Prison, Fars Province

Adelabad Prison in Shiraz has 14 regular wards for men convicted of various crimes, excluding drug crimes. Three of
these wards are very large. Each of them comprise three 3-story buildings. Each floor has 20 rooms and holds 300 to 400
prisoners. Each room has three or four three-tier bunk beds and prisoners who do not have beds sleep on the floor, in the
rooms and the hallways. Every ward has seven to eight bathrooms, each comprising a toilet and a shower. However,
these facilities are unsanitary, not all the bathrooms are in service, and hot water is often lacking.97 The Sabz (Green)
Ward has four halls and one of these halls, known as Ward 14 is holding political prisoners. Wards are disinfected daily by prisoners themselves. The Green Ward is better equipped and more comfortable than Adelabad’s other wards. It has
daily access to the courtyard while most wards do not have regular and easy access to open
air facilities for recreation and may be denied such access for weeks.

93 ABC correspondence with source with knowledge of Tabriz Prison, August 25, 2020
94 ABC interview with an informed source, August 21, 2020
95 Ibid
Adelabad’s water is not potable and prisoners have to buy bottled water at a high price or, for those without financial means, drink tap water after boiling it. The food’s quality is below standard and lacks protein (one chicken leg per week divided between three prisoners) and other necessary nutrients. It is eaten by people who have absolutely no other choice.

Prisoners are given one pair of underwear, one toothbrush, and a ration of toothpaste and shampoo. Adelabad’s store is small and stocked with a limited quantity of masks, sold at higher prices than outside market price. Masks, gloves, and disinfectants were not distributed to prisoners at the start of the pandemic. At Adelabad, incoming prisoners are held 14-21 days in a quarantine ward with a capacity of 50, in numbers which can reach 200. Prisoners are not segregated by day of arrival. The quarantine facility comprises two big rooms, each with 6-8 triple bunk beds and two phones.

Adelabad’s prison clinic is run by nurses. A generalist visits the prison weekly and sees a limited number of prisoners. Medication is scarce, and distributed to ward captains, who sell it to prisoners at high prices. Each hall is allotted two slots a week during which its occupants may visit the clinic; prisoners report many administrative obstacles to such visits. Prisoners suspected of COVID-19 infection are taken to quarantine; if symptoms worsen there, they are taken to the clinic, and in extreme cases to the hospital. One prisoner in need of hospitalization was on a waiting list for three months for a hospital transfer. Prisoners who spend more than three days in the hospital are quarantined upon return. Protocols for taking prisoners to and from court appointments have not changed in wake of the outbreak. Prisoners who refuse to go to court because of the pandemic are physically compelled to go.98

A source with knowledge of Adelabad Prison reports many confirmed COVID-19 cases there stretching back to the early days of the virus’ spread. Prison officials, including the head prison guard officer -- who were in contact with prisoners daily -- tested positive, as did a number of prisoners themselves. All COVID-19 positive individuals were taken away from the prison. The source reports that the announcement of these test results, coupled with a lack of action on the part of officials, sparked prison unrest (on the night of March 29, as cited in ABC’s April 2020 report) which resulted in the wounding, including breaking of limbs, of a number of prisoners, as well as the forced transfer (exile) of some 700 prisoners to other facilities.99

98 Ibid
99 ABC interview with an informed source, August 21, 2020
Iran Can and Must Do More to Protect Prisoners

Though state secrecy continues to prevent a clear assessment of the scope of COVID-19 infection in Iran’s prisons, including of the number of deaths, statements by prison officials in various provinces, alongside reports from prisoners and other informed sources, are alarming. The available information sheds light on a lack of resources, absence of sufficient prevention measures including testing, and (most importantly) continued arrests -- such as that of a man who died with suspected COVID-19 symptoms in late March 2020 after being detained for a couple of weeks in Tabriz Prison for buying a stolen mobile phone -- which exacerbate overcrowding, render quarantines ineffective, and endanger prisoners. The increase in the number of incarcerated people infected across the country since April indicates a failure on the part of prisons to manage the isolation and medical care of affected prison population. Iranian prisoners continue to be denied the means for properly ensuring their personal and environmental hygiene.

The recent statements of an unnamed doctor working in a Tehran prison to Reporters Without Borders on the fact that prison authorities have not been able to contain the pandemic attests to the urgency of the situation:

“For an infectious disease such as Covid-19, we need not only resources but also an appropriate health policy ... The only thing the prison authorities do is isolate the sick or transfer them to other wings of the prison ... Detainees with Covid-19 should be released so that they can receive the necessary treatment “or at least die with dignity in their family.”

The failure to allocate adequate resources for Iran’s prison system is a decades-old problem, and has consistently been an object of discussion among officials and lawmakers demanding reforms and resources to address overcrowding, inadequate and aging infrastructure, poor nutrition, and lack of proper medical care. Factors that take a toll on prisoner health even in ordinary circumstances have become dire and deadly during the pandemic. Despite repeated promises from authorities since late February to allocate more essential resources, no additional support seems to have been provided to prisons that are losing the battle with COVID-19.

In a series of letters addressed to the Ministry of Health by the Prisons Organization between February 29 and July 5, officials did warn the government about the pandemic, notably about the “security hazards” and “irreparable harm to society as a whole” that would result if they did nothing to stop it. In their warning they cited multiple risk factors common among general prison populations such as pre-existing medical problems, malnutrition, anemia, infectious disease, and drug use. The letters, which were leaked to Amnesty International, indicated prison officials’ level of alarm about the vulnerability of incarcerated people. The Prison Organization urgently requested supplies that would head off the threat, including air ventilation systems, masks, plastic gloves, hand sanitizer, protective shields and gowns, and budget lines to purchase essential medical devices including non-contact thermometers, autoclave machines (used for sterilizing liquids and devices), and blood pressure monitors. Despite follow-up letters from prison officials attesting to a continued need for resources

103 The letter dated 25 March 2020 (pp. 2-4) lists urgently required disinfectant products and protective equipment to last three months, including “5,400,000 masks, 100,000 N95 masks, 3,600,000 latex gloves, 10,000,000 plastic gloves, 450,000 litres of hand sanitizers and 1,000,000 litres of...
in May, June, and July, the government seems to have ignored their requests leaving prisoners and prison staff under pressure and exposed. Incarcerated people have reported to ABC and other human rights organizations that prison officials themselves have cited lack of budget as a reason for failure to implement COVID-19-related measures.\footnote{104}

In an interview with ISNA, Abdolmajid Keshvari, Head of Lorestan prisons, reported that 2000 prisoners in his region were sent on furlough in response to the pandemic. He noted that 80% of the province’s prisoners have no prior criminal record. He stressed that the work of prison staff is difficult and exhausting, and that plans for structural reforms in Lorestan prison are not being implemented due to budget limitations.\footnote{105}

On July 16, Kerman Prison Head Ramezan Amiri insisted that prisoners in closed wards were not infected by the virus. In the same conversation, he drew attention to the increase in “the workload of the staff due to diagnosis and medical care related to the pandemic,” as well as the need to improve prison clinics and bolster human and material resources.\footnote{106}

Pleadings from prison officials to curb unnecessary detentions and imprisonments have gone unheard by the Judiciary, which has compelled them to call on ordinary citizens for donations to bail out individuals in prison for debts as low as $500.\footnote{107} Despite some minor reform to sentencing law, lawmakers have failed to take significant steps toward the decriminalization of many nonviolent, petty crimes and drug-related acts.

The overcrowding, according to Esfahan Province Prison Head Asadollah Gorjizadeh, cannot be tackled without significant legal reforms. In a May 10 meeting, Gorjizadeh, who was removed from his position on August 13, 2020,\footnote{108} lamented that the prison population remained steady despite a staggering 6200 furloughs, 1200 early releases, and 1100 pardons from the Supreme Leader since the beginning of the pandemic, remarking that “90% of prisoners should not be sent to prison.”\footnote{109}

Many people incarcerated in Iran are in detention awaiting trial or have appealed their sentence and have to go to court, which exposes them and their wardmates when they return to prison. Iranian authorities have claimed to be handling an increasing number of court cases online in response to the

\begin{itemize}
    \item surface disinfectant, 5,000 face shields, 5,000 protective goggles, 5,000 protective gowns, 300 air ventilation systems and 250 de-infestation machines.
\end{itemize}

It also highlights the urgent need for funding to purchase essential medical devices including “220 pulse oximeters [used for measuring oxygen levels in the blood]; 250 glucometer [used for measuring blood glucose]; 1500 non-contact thermometer for fever; 100 UV lamp systems; 120 autoclave machines [used for sterilizing liquids and devices]; 1,000 blood pressure monitors; 1,000 stutoscopes; 70 electrocardiograph machines [used for tracking the electrical activity of a patient's heart] and 50 direct current (DC) shocks machines [used for addressing urgent threatening heat complications] and 150 suction devices [used typically for intubated patients].” Text of the letter available from Amnesty International: \url{https://www.amnesty.org/download/Documents/MDE1328112020ENGLISH.PDF}

\footnote{104} ABC Interview with an informed source at Rajaishahr Prison, June 15, 2020
\footnote{105} Iranian Students News Agency, July 15, 2020, \url{https://www.isna.ir/news/990425215878/}
\footnote{107} On May 12, 2020, an official in Bushehr Province, for example, called for citizens’ to relieve 124 incarcerated people aged 18 to 40 the majority of whom are in prison for debts ranging from $500 to $1500 (per the unofficial exchange rate at the time; Islamic Republic News Agency, May 12, 2020, \url{www.irna.ir/news/83785013})
\footnote{109} On May 10 2020 Gorjizadeh stressed that 744 prisoners with a total debt of about $6 million are in Esfahan prisons. Some have been in jail for eight or nine years (Iran’s Metropolises News Agency, May 10, 2020, \url{https://www.irna.ir/news/4229657})

www.iranrights.org 27
1) 51 men and women arrested in a party in Birjand. Radio Farda;

2) Head of Western Tehran Police announces the arrest of 111 men and women for participating in a mixed gender party. April 2020. Ghatreh;


4) 51 “currency disruptors” arrested in 72 hours. July 2020;

5) “Flagrant drug users” arrested in Tehran, waiting to be sent to Fashafuyeh Camp on May 10, 2020;

6) Discovered during the arrest of Qom “hooligans.”

7) “Hooligans” arrested in their homes in Qom, the epicenter of COVID-19, on May 8, 2020.

8) 400 foreigners rounded up as “flagrant drug users” and sent to camps awaiting deportation. Khabar Online May 11, 2020
pandemic, per Article 659 of the Code of Criminal Procedure, which allows for virtual trial proceedings in certain conditions. But the overall handling of coronavirus concerns in Iranian courts has been inconsistent, and puts both justice and public health at risk. ABC's interviews with prisoners and lawyers in several cities, such as Shiraz, Tehran, and Tabriz, indicate that some non-criminal cases have been handled remotely. In criminal cases, information at hand indicates that prisoners have generally been taken to courts as usual, or that judges have handled court proceedings in ways that have disadvantaged defendants, with the exception of one prisoner in Alborz Province whose case required traveling to Esfahan.

For example, judges in Shiraz and Tehran have held court sessions before working hours, shuttling defendants over from prison at 7:00 AM without their lawyers being notified. Saeid Dehghan, who represents the brother of anti-compulsory veil activist Masih Alinejad, Alireza Alinejad, who has been in detention since October 2019, is one of these lawyers. He wrote in a tweet on June 30 that the third session of his client's trial, which was conducted at Branch 28 of the Revolutionary Court, was scheduled for July 14 at 12:00 PM; the session was instead held on a different date without him or his colleague being notified by authorities.

Iranian law stipulates a number of duties that judges must perform during court sessions. In cases carrying sentences of hoddud or "fixed punishments", such as sodomy, adultery, or the liberally-applied "enmity against God," for example, a defendant's confession only has legal credence when made directly in front of the judge. In all cases, it is obligatory for judges to hear testimony themselves where that testimony is used as evidence in a verdict. Judges are responsible for ascertaining the credibility of witnesses, evaluating their testimony, and affording equal attention to both parties involved in the dispute (Islamic Penal Code articles 171 and 187; Code of Criminal Procedure Article 218).
Procedure Article 326, Article 359 Paragraph E. Judges are also bound by Code of Criminal Procedure Article 102, Note 2, to remind witnesses of the consequences of giving false or unqualified testimony. In cases where trials proceed via the exchange of written briefs, judges cannot perform these duties, and defendants have no opportunity to contest, clarify, or retract confessions made in detention.

Six months after Iran's official acknowledgment of the pandemic, very little is known on the scope of infections in Iran's prisons, and no independent monitoring of prison conditions has been reported. Reports from certain prisons raise alarm over the possibility that authorities are withholding medical findings from prisoners and the public. For instance, a source with knowledge of Greater Tehran Prison reported that to prisoners' knowledge, medical staff there had been told to not list COVID-19 as a cause of death for patients.

Iranian officials continue to claim that the COVID-19 prevention measures in its prisons are a model for other countries, and that Iran cares for prisoners' health without discrimination. A search for coronavirus on the Judiciary's Human Rights Headquarters brings up multiple results and statistics about the number of prisoners infected in prisons in other countries -- in the US in particular -- but none on the number of people infected in prisons across Iran. Regardless, there is overwhelming evidence to suggest that the Judiciary's new de-crowding directives to send more prisoners on furlough (36,283 between July 8 and July 20, according to the Prison Organization Head Mehdi Haj Mohammad) are due to a spike in the number of infected prisoners.

With the rapid surge of infection cases since mid-May, and as concerning news from prisons is clouded by layers of state secrecy, many questions remain unanswered. Why were the initial protocols, so poorly implemented in the beginning, abandoned? Why have prisoners on furlough been called back to prisons to aggravate overcrowding? What justification is there for continued arrests for crimes not recognized under international law? What plans are in place to address the needs of the thousands of drug users arrested and sent to camps to go through severe withdrawals without the slightest medical treatment or oversight? If prisoners have been properly protected as Iranian authorities claim, why is Iran not making data available to the public and denying access to independent monitors? Most examinations and if it concludes that the testimony lacks veracity, the testimony shall be inadmissible. "Where the court hears the testimony of one party to a dispute, it shall inform the other party that it may raise its own questions, should it have them". "Where a defendant denies [the charges against them] or does not speak [regarding these charges], or where doubt exists regarding the veracity of the confession, the court shall commence an investigation of the defendant and hear testimony from the witnesses, experts, and informed parties who are introduced by the prosecutor, plaintiff, private plaintiff, defendant, or their legal representatives." "The judge is obligated to remind witnesses of the consequences of giving testimony which lacks legal qualifications". Official site of the Iranian judiciary's High Council for Human Rights, accessed August 9, 2020, humanrights-iran.ir/search.aspx?keys=%DA%A9%D8%B1%D9%88%D9%56%D8%A7&sr=+&q=&c=&a=&e=+&s=+&r=+&i=+&f=+&index=2&size=25 Azer News Agency, July 14, 2020, http://asrpress.ir/fa/news/19063. BBC, August 3, 2020, https://www.bbc.com/news/52959756
importantly, how many prisoners must be infected or die before Iranian decision makers take their obligations towards individuals deprived of liberty seriously?

If left unchecked, COVID-19 will continue to infect more prisoners and staff, with tragic consequences. It is time for Iranian authorities to stop making self-congratulatory, unsubstantiated, and deceitful statements, such as “the UN High Commission has named Iran as a model country for reducing prison population to fight the spread of coronavirus and ensuring prisoners’ right to healthy,” or that “97% of prisoners wear masks;” or that Tehran’s prisons, in particular women’s prisons, have seen significant developments in terms of hygiene, comfort, and education. Rather than dismissing the reported spread of the virus in prisons as an unfounded rumor, Iran must acknowledge the seriousness of the situation and take the necessary measures to address the problem.

Iran’s economy is no doubt suffering from economic sanctions and its leaders have to make hard choices on where to direct the country’s existing resources. Prioritizing religious projects and propaganda, such as the building of golden shrines to Shiite Imams in Iraq, the funding for which was announced by the then Head of the Parliament in January 2016, or the increase in funding for the Al Mustafa Society from approximately 65 million dollars (three years ago) to 73 million dollars (at the official exchange rate), instead of protecting public health in Iran, is a policy choice by Iran's leadership. Al Mustafa Society’s budget benefits tens of thousands of foreign students studying in Iran.

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religion. Reducing its budget, unlike failing to allocate resources to prisons, does not put people’s health and lives at risk.\(^{136}\)

Iran can, for example, see to the settlement of unpaid workers’ wages, or increase teachers’ salaries to allow them a decent standard of living, rather than sending them to unsanitary and overcrowded prisons for speaking out about the state of their professions.\(^{137}\) A small fraction of what was allocated to Al Mostafa Society could also ensure proper food, hygiene, and medical care for those that the state deprives of liberty.

Soap has been produced in Iran for close to a century, and there is no shortage; on the contrary, it is produced in massive quantities, as evidenced by the fact that there is no black market for it as there is for other commodities.\(^{138}\) The shortage of disinfectants which has affected many countries, including Iran in March, has also been addressed. Iran has natural resources such as oil and salt, and is producing ethanol, a basic raw material for alcohol-based disinfectants.\(^{139}\) World Health Organization guidelines for Preparedness, Prevention and Control of COVID-19 in Prisons and Other Places of Detention, meanwhile, specify best practices for decontamination which use chemically simple substances such as soap and diluted bleach.\(^{140}\) Staff of six hospitals in various cities with knowledge of the medical supply chains told ABC that the fall of the currency has made foreign products unaffordable. These hospitals have been using domestically-produced disinfectants, which are of lower quality than formerly imported foreign products,\(^{141}\) but are responding to the current needs of hospitals.\(^{142}\) The fact that prisons do not disinfect the wards or common areas properly, and do not make disinfecting products available without charge to prisoners, is more likely a matter of choice and resource allocation. Ignoring the requests of the Prisons Organization, including for disinfectants, during a

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\(^{136}\) According to the head of Al Mustafa Society, the university is active in 50 countries with 20,000 students abroad and 10,000 students studying through its virtual university. According to a statement by the Director of Al Mustafa University in Esfahan in November 2017, 40,000 foreign religious students were studying in cities across Iran (Islamic Republic News Agency, February 27, 2018, [https://www.irna.ir/news/82823771](https://www.irna.ir/news/82823771)).

\(^{137}\) https://iranhrdc.org/controlled-and-pursued-labor-activism-in-contemporary-iran/; “Shapour Ehsani Rad arrest comes at a time that Jafar Azimzadeh, secretary of the board of directors of the FUIW is in custody. The legal prosecution of charges brought against Parvin Mohammad, the vice-chair of FUIW, and other members of FUIW is ongoing. Among FUIW members, Nabi Khodjoo, Nasrin Javadi, Farhad Sheikhi, Hadi Soleimani and Mehdhi Fakhri have ongoing open cases against them in the Iranian judiciary.” Radio Farda, July 29, 2019, [https://en.radiozamaneh.com/29616/](https://en.radiozamaneh.com/29616/); “A third round of nationwide teachers’ strikes in Iran entered its third day March 5, with teachers across the country holding sit-ins in their school principals’ offices to demand better pay, the right to form unions, and the freeing of all jailed teachers’ rights activists.” Radio Farda, March 5, 2019, [https://en.radiofarda.com/a/third-day-of-fresh-teachers-strikes-in-iran/29804380.html](https://en.radiofarda.com/a/third-day-of-fresh-teachers-strikes-in-iran/29804380.html)


\(^{141}\) The lower quality is attributed by ABC sources to the Iranian products’ high percentage of alcohol, which creates skin irritation, and the fact that producers of such products are more focused on quantity than quality.

\(^{142}\) ABC and HRANA’s investigations of hospital staff in the cities Rasht, Babol, Qazvin, Mashhad, and Esfahan, August 2020
pandemic is a reckless decision, which indicates the little value that the health and lives of citizens have in the eyes of the country's decision makers.

States across the region have been facing challenges resulting from the pandemic, including in their often overcrowded and unsanitary prisons. Some like Egypt have been reluctant in releasing prisoners and imposed an information blackout on the spread of the virus in prisons. Others, like Morocco, have made real efforts to prevent the spread of the virus. They have allowed independent local monitoring, shared information, tested prisoners and prison staff, and published data on the number of infections in prisons. Tunisia, Algeria, and Israel for example appear to have responded to the crisis in cooperation with local and international human rights and humanitarian groups, allowing them in some cases to distribute soap and disinfectants to prisoners. Lebanon has permitted the Red Cross to refurbish a prison isolation ward. Some of these countries have also worked in past years with support from local and international organizations to train prison staff and address some of their most serious problems. Iranian authorities on the other hand, have closed down independent human rights groups and ABC is not aware of any prison reform-related activities having been carried out by international human rights groups in the past ten years.

It is the state's duty to provide resources for proper preventive measures and medical care. The increase in the number of prisoners infected and the Prison Organization's repeated requests for resources are alarming indications of Iran’s failure to contain the pandemic. Systematic testing and data collection and sharing, rather than information blackout, can help officials understand the scope of the pandemic and tend to the most urgent needs of the prisons. Iran can make social distancing in prisons easier through massive releases, including of political prisoners and human rights defenders. It can lift administrative obstacles such as high bail amounts that prisoners cannot pay, or politically motivated obstacles such as those that led to a mass hunger strike in Greater Tehran Prison on August 16 by 72 men arrested during the November 2019 protests. The hunger strike ended on August 18 after prisoners were threatened with prosecution for additional crimes and prison officials promised to consider their grievances; nonetheless, these prisoners' demands remain valid and should be widely heard:

“... The bottom line is that none of us are criminals, and it is our right to protest. The criminals here are the people behind the price increases and the catastrophic state of the economy. We have demanded our rights, and the rights of people to whom harm has been done. We demanded life, and have been condemned to a gradual death in this place of exile: a place lacking basic facilities for human life. Given the coronavirus outbreak and the extreme crowding and congestion which prevents social distancing, the state of hygiene in the prison is even more dangerous than before: the lives of thousands are in danger. And in light of the fact that even the judiciary leadership has agreed to temporary leave for us; though Amin Vaziri, the Assistant prosecutor and Prosecutor’s

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144 Mass testing of the prison population in Ouazzat after the first cases were detected (Medias24, April 23, 2020, https://www.medias24.com/les-prisons-marocaines-en-proie-au-coronavirus-9731.html).
147 See for example the prison administration’s cooperation with the independent Moroccan Observatory of Prison: http://omdp.org.ma/en/
Office representative overseeing political prisoners [in Evin], has objected to this emergency leave, which could save our lives.”149

ABC is not in a position to fully investigate the impact of sanctions on the fight against COVID-19. However, it is clear that the decision not to imprison individuals for petty crimes or crimes that are not recognized under international law, or to release prisoners convicted of non-violent crimes and those with pre-existing health conditions or detained in structures where their health cannot be safeguarded, is an internal policy decision unrelated to trade or banking restrictions. It is a political decision and depends solely on Iranian leaders’ will. The possibility of alternative sentences to decrowd prisons150 has not made a significant difference over the years because of the justice system's punitive outlook and the fact that many judges ignore the judiciary's directives, according to prison officials,151 and tend to favor imprisonment. A substantial reform of criminal law, a much-needed step repeatedly called for by experts and prison officials, is today more urgent than ever. The pandemic should be a wake-up call for Iranian officials and lawmakers to take the need for structural reforms seriously; but they should not wait for structural reforms to address dangers that threaten citizens right now.

Prisoners are more vulnerable than the general population due to their confinement and dependence on the state. Immediate, concrete, and measurable steps are needed to protect the health and lives of those deprived of liberty as well as prison staff. The most immediate need is a significant reduction of the number of prisoners, without which prevention and containment policies, in particular ensuring physical distancing, will fail. By releasing these prisoners, many of whom do not belong in jail, and ensuring the release into safety of homeless drug users they regularly imprison, Iran will not only abide by its international human rights obligations, but will also take a burden off the limited prisons budget and help improve the conditions for remaining incarcerated people. COVID-19 has already spread in

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prisons and endangered the health and life of tens of thousands of prisoners. If authorities allow
prisons to become hot spots for the virus, it will inevitably spread back into local communities.

Iran has ratified the UN Conventions on Civil and Political rights and on Economic, Social, and Cultural
rights, both of which require it to not arrest individuals for crimes not recognized under international
law and to protect the health and life of individuals deprived of liberty. The Committee on Economic
Social and Cultural rights has stressed that sanctions and economic hardship do not diminish the
sanctioned state’s obligations “to provide the greatest possible protection” for the rights of each
individual living within its jurisdiction. Iranian officials can and must do more to shield the prison
population and prison staff from harm. They should at a minimum allocate sufficient resources to
prisons, as repeatedly requested by Prison officials, and allow the implementation of preventive
measures as per the WHO recommendations and the Judiciary's own directives, such as:

- daily and thorough disinfection,
- ensuring that essential personal hygiene items such as soap and sanitizer are made available
  at no cost and in sufficient quantities to all prisoners,
- systematic testing and monitoring of prisoners,
- provision of proper medical care inside and outside prisons to prisoners who are infected, and
- allowing independent monitoring and health assessment by human rights groups and civil
  society.

Most importantly, they should release prisoners in sufficient numbers and avoid imprisoning
individuals for petty and minor crimes and for crimes that are not recognized under
international law to enable prisoners to keep sufficient distance between them and avoid mass
infections. The international community should hold Iran to account for its reckless disregard of the
rights of prisoners, and demand transparency and independent access to prisons to monitor prison
conditions before this public crisis devolves any further.

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152 Committee on Economic, Social, and Cultural Rights, “General Comment 8,” December 12, 1997,
https://www.iranrights.org/library/document/3763
Prisoners of conscience and human rights defenders do not belong behind bars

#SETTHEMFREE