Situational analysis of the pathways to social reintegration for offenders and drug-dependent persons in the Maldives 2022
Transparency Maldives, the National Chapter of Transparency International in The Maldives is a non-partisan organization that promotes collaboration, awareness and undertakes other initiatives to improve governance and eliminate corruption from the daily lives of people. Transparency Maldives views corruption as a systemic issue and advocates for institutional changes that will punish and prevent corruption.

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Inadequate social reintegration has been a major long-standing issue in the Maldives. It is, however, a crucial element of preventing crime, building resilience, and promoting safe communities. Situational Analysis of the Pathways to Social Reintegration in Maldives for Offenders and Drug-Dependent Persons seeks to provide a comprehensive understanding of the current pathways to social reintegration in the Maldives.

Overall, the findings suggest there are no targeted and comprehensive social reintegration programmes for adult offenders or for children in conflict with law and drug dependent persons. The report, inter alia, also shows:

• Opportunities for diversion away from the criminal justice system and alternatives to imprisonment are rare and even the limited opportunities are not implemented effectively.

• There are several institutional challenges such as lack of interagency coordination, shortage of qualified personnel, budget constraints, and lack of decentralised services that are barriers to providing social reintegration services.

• Adult offenders, children in conflict with law, as well as drug dependent persons face several personal and socio-economic challenges including: low levels of education, mental health issues, unfavourable family environments, stigma, lack of employment, lack of adequate housing and poverty.

• Services in the area of social reintegration are direly lacking for both those in custody as well

The report provides several invaluable recommendations, which Transparency Maldives endorses and believes will go a long way in addressing the gaps in social reintegration in the Maldives.

Transparency Maldives is grateful to the many government agencies who extended support to this research. TM also appreciates the work of the research team. We acknowledge with appreciation the generous funding by USAID to this research project. We also acknowledge the feedback and comments of many people to the draft of the report. Finally, I would like to note with gratitude the hard work of all the staff of TM who made this research project a success.

Asiath Rilweena – Executive Director

Transparency Maldives
Executive Summary

Social reintegration is a necessary component of any comprehensive strategy to prevent crime and a crucial element to build more resilient, safe communities. The goal of reintegration initiatives should be to reduce social alienation and the likelihood of recidivism. The primary objective of social reintegration programmes should be to provide offenders with the assistance and support that they may need to desist from crime, to successfully reintegrate into the community, and to avoid a relapse into criminal behaviour. According to the United Nations Office on Drugs and Crime (UNODC), such programmes should at least include 3 core elements: (a) prison-based rehabilitation programmes; (b) reintegration and aftercare programmes delivered upon release; and (c) non-custodial, community-based programmes.

The purpose of the study is to understand the current pathways to social reintegration in the Maldives and provide recommendations to facilitate effective social reintegration for adult offenders, children in conflict with law, and drug dependent persons. The study
includes a situation analysis on the current policy and practice of reintegration in the Maldives, with special focus on mapping the following aspects:

1. Description of offender reintegration laws and policies in the Maldives

2. Institutional challenges and obstacles that may prevent inter-agency cooperation or the provision of effective supervision and assistance to adult and children in conflict with the law

3. The extent to which Maldives meets relevant international standards and norms in the treatment of prisoners and prison management

4. Social, economic, and personal challenges that adult and children in conflict with law and drug-dependent persons confront with that tend to become obstacles to their social reintegration

5. Social reintegration programmes currently available for offenders and special categories of offenders: children in conflict with the law, women offenders, offenders with drug use disorders, prisoners released after extended periods of pretrial detention, violent offenders, and members of criminal gangs

6. Effectiveness of existing reintegration programmes providing adult and juvenile offenders and drug-dependent persons with the assistance they need to desist from crime, to successfully reintegrate into community, and to avoid relapse into criminal behaviour

7. The challenges in accessing existing social integration programmes

The research methodology adopted for this situation analysis involves a qualitative mixed methods approach. As a key primary data collection source, qualitative interviews based on semi-structured interviews were used. An interview guide (questions) was developed during the inception phase, based on the preliminary review of relevant literature to identify the key issues and challenges in reintegration based on the experience of other comparable societies (see Annex). In addition, the interview questions were fine-tuned to ensure their effectiveness in gathering the required data within a culturally sensitive theme.

This study includes interviews with relevant stakeholders within the state, as well as the perspectives of a cross-section of inmates, children in conflict with law, and drug-dependent persons, to better understand the current issues and gaps in providing reintegration pathways in the Maldives.
The findings of this study are based on a desk review of legislations, policies, and relevant literature, as well as primary data collected through Key Informant Interviews (KII).

Overall, analysis of data from interviews with stakeholders, service providers and inmates/ residents of prisons and rehabilitation facilities indicate that there are no targeted and comprehensive social reintegration programmes for adult offenders in general or for children in conflict with law and drug dependent persons. Opportunities for diversion away from the criminal justice system and alternatives to imprisonment are rare and even the limited opportunities are not implemented effectively. The research identified several institutional challenges such as lack of interagency coordination, shortage of qualified personnel, budget constraints, and lack of decentralised services that are barriers to providing social reintegration services.

The research also showed that adult offenders, children in conflict with law, as well as drug dependent persons face several personal and socio-economic challenges including: low levels of education, mental health issues, unfavourable family environments, stigma, lack of employment, lack of adequate housing and poverty. The findings also highlighted that services in the area of social reintegration are direly lacking for both those in custody as well as those under drug treatment programmes. Currently for those in custody, including inmates who have been imprisoned for long periods of times, little to no focus is given on preparing them for release and reintegration back into the society.

Based on the findings of this Situational Analysis, the following recommendations are made to improve the social integration services to offenders and drug dependent persons.
Management of rehabilitation and reintegration services

- Strengthening the management structure and process of the rehabilitation and reintegration services across all relevant agencies is essential for ensuring the availability and accessibility of quality service to clients. To this effect, there is an urgent need to train relevant staff, conduct further research into social reintegration options, build data management processes, develop new diversion programmes, create work opportunities, and strengthen after-care services.

Legislative and regulatory reforms

- Strengthening legislative provisions, including a focus on restorative justice in the penal code and criminal procedure, emphasis on alternative sentencing, special alternatives to pre-trial detention for children, strengthening clemency, parole and probation, and treating drug addiction from a preventive perspective are essential elements of the required reforms in the area. In addition, developing a national strategy on social reintegration as an overarching policy guideline is important.

Budgeting and resourcing

- Providing adequate resources and budget for rehabilitation and reintegration efforts is fundamental for its success. In particular, there is an urgent need to invest in preventive interventions, particularly in education and health systems, as well as in the development of human and technical capacity for the effective management of rehabilitation and reintegration programmes.

Community engagement and empowerment

- Building public awareness, promoting community-based interventions, promoting familial ties, reducing stigmatisation and social exclusion, and building the social reintegration interventions through strong collaboration across agencies and communities from a whole-of-society perspective are needed to strengthen rehabilitation and social reintegration efforts in the country.
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- Management of rehabilitation and reintegration services
- Budgeting and resourcing
- Community engagement and empowerment

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## List of Acronyms

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<tr>
<td>AGO</td>
<td>Attorney General’s Office</td>
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<tr>
<td>CPC</td>
<td>Criminal Procedures Code</td>
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<tr>
<td>CRC</td>
<td>Convention of the Rights of Children</td>
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<tr>
<td>CTCC</td>
<td>Correctional Training Centre for Children</td>
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<tr>
<td>DJA</td>
<td>Department of Juvenile Justice (previously JJU)</td>
</tr>
<tr>
<td>ETCC</td>
<td>Education and Training Centre for Children</td>
</tr>
<tr>
<td>HRCM</td>
<td>Human Rights Commission of Maldives</td>
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<tr>
<td>JJA</td>
<td>Juvenile Justice Act</td>
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<tr>
<td>JJU</td>
<td>Juvenile Justice Unit</td>
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<tr>
<td>MCS</td>
<td>Maldives Correctional Service</td>
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<tr>
<td>MOHA</td>
<td>Ministry of Home Affairs</td>
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<tr>
<td>NDA</td>
<td>National Drug Agency</td>
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<td>NPM</td>
<td>National Preventive Mechanism</td>
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<td>PAC</td>
<td>Prison Audit Commission</td>
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<td>SOE</td>
<td>State Owned Enterprise</td>
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<td>ToC</td>
<td>Theory of Change</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNGA CCJS</td>
<td>United Nations Guidelines for Action on Children in the Criminal Justice System</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>UNODC</td>
<td>United Nations Office on Drugs and Crime</td>
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<td>SMRTP (Mandela Rules)</td>
<td>United Nations Standard Minimum Rules for the Treatment of Prisoners</td>
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The rehabilitation of offenders and their successful social reintegration into society should be among the basic objectives of any criminal justice system. The direction given by the international human rights norms as well as the criminal justice standards emphasises the importance of interventions to support the social reintegration of offenders as a means of preventing further crime and protecting society. Therefore, provision of meaningful rehabilitation programmes in prisons is crucial to achieving the ultimate purposes of a sentence of imprisonment, namely, to reduce recidivism and to improve public safety.

Reintegration is a necessary component of any comprehensive strategy to prevent crime as well as a crucial element to build more resilient communities and reduce re-offending. Reintegration initiatives, ranging from personal empowerment to the development of employment opportunities, should begin when the inmate or drug-dependent persons in prison is still in custodial, detention or rehabilitation settings to prepare for release. The goal of such initiatives should be to reduce social alienation
and the likelihood of recidivism. Reintegration initiatives should also extend to communities to promote social cohesion and reduce negative perceptions of former inmates and drug-dependent persons.

Significant gaps exist in the criminal justice system of Maldives regarding sentencing and rehabilitation of offenders. Existing research shows that recidivism is high in the Maldives. According to a recent study by the United Nations Development Programme (UNDP) (Youth Vulnerability in the Maldives, 2019), the prison population is made up mostly of recidivists. There are only about 100 first-time offenders annually. The report also noted that most inmates were aged 30 and eighty percent were serving sentences for drugs. Prison overcrowding and lack of resources for rehabilitation are identified as the reason formerly incarcerated people relapse and re-offend. Moreover, there is inadequate attention given to social reintegration of offenders due to a long history of retributive/punitive justice in the country’s criminal justice system.

1.1 Objectives and purpose of the situation analysis

The purpose of the study is to understand the current pathways to social reintegration, and recommendations to facilitate effective social reintegration for adult and juvenile offenders and drug dependent persons. The study will focus on developing a situation analysis on the current policy and practice of reintegration in the Maldives, with special focus on mapping the following aspects:

1. Description of offender reintegration laws and policies in the Maldives
2. Legal and regulatory challenges and obstacles that may prevent inter-agency cooperation or the provision of effective supervision and assistance to adult and juvenile offenders in prisons and juvenile detention centres
3. The extent to which Maldives meets relevant international standards and norms in the treatment of prisoners and prison management
4. Social, economic and personal challenges adult and juvenile offenders and drug-dependent persons confront that tend to become obstacles to their social reintegration
5. Social reintegration programs currently available for offenders and special categories of offenders: children in conflict with the law, women offenders, offenders with drug use disorders, prisoners released after extended periods of pretrial detention, violent offenders and members of criminal gangs
6. Effectiveness of existing reintegration programs providing adult and juvenile offenders and drug-dependent persons with the assistance they need to desist from crime, to successfully reintegrate into community, and to avoid relapse into criminal behaviour
7. The challenges in accessing existing social integration programs

With the above objectives and focus, the study will be able to draw out the gaps in current policies and practices of reintegration from multiple perspectives of law, regulation, service provision, as well as the socio-economic and personal challenges faced by the service-users (offenders). The situation analysis will then provide recommendations on how the current situation can be ameliorated, based on evidence from the international good practice in the area.
2. Background and context in Maldives

The Maldives has long grappled with serious issues in its treatment of offenders including children in conflict with law and drug-dependent persons. In 2003, protests following the torture and death of 19-year-old Hassan Evan Naseem, an inmate serving for a drug offence since the age of 16 in Maafushi prison led to a series of political reforms including a new Constitution and the country’s first ever democratic elections in 2008. Since then, the Criminal Justice System in Maldives has undergone a series of reforms with the enactment of key legislations, including a new Penal Code in 2014 and a Criminal Procedures Code in 2016. However, the country continues to have one of the highest prison population rates in the entire continent of Asia, only surpassed by Turkmenistan and Thailand. Recidivism or re-offending has been highlighted as a major challenge, especially among those incarcerated for drug offences, for at least the past two decades.

The first National Criminal Justice Action Plan published by the Government of Maldives in 2004 noted that lack of social reintegration led to “increased levels of re-offending and high social costs”. The plan set out several policy goals and strategic actions to address this issue including development of guided pathways for social integration such as aftercare centres, and assistance in finding employment. Despite this, lack of availability and accessibility of effective social reintegration programmes has persisted over the years. A 2018 study by UNDP on Youth Vulnerability stated that lack of resources for rehabilitation of offenders have produced a generation of recidivists.

In May 2019 the Prison Audit Commission (PAC) published a Prison Audit Report. The report highlighted the dire conditions of 11 prisons (including pre-trial detention and remand centres) in Maldives, noting that none of them met the standards set by the ‘Mandela Rules’ (The United Nations Standard Minimum Rules for the Treatment of Prisoners). The report further highlighted that both prison officers as well as inmates believed...
the existing pathways for social reintegration including for those released on parole were ineffective due to rampant corruption, lack of proper rehabilitation services, and loopholes in proper evaluation of prisoners’ condition before release. 7

Reintegration pathways for children in conflict with law have also been inadequate and marred with problems in Maldives. Although the Maldives ratified the UN Convention of the Rights of Children (CRC) in 1991, and the 2008 Constitution of Maldives affords special protection and assistance to children and young persons, 8 efforts to safeguard rights of children in conflict with law have been slow. Until recently children in conflict with law were charged under the ‘Regulation on Conducting Trials, Investigation and Fair Sentencing of Juvenile Offences’ 9 which allowed children as young as 10 years of age to be held criminally responsible for offences ranging from drug abuse to haddoffences including fornication and treason. 10 The Regulation gave discretion for judges and magistrates to allow child offenders who are sentenced to jail or house arrest to be detained in a Juvenile Detention Centre and to take part in reintegration and rehabilitation programmes laid under Section 19 of this regulation, as per guidance of the court and the Juvenile Justice Unit (JJU). 11 However, in practice, children were detained in the same facilities as adults, although separated from adult offenders. 12

One of the longest running Child Detention and Reintegration facilities in Maldives was established 1979 named Islahiyya (reformatory) 13, which was later known as the Education and Training Centre for Children (ETCC). This centre was not for children in conflict with law per se but detained children ranging from those neglected by family to children perceived to have behavioural problems. 14 In 2015, the Human Rights Commission (HRCM) noted that no reintegration programmes (including education, vocational, or psychological) were conducted for the children in the facility, 15 which was officially closed in 2017.

Similarly, a Correctional Training Centre for Children (CTCC) was opened in 2010 under the Juvenile Justice Unit to carry out reintegration programmes for children in conflict with law. 16 However, a study conducted by UNICEF and the Human Rights Commission of Maldives (HRCM) noted that “none of the children who are at the facility have been charged with a crime, let alone convicted of one.” 17 The State acknowledged the centre was used as a “administrative detention” facility only for boys who “have been arrested on repeated occasions, on suspicion of having committed offences”, but claimed that the reintegration programmes at the CTCC were successful, despite 20%
of the boys who completed the programmes relapsing into antisocial behaviour and crime.

According to the registrar of the Juvenile Court, between 2010-2015, 89 children were enrolled in rehabilitative programmes, of which 11.2% successfully completed the programme and were released with the remainder of their sentences revoked. The 2019 Prison Audit stated that there were 8 children (6 in remand) in the Asseyri Jail and 1 in Dhoonidhoo Police Custodial. At the time of this research, out of 233 inmates in the Maldives Correctional Service (MCS) – Himmafushi Asseyri Prison, there were three children.

After several years of delay, a new Juvenile Justice Act as well as a reconstituted Child Rights Act was ratified in 2019, clearing the way for better safeguarding of rights of children, including better reintegration efforts for children in conflict with law. However, there are still gaps in the effective implementation of these provisions.

10 Ibid.
15 Ibid.
16 Sun Online <https://sun.mv/1678>.
20 Commission for Prisons Audit (n 9).
3. Methodology of the situation analysis

3.1 Methodological approach

Situational analysis is an approach to research using a grounded theorising methodology to identify and describe social worlds and arenas of action and by representing complexity in the reality of context. As such, a situation analysis should best be designed to help consider multiple connections and relationships between elements of influence within the researched phenomenon – in this case, the possibilities and availability of reintegration support in the correctional service setting of Maldives.

The research methodology adopted for this situation analysis involves a qualitative mixed methods approach. The data and its analysis were structured to map all relevant legislative, regulatory, human, and non-human elements of the rehabilitation opportunities/ pathways available in the Maldivian criminal justice system. Using various approaches to discursive positioning of individual experience, the methodology employed substantive theorising and storytelling to reflect the underlying
structure or mechanism of action that inmates experience throughout their journey of rehabilitation in the prison system.

### 3.2 Desk review

The research involves analysis of legal and other policy documents relevant for social reintegration. This component targeted identifying existing legal and policy provisions and potential gaps as well as analysis of the extent to which the Maldives meets relevant international standards and norms in the treatment of inmates, prisoners, and prison management (including Standard Minimum Rules – Mandela Rules). The latter component was reviewed considering existing assessments being done by relevant UN agencies and utilised international/UN tools for assessments.

An indicative list includes the following:

- Law no.12/2016, Criminal Procedures Act
- Law no. 2/2010, Clemency Act
- Law no. 17/2011, Drug Act
- Law no. 13/2013 Anti-Torture Act (clause 35, 43 etc are relevant)
- Law no. 0/2014 Penal Code (Section 3: Sentencing Guideline)
- Law no. 18/2019, Juvenile Justice Act
- Law no. 9/91 Child Rights Protection Act
- 2017/R-76. Regulation on Prosecution Procedures
- 2020/R-30 Regulation on Re-Integration for Children Under State Care
- 2020/R-70 General Regulation on Protecting Child Rights
- 2020/R-72 Regulation on Procedures re: Child-related cases
- 2020/R-86 Regulation on Parole
- 2022/R-13 ‘Maldives Correctional Services’ Regulation on Implementing Non-Custodial Sentences’
- 2015/R-2 Regulation on Administration of Jails
- 2020/R-101 Juvenile Justice Regulation
- 2014/R-387 Regulation on Operating Rehabilitation Centres
- 2014/R-17 Regulation on Social Exclusion of Children for Rehabilitation

### 3.3 Stakeholder analysis

This study includes Key Informant Interviews (KII) with relevant stakeholders within the state, as well as the perspectives of a cross-section of adult offenders, drug-dependent individuals, and children in conflict with law, to better understand the current issues and gaps in providing reintegration pathways for offenders in the Maldives. As a key primary data collection source, qualitative interviews based on semi-structured interviews were used. An interview guide (questions) was developed during the inception phase, based on the preliminary review of relevant literature to identify the key issues and challenges in reintegration based on the experience of other comparable societies (see Annex). In addition, the interview questions were fine-tuned to ensure their effectiveness in gathering the required data within a culturally sensitive theme.

The study used a review matrix (see Annex 2) to establish the level of knowledge and
appreciation for social reintegration among relevant state agencies, identified existing reintegration programmes and their impact, and areas where improvements are needed. The full list of Key Informant Interviews conducted is provided in Annex 3.

3.4 Data cleaning and analysis

Given the qualitative nature of the data collected, all interviews were transcribed in the first stage. The transcribed data were analysed using standard coding and categorisation. Data analysis and report-writing were carried out simultaneously to better integrate the findings to the report narrative. The research team also developed a matrix to measure effectiveness of reintegration programmes being implemented by state actors, considering existing frameworks used in other similar contexts for effectiveness assessment.

3.5 Ethical considerations

Given the social and political sensitivities surrounding research with and on the criminal justice system in general and prisoners in specific, ethical principles of research were given utmost attention in this study. The utmost care was taken in conducting interviews with convicts and past inmates, gaining their informed consent, and maintaining confidentiality and anonymity.

Clear and transparent processes for ethical conduct of this research were communicated to all relevant parties before commencing the fieldwork. Any required ethical or administrative clearances were sought in the initial stage of the fieldwork process. All research personnel, including enumerators and researchers, were given the requisite training and orientation towards conducting all research activities with the ethical requirements.
4. Conceptualisation & Theory of Change

4.1 Conceptualising Social Reintegration

Social reintegration is often understood as services available for criminal offenders within the criminal justice system to support their reintegration back to society, after imprisonment or detention. However, reintegration can also be conceptualised to include all efforts undertaken from the time of arrest to divert the person away from being prosecuted and sentenced to imprisonment. This could include efforts such as enabling a restorative justice process or taking non-custodial measures. A broader definition of social reintegration is especially useful if reintegration is viewed as the ultimate goal of the criminal justice system. International standards such as the Tokyo Rules, for example, promote using social reintegration measures as part of alternatives to incarceration and to encourage greater community involvement in addressing criminal justice issues such as treatment of offenders. Similarly, analysing non-custodial social integration measures are also important given its significance in addressing juvenile delinquents. The United Nations Guidelines for Action on Children in the Criminal Justice System (UNGACCJS), states that “the placement of children in closed institutions should be reduced and considered only as a last resort.”

The UNODC categorises social reintegration programmes into 3 intervention areas: (a) prison-based rehabilitation programmes; (b) reintegration and aftercare programmes delivered upon release; and (c) non-custodial, community-based programmes. Therefore, for the purpose of this study, it is recommended that this broader definition of social reintegration is used, encompassing both non-custodial measures including actions to divert away from being prosecuted to custodial measures taken during imprisonment/detention and reintegration efforts post-release.

One of the key reasons for promoting social reintegration is to stop the vicious cycle of offenders being stuck in the criminal justice system due to challenges adapting to society and
resorting to re-offending. These challenges may include personal difficulties such as mental health struggles resulting from stigmatisation and social exclusion, or obstacles due to socio-economic issues such as difficulty finding employment. In the context of Maldives, for example, offenders often struggle to find jobs due to criminal records. Reintegration is also a key objective of imprisonment as stated by the International Covenant on Civil and Political Rights (ICCPR). Article 10 of the ICCPR states that the “penitentiary system shall comprise treatment of prisoners the essential aim of which shall be their reformation and social rehabilitation.”

4.2 Working Theory of Change (ToC)

In order to conceptualise the various dynamics and channels of effect in legislative and institutional interventions geared towards socially reintegrating offenders and taking them away from the possibility of relapse into the cycle of offence, a working Theory of Change (ToC) is developed. This ToC considers a simplified, yet holistic intervention aimed at reducing the possibility of recidivism of offenders, drug dependent persons and children in conflict with law.

The main premise of this ToC is built on the primacy of reintegration support at all stages, and that the support helps the offenders modify their behaviour and attitudes, in order to achieve lasting transformations.


25 United Nations Office on Drugs and Crime (UNODC) (n 1).


5. Main Findings

The findings of this study are based on the legislative and regulatory analysis as well as the primary data collected through key informant interviews. In line with the objectives of the situation analysis, mapping is done on seven key aspects related to reintegration policy and practices, which are: 1) Legal and policy environment, 2) Institutional challenges to effective social reintegration, 3) Compliance with international standards, 4) Personal and Socioeconomic challenges to reintegration, 5) Social reintegration programmes currently available, 6) Effectiveness of existing programmes, and 7) Challenges in accessing the existing programmes.

The three main categories of social reintegration programmes are: (a) prison-based reintegration programmes; (b) reintegration and aftercare programmes delivered upon release; and (c) non-custodial, community-based programmes. In this analysis, all these three approaches have been explored in the context of children in conflict with law, drug dependent people and adult offenders in the Maldives.
5.1

**Mapping the Legal & Regulatory Framework**

This section reviews the laws, regulations, and policies as well as the inputs from stakeholders to identify the existing legal and regulatory provisions for reintegration of offenders, including children in conflict with law, drug dependent persons and other offenders. The analysis shows that there are several provisions in the current legal and regulatory environment that can be effectively operationalised in order to provide more efficacious rehabilitation and social reintegration support to offenders. However, at the same time, there are also serious gaps in legislation that need to be addressed, in particular about specific provisions of non-custodial-restorative justice-based programmes, provisions for diversion and alternative sentencing and more specific institutional arrangements for post-release support.

**Legislative and regulatory focus on restorative justice**

Restorative justice is based on the principle that the most effective responses to crime are those which hold offenders accountable for their behaviour in ways that reintegrate them into society rather than increase their sense of isolation and stigma. The objective is to help offenders understand the consequences of their actions and mend their relationships with others in the community, including their victims. 28 Restorative justice intervention helps offenders to take responsibility for their harmful behaviour in a meaningful way; to gain insight into the causes of their behaviour and its effects on others; to change their behaviour and desist from crime; and to be accepted back into their community. 29

Based on the discussions with key stakeholders, it can be discerned that the existing legal and regulatory provisions for restorative justice and support for reintegration of offenders is limited. Apart from the Juvenile Justice Act there are no legislations or regulations that promote the principles of restorative justice in the Maldives.

**Diversion from Prosecution**

The Penal Code and the Criminal Procedures Code (CPC) are the two main legislations governing the criminal justice system in the Maldives. However, there are several other legislations such as the Juvenile Justice Act and the Drug Act which are relevant when assessing social reintegration programmes.

The CPC sets procedural standards concerning investigation, prosecution, and adjudication of all criminal cases. There are several clauses on the CPC which are relevant for analysing social reintegration measures. Chapter 11 of the CPC provides for diversion from being prosecuted through making agreements for advising/counselling. 30 Article 97 (a) of the CPC empowers the Prosecutor General to conclude a case without filing a charge to persons who confess to the crime during investigation in order to support the offender to divert away from committing such a crime again, and to reintegrate back to society and lead a good life. However, these alternatives to being prosecuted are only for limited offences, and only for first time offenders whose offence does not

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29 Ibid.
amount to a sentence of more than 1 year of imprisonment. Under Article 100 & 101 of the CPC, if the PG decides to not prosecute and resort to advising/counselling, an agreement must be made between the offender and the PG and if the individual commits any other crimes within 3 years of signing the agreement, the person can be prosecuted for committing the offence that he has been advised for in addition to the second offence. Article 32 to 44 of the Regulation on Procedures of Prosecution (R76-2017) further elaborates the process of using this power of the PG. 31 There are no specific provisions in this act which indicate or direct the judges to passing down a sentence targeted towards rehabilitation of the offender.

**Alternative sanctions and measures**

Apart from these legal mechanisms for diversion during investigation and prosecution, there are also alternatives to incarceration for those who are charged with criminal offences. Part III of the Penal Code includes the Sentencing Guideline which provides for several non-custodial sentences including fines, house arrest, community services, probation, and rehabilitation. 32 These non-custodial sentences embody social reintegration as a principle for offenders who are not considered a danger to society. The Sentencing Guideline also provides for judges to sentence offenders to be put under an Intensive Supervision programme by an officer of the state, to help advance the offender’s rehabilitation (Section 1005, (e)). Similarly, probation which involves a period of release subject to restrictions, including requiring periodic meetings with a supervisory officer, regular drug or alcohol tests, regular psychological counselling, or any other minimally invasive requirement or restrictions that will promote the safety of others, advance the offender’s rehabilitation is also recommended (Section 1005, (f)). However, it must be noted that these non-custodial measures are sometimes given on top of or as part of custodial sentences. For example, the rehabilitation programmes under Article 1202 (f) are to be given for offenders only during or after imprisonment.

**Provisions for early/conditional release programs**

The main legislation governing reintegration programmes for offenders who are incarcerated is the Maldives Jail and Parole Act (14/2013). Article 62 of this act includes reintegration programmes as part of basic services available to all prisoners. 33 However, neither the Act nor the Regulation made under this Act (R-79/2020) specify the process or types of reintegration programmes that should be available for prisoners. Similarly, the Regulation on Parole (R-86/2020) grants parole to prisoners and participates in various reintegration programmes as determined by the Parole Board, but it is unclear what these programmes must include. 34

The Prisons and Parole Act 35 specifies rules for the management of jails and procedures for incarceration, rehabilitation and parole as well as rights and benefits due to inmates. It also provides for the establishment of an independent Maldives Correctional Service (MCS) to oversee and manage jails. One of the

core mandates of the MCS is to help offenders to reform and encourage them to return to the society as a worthy citizen after being released from the custody. In the Act, there is a chapter dedicated to prisoners’ rehabilitation (Chapter 11). The largest component mandated to MCS under this legislation is rehabilitation and reintegration back into communities.

Conditional release is not mandatory in the criminal justice system in the Maldives, but there is a guideline for parole under the Prisons and Parole Act (2013). The shortest sentence that could be eligible for parole is 6 months; however, there is no cap on how long a sentence should be to be eligible for parole. Prisoners sentenced for certain kinds of crimes, for example, child sexual abuse and murder, don’t get the opportunity for parole. Normally if a prisoner has completed 2/3 of the sentence, they can be considered for parole. Other factors considered by the parole board include whether they have other pending cases, intelligence reports and their behaviour in jail.

Regarding the minimum period that prisoners must serve to become eligible for discretionary conditional release, there are no specific provisions in the statute and the stakeholders did not identify any practices in this regard. However, in cases of drug abuse, offenders who have completed the treatment prescribed in the sentence are deemed eligible for early release. Nonetheless, a common problem is that many offenders (particularly those who are on drug charges) have multiple convictions and therefore completing one sentence does not make them eligible for release.

Clemency

The Clemency Act (Law no. 2/2010) prescribes the procedure concerning clemency of individuals convicted of criminal offences. It also prescribes a procedure for clemency of a person convicted of a criminal offence, based on their age, health, medical treatment they are currently undergoing, their status and circumstance, or from a humanitarian perspective, as well as pardons for offenders under clemency.

Article 4 of the Clemency Act provides for 5 categories of clemency.

1. Pardon of the penalty imposed on a person for the committed offence
2. Suspension of the penalty imposed on a person for the committed offence, for a specified period
3. Remission of the penalty imposed on a person for the committed offence
4. Where the law provides the option for lighter penalties for the committed offence, alter the penalty imposed to such lighter type of penalty
5. Where the penalty imposed for the committed offence is the payment of a sum of money, waiver of the obligation for payment, or reduction of the amount payable.

The Clemency Act does not provide further details on the process of providing opportunities for rehabilitation and reintegration. However, among the factors to be considered to grant pardons for ongoing sentences (Article 24), efforts made to get rehabilitated is identified as one of the conditions for granting pardons.

33 See Article 14 of R-79/2020: https://corrections.gov.mv/regulations
34 See Article 10 of R-86/2020: https://corrections.gov.mv/regulations
35 Ibid., Article 102-140.
Other legislations: Special Categories of offenders

Apart from these general laws and regulations governing social reintegration, there are some special legislations that govern reintegration programmes for certain offences or special categories of offenders such as drug-dependent persons and children in conflict with law. This includes the Drug Act (Law no. 17/2011) which allows for treatment of drug dependent people through rehabilitation orders instead of incarceration. The Drug Act recognises three main categories of drug offences: the use of drugs, peddling, and trafficking of drugs. It promotes reintegration of those addicted to drugs through rehabilitation as a key goal.

Similarly, the newly passed Juvenile Justice Act (Law no. 18/2019) also provides opportunities for children in conflict with law to be diverted away from being prosecuted. Under this act, the minimum age of criminal responsibility has been set to 15 years of age. The act also obliges the state to invest in services to prevent children to come in conflict with law and ensure care is available for children below the age of 15 years who are in danger of resorting to crimes. Furthermore, in accordance with the principles of restorative justice for children in conflict with the law, a diversion system is outlined in Chapter 8 of the Juvenile Justice Act (JJA). Article 35 of the act states that under the juvenile justice system, diversion programmes should be prioritised instead of proceeding to file charges and Article 37 gives powers to investigative authorities as well as the Prosecutor General to enrol children in conflict with law in a diversion programme before proceeding to a trial. There are several different steps that can be taken under the diversion system to address children in conflict with law, ranging from seeking forgiveness from the victim, group counselling, behavioural monitoring etc. The law states that the purpose of the diversion system is to allow for social reintegration of children in conflict with law.

The Child Rights Protection Act (Law no. 9/91) provides for the rehabilitation and upbringing of children who are in conflict with the law, and further recommends special procedures to deal with at-risk children or those who are exploited and giving preference to rehabilitation without punishment. The new Child Rights Protection Act (Law no. 19/2019) strengthens the provisions for protecting the rights of the child, including those who are in conflict with the law. The law gives special emphasis on providing guidance for children to be removed from environments that could lead them to crimes.

Special Provisions Act to Deal with Child Sex Abuse Offenders (Law 12/2009) prescribes offenders to participate in a rehabilitation or treatment programme prescribed by the court or the agency mandated to look after prisoners. In the same Act, whether the offender has participated or has requested to participate in a rehabilitation programme in order to reform, or if participated in a similar programme, the level of participation in the programme is specifically considered in issuing an order to monitor. However, apart from these, there are no specific provisions related to reintegration or rehabilitation of offenders under this Act.

The Anti-Torture Act also states reintegration programmes should be made available for those who have committed acts of torture under the guidance of the Human Rights Commission, the Attorney General’s Office, and the Ministry of Health.

The most recent legal document concerning social reintegration and rehabilitation services was made under Chapter 8 and 9 of Anti-Terrorism Act (Law no: 32/2015). Published in April 2021, the regulation (R58/2021)
facilitates rehabilitation and reintegration for those who commit/are at risk of committing acts of terrorism, including returning foreign fighters and their families. Article 27 of the regulation states that these reintegration services can include psychosocial support, vocational and other educational support, community engagement etc with a view to prevent and counter violent extremism. 47

Post-release Support and Reintegration as a right to former offenders

There are currently no specific legal provisions that create a right for former offenders to demand or request the state for assistance in the process of reintegration. For example, even for children in conflict with law who are released after being in custody, there is no established system to provide necessary support to ensure that they stay out of the crime environment. DJJ indicated that they currently work with children who have prior cases before they turn 18. However, once they turn 18, if they do not have an ongoing case, are of low risk, or are not serving a sentence at that time, they do not work with them any further. The lack of a proper systems to provide post-release support services is identified as a major policy and practice gap by stakeholders.

5.2 Institutional Challenges and Obstacles to Effective Reintegration

The review shows that institutional challenges and obstacles for effective social reintegration interventions in the Maldives can be grouped under 5 areas: a) inter-agency coordination; b) lack of qualified personnel; c) budget and other resources; d) inconsistency of policy; e.g. centralization of services

Inter-agency coordination

Effective coordination among all key stakeholders, including informing and consulting are fundamental for successful implementation of any social reintegration intervention. In the current system in Maldives, a number of key stakeholders – such as the Police, the Prosecutor General's Office, Courts, Maldives Correctional Services, National Drug Agency, Department of Juvenile Justice and several other service providers are part of the broad structure that must work together in order to ensure meaningful opportunities for offenders to reform and reintegrate into the
society. In addition to these core state agencies, involvement and participation of community-based support groups, CSOs, psycho-social support services, and the wider community is also essential. Proper coordination between custodial and non-custodial service agencies, including the parole and clemency systems, must also be included in this coordination structure. Several issues have been identified in relation to inter-agency coordination in the area of rehabilitation and reintegration of offenders.

Institutional arrangements and coordination mechanisms are identified by stakeholders as generally weak, particularly with regards to information sharing between key agencies. For example, according to the Drug Court, delays in completing the required indicative assessments which evaluates the level of drug dependency as well as the treatment option suited for the individual, have created a backlog of cases. “The court noted that due to delays in receiving these assessments which are required for treatment orders, sometimes drug-dependent persons get caught up in other crimes and serve those sentences prior to receiving the necessary treatment.”

According to the Drug Court’s annual report to the National Drug Council, in 2020, the NDA was ordered to make indicative assessments for 348 cases. However, only 12 assessments were done within the 30-day duration required by the court, and the NDA requested extensions for 107 cases.

Stakeholders also noted that in cases where information about an individual is required in relation to Parole applications, there are significant challenges in getting the required information from the relevant agencies.

“These delays are attributed to weak systems of data management at different institutions, as well as the lack of an integrated data management and sharing protocols.”

Similarly, although the Clemency Act provides for a 90-day window for the review process for clemency, some applications take more than a year, due to delays in receiving required information. As a result, prisoners often have to wait long periods of time without knowledge of what is happening to their applications. They have to follow up on their application through multiple agencies such as HRCM, MoHA and the Information Commissioner. To overcome these challenges, according to the Clemency Board they have adopted a system of informing and updating the prisoner’s family the status of their applications. However, this is applied only if the family proactively seeks such information.

Discussions with the Clemency Board also revealed that while the board advises the President on clemency, they do not have any mechanism to monitor those who are released under clemency. “The Clemency Board further elaborated that given the movement of prisoners between different prison facilities, there is a significant information gap in relation to the exact whereabouts of the prisoner at any given time.”

Sometimes the Board only receives information on the location of a prisoner when a specific request is made, because there is no system of sharing this information on a regular basis. Due to gaps in communication and data sharing, there have also been cases in which a prisoner is given clemency by the Clemency Board only to find out that the same prisoner has already been released under parole. According to some stakeholders, the President’s Office also sometimes nullifies a clemency without
explanation and the same prisoner is then released through a parole.

Stakeholders also noted that while institutional focal points are established in each institution, lack of coordination hinders smooth cooperation and communication. The focal points are also often not at the decision-making level, thereby limiting their ability to make timely decisions. Oftentimes, whenever a coordinated decision is required, a meeting with people higher in the hierarchy is required.

Lack of a proper data management system is also a major hurdle, according to several stakeholders. There is inadequate attention to establishing a proper case management system with disaggregated data that can be shared across relevant authorities, including for the purpose of social reintegration. For example, statistical management in DJJ is still done manually by maintaining an excel sheet, which is then referred to for analysis to develop the media reports. Although the DJJ attempted to establish a database system, and has been having these discussions with MoHA, this is not in place as yet. The current system where cases are manually tracked is time-consuming and prone to human error. The MCS stated that their data management systems allow for disaggregated data according to age, type of conviction and crime but the way records are managed currently it is challenging to analyse for key indicators such as recidivism rates. According to the MoHA due to poor record keeping, requests for information regarding inmates are inconsistent. Furthermore, given the lack of information management and sharing between key agencies, it’s difficult to design individualised rehabilitation and reintegration services as case histories are not maintained and shared.

**Lack of qualified personnel**

Lack of technical staff in the field is a serious problem for all service providers. Stakeholders identified that while many service provisions are included in laws and regulations, there has not been adequate attention to increase the resources required to build capacity of professionals in the field. For example, there is a shortage of mental health professionals required to carry out different reintegration programmes such as counselling and therapy services at drug treatment centres, resulting in long waiting lists for such services. The NDA highlighted that given the low compensation and high risks and challenges providing treatment, many professionals are not attracted to the field. It’s especially difficult to find qualified personnel based outside Male’. And although the Mandela rules require special units to be established to support people with mental health issues in custody, in the Maldives, they are mixed in with other prisoners, and the treatment they require is not received. Despite the need and international obligations, there is a significant hurdle in effectively carrying out reintegration and rehabilitation work due to lack of qualified personnel to provide essential mental health care services.

Similarly the Drug Court also stated that since the Drug Act came into force in 2011, although the judges have received judicial procedural training, no specialised training has been provided. Due to this there is a gap in knowledge regarding international best practises and emerging issues regarding drugs and treatments. Stakeholders also noted that due to the nature of the work, sometimes professionals and their families sometimes receive threats which make the field unattractive for some people.

The DJJ stated that implementing programs as per the new Juvenile Justice Act is challenging
due to low capacity and they have to rely on other institutions for some components of their programs, including the Ministry of Education and Ministry of Gender, Family and Social Services.

**Budget and other resources**

Lack of adequate budget and other resources such as infrastructure was also highlighted as a major challenge by stakeholder institutions. According to MoHA and MCS, there is a budget code for rehabilitation and reintegration services, and yearly programmes and activities are included in the budget every year under this code. However, the amount allocated is miniscule (estimated as less than 5% of the MCS budget) given the extensive need for reintegration programmes. The MoHA noted that despite requests to hire more staff to facilitate the psychosocial support systems, they haven’t received adequate budget for this. Currently, the MCS has 2 counsellors based in the head office in Malé serving all the facilities.

Similarly, the Drug Court also stated that currently there is no budget for essential services such as aftercare programmes. The Drug Court highlighted that under the Drug Act, the money and materials confiscated by the state and fines paid by those committing the crimes are to be used for the creation of a Fund to be used for drug rehabilitation and support activities. And although, under this legislation, every year millions of Rufiyaa’s worth of assets have been seized including money from the sale of drugs, according to stakeholders these funds are not allocated for rehabilitation activities.

In terms of other resources, lack of adequate space and infrastructure have been identified as a major challenge by multiple agencies involved in providing reintegration services, including courts, MCS, NDA and DJJ, among others.

For example, currently, the Juvenile Court does not have a counselling room. There is also a lack of space for those attending court hearings and meetings and to conduct restorative conferencing, resulting in a lack of ability to cater necessary services. The Court has to constantly work their restorative conferencing around when the limited trial rooms are free. Lack of gender and age segregated infrastructure is another serious issue highlighted by the Juvenile Court. Similarly lack of adequate technological resources is also another area of concern identified by stakeholders. While virtual trials and meetings have bridged some gaps, poor internet connection has often resulted in issues.

In relation to the budget issue, there seems to be also no clarity about who is responsible for ensuring adequate budgeting for improving the services received at the prisons. According to the Ministry of Home Affairs, the budget of MCS is independent from that of the Ministry although the Ministry is responsible for MCS. The DJJ is legally an independent agency as per the new Juvenile Justice Act, however, it continues to be dependent on MoHA since the budget and procurement work is done through the Ministry. DJJ is informed about yearly budget allocation through a letter from the Ministry workplans are then designed based on the budget allocated.

Budget constrains have been exacerbated by the Covid-19 pandemic and the cuts in public service funding. For example, when the Juvenile Justice Act in came into effect, it mandated the Juvenile Court to form divisions in other regions. Initially, a plan was developed to establish divisions in the 3-4 regions with the heaviest crime concentrations. However, due to budget constraints resulting from the pandemic, the Juvenile Court amended the law and is now mandated to provide services online and not via divisions.

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**Inconsistency of policy**

Some stakeholders identified the unpredictability of government policy in relation to rehabilitation and reintegration of offenders as a major challenge for their work. The thinking behind service provision changes with every administration. For example, during the MDP administration from 2008-2012, programmes such as “Dhevana furusatibu” (Second Chance) programme was established but later when the government changed, the focus shifted to more punitive measures, particularly drug related offenders. According to some CSOs the policy was to discourage civil society to even talk about issues such as decriminalisation of drug use and the government at that time referred to the Drug Act as one 'created by drug users' and was seen as a hindrance to controlling drug related crimes. These sudden shifts in policies often lead to doing whatever the leadership feels like, instead of following any particular strategy. CSOs also noted that these changes in policies occur without taking into consideration the views of the community.

Stakeholders also identified the politicised nature of the Parole and Clemency system as a serious challenge as well. There seems to be significant inconsistencies in decisions to grant parole or clemency. In some cases, individuals who have not undergone any reintegration or rehabilitation treatment are granted early-release.

**Centralization of services**

Consultations with several stakeholders highlighted the gaps in service provision between Malé and the atolls. The serious gaps in service availability in other parts of the country poses a significant challenge for providing equitable services. For example, legally it is mandated to secure a lawyer for children in conflict with law; however, this is often challenging since there are few lawyers based outside Male’. Sometimes the assigned lawyer is in Male’ while the child is on a different island and online communication creates barriers and obstacles in creating a close relationship with the lawyer and the child. Similarly, the DJJ highlighted that sometimes they have to depend on Family and Children Service Centre’s established under the Gender Ministry for coordinating services as the DJJ is only based in Male’.

**5.3 Relevant International Standards and Norms**

Having outlined the legal and policy environments as well as institutional challenges in the provision of rehabilitation and reintegration services in the country, this section will map out the key elements of the current system of support and services in light of the international norms and principles related to social reintegration of offenders, drug dependent persons and children in conflict with law.

International covenants and rules set out a number of norms related to rehabilitation and reintegration of offenders, children in conflict with the law and drug dependent persons. All these norms and standards seek to ensure that the offenders are given the maximum level of opportunity and support to reduce recidivism and relapse, and to help them reintegrate to the society to become useful and productive members.
International standards relevant to children in conflict with the law

The Convention on the Rights of the Child (CRC) 49 recognises the importance of the child’s reintegration and assuming a constructive role in society as the objective of all interventions related to children in conflict with the law. General Comment No. 24 of the CRC Committee also emphasises the interventions and diversion as well as reintegration support that must be guaranteed for children, as recognised children’s rights in juvenile justice. 50

Similarly, the United Nations Standard Minimum Rules for the Administration of Juvenile Justice (the Beijing Rules) outlines that the objective of the training and treatment offered to children deprived of their liberty should be to provide care, protection, education and vocational skills, with a view to assisting them to assume socially constructive and productive roles in society. 51 The United Nations Guidelines for the Prevention of Juvenile Delinquency (the Riyadh Guidelines) refer to the importance of measures to facilitate the socialisation and integration of all children and young persons. 52

One of the most important and overarching principles in relation to rehabilitation and reintegration of children in conflict with the law is that States should deprive a child of his or her liberty only as a measure of last resort and for the shortest appropriate period of time. This necessitates the State to take all appropriate measures in diversion from the crime, alternative sanctions and proper rehabilitation and support services to be provided at all stages of interaction with the justice system.

International standards are clear on the obligation of the State to put in place a range of non-custodial measures and to promote diversion by dealing with children alleged as, accused of, or recognized as having infringed the penal law without resorting to judicial proceedings, whenever appropriate and desirable. Additional support in the form of community programmes and various forms of social assistance must be put in place.

Application of the principles of restorative justice is particularly relevant in the case of children. Therefore, when sentencing a child for an offence, the child’s individual circumstances, such as social status and family situation, must be given consideration in addition to the nature and gravity of the offence.

**International standards relevant to drug dependent persons**

The International Standards for the Treatment of Drug Use Disorders developed by the UNODC and WHO provide clear and specific guidelines on delivering treatment services to drug dependent persons. The Standards seek to provide guidance on how to organise the delivery of interventions, but not on what interventions to use in treating drug use disorders. In particular, the principles emphasise that treatment should be available, accessible, attractive, and appropriate, and that it should be targeted towards promoting treatment for drug use disorders through effective coordination between the criminal justice system and health and social services.

The international legal framework requires specific attention to the rights of women and children, including those who have drug use problems or are in contact with the justice system for drug-related offences. The range of non-custodial alternative or additional measures for offenders who use or are dependent on drugs is not limited to treatment. Appropriate coordination of the criminal justice system and treatment system should be in place, with due consideration for medical confidentiality, and criminal justice personnel should be trained in the specificities of drug use and the needs of drug dependent offenders.

**International standards relevant to offenders (general)**

According to international standards and norms, the rehabilitation of offenders and their successful social reintegration into society should be among the basic objectives of criminal justice systems. The entire justice system should be built on the objective of interventions to support the social reintegration of offenders as a means of preventing further crime and protecting society.

One of the most important international standards in this regard is the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules). The Nelson Mandela Rules emphasise the need to put in place ‘meaningful rehabilitation’ programmes in prisons to support the offenders to rehabilitate and reintegrate into the society after their term and to reduce the rate of recidivism and to create a safer society. The Nelson Mandela Rules identify that education, vocational training, work, treatment, and other forms of assistance, in line with the individual treatment needs of offenders, should be offered by prison administrations and other competent authorities to support the social reintegration of prisoners into society.

The United Nations Standards and Norms in Crime Prevention and Criminal Justice emphasises the importance of interventions to support the social reintegration of offenders as a means of preventing further crime and protecting society. Various international standards and norms provide clear guidelines on delivering treatment services to drug dependent persons.

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standards and norms highlight the need for post-release services, including (a) the delivery of aftercare services to former prisoners; (b) early release from prison and community supervision of offenders; and (c) the crucial role of the community in the social reintegration of former offenders. The Nelson Mandela Rules emphasise the need for efficient aftercare to be delivered by both governmental and non-governmental entities, while the Tokyo Rules call for the availability and early consideration of a wide range of post-sentencing alternatives, including various forms of parole, remission, and pardon opportunities.  

The United Nations Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders (the Bangkok Rules) recognises the need for prison authorities to work with the community groups to design and implement pre- and post-release reintegration programmes specifically targeted for the needs of women.  

The United Nations Standard Minimum Rules for Non-Custodial Measures (the Tokyo Rules) call on Member States to develop non-custodial measures in order to provide other options to imprisonment, thus reducing the use of imprisonment, and to rationalise criminal justice policies, taking into account the observance of human rights, the requirements of social justice and the rehabilitation needs of the offender. The Tokyo Rules also encourage efforts to raise awareness and constructive attitudes among the general public about the value of non-custodial measures, as well as of the importance of the social reintegration of offenders, and call for public participation in the implementation of alternatives to imprisonment to be regarded as an opportunity for members of the community to contribute to the protection of their society.

5.4 Personal & Socio–Economic Challenges

Even if comprehensive social reintegration services are available, offenders and drug-dependent persons would still face several socio-economic and personal barriers for effective social reintegration. Many of these challenges directly or indirectly deter them from becoming productive members of society. Difficulty finding employment due to criminal records, lack of social support systems due to stigma, low levels of education, mental health issues are some of the most common challenges. As a result, the most likely trajectory is to re-offend and go back to the vicious cycle of offence.

Low levels of Education

While the overall literacy and school enrolment rate of the Maldivian population is high, stakeholders noted that low levels of education were a significant barrier for reintegration of offenders. For children in conflict with law, this is often the case, many of whom have dropped
According to the Ministry of Education, low-level education is a contributing factor for offending since school dropouts are over-represented among children in conflict with law. A report by Juvenile Justice Unit in 2015 stated that only 3% of children in conflict with law completed O level education. The 2019 Mid-Year Report of the JJU also stated that among cases of children in conflict with law reported between January-June 2019, 41% (65 out of 155 cases) have dropped out of lower-secondary school for various reasons. DJJ noted that many young people they work with have low literacy levels, making it challenging for them to fully engage with any rehabilitation programmes currently being run through the system. Additionally, stigma and being over the average age for their grade due to dropping out of school makes it difficult for children to go back to school.

Similarly, given that minimal educational opportunities are available (if at all) for both children and adult offenders who are imprisoned, many of them come out of custody without any requisite academic skills necessary for further education or employment opportunities. The Prison Audit also noted that those inmates who are enrolled in educational courses during imprisonment sometimes do not have the chance to continue their studies during custody after release. The Ministry of Home Affairs also noted that getting enrolled in vocational training programmes is challenging for young school dropouts or low performers as they cannot meet the admission criteria.

### Mental health issues

Lack of adequate mental health support services during imprisonment and community-based or residential rehabilitation is identified as a significant challenge for social reintegration. The Centre for Mental Health noted that since even the general population of Maldives faces difficulties in accessing mental health care, it would be challenging for offenders to get support as part of social reintegration. The CMH also noted that addiction treatment is poor although many of those imprisoned deal with addiction.

Prisoners and residents of the DTRC noted that they do not receive adequate mental health care apart from getting psychiatric medication. Many stated that those who receive a diagnosis only get their prescription renewed without regular evaluation. Inmates also noted that anger management, violence, and addiction are prevalent and that sometimes they have to try to resolve these issues personally. The Drug Court highlighted that mental health issues have become especially common among drug-dependent individuals in the past 3 years due to new types of available drugs.

HRCM also noted that children in conflict with law who come from ‘criminal environments’ are at risk due to lack of necessary psychological support. Currently, the systems are arranged where everyone’s for themselves, without any social support systems.

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61 Now renamed as the Department of Juvenile Justice.
64 Ministry of Home Affairs, Prison Audit, p. 221.
Family environment

Unsupportive and volatile family and home environment was identified as another personal challenge for many to remove themselves from criminal behaviour and reintegrate to the society especially after serving a sentence. Offenders often go back directly to these same environments all over again, since there is no re-entry support and care, which puts them at risk of re-offending or relapsing. According to stakeholders, reintegrating back to family life and community is challenging for those who have to spend long terms in pre-trial detention, even if they are ultimately acquitted.

The DJJ noted a nexus between households’ children in conflict with law belong to and prevalence of domestic violence. Although in majority of cases submitted to DJJ between 2011-2018, children belong to families that are together (‘gulbifaivaa aailaa’), parents being involved in criminal activities, physical and sexual abuse, and neglecting of children are highlighted as concerning issues. An interviewee under DJJ monitoring noted that she ran away from home as a child, dropped out of school and started using drugs due to family problems. A significant setback for her has been that her father does not provide any support.

The NGO Hands Together highlighted that those dealing with drug dependency often struggle with abuse and rejection at home and support themselves.

Stigma

Across stakeholders, the most frequently noted barrier to social reintegration was stigma. Many stakeholders believe that Maldivian society is apprehensive about giving former offenders and even children in conflict with law second chances, which makes it difficult for them to reintegrate back to community. In addition, once someone is convicted of a crime, they are seen as convicts for life, regardless of the crime or reformed behaviour. Sometimes even stakeholders providing these services themselves do not believe clients can be rehabilitated due to lack of awareness regarding desistance processes and the struggles faced by clients.

The DJJ stated that people are hesitant to accept or engage with children in conflict with the law, especially if they are accused of serious crimes. It is also hard to access work and education opportunities once the community labels you. During the Focus Group Discussion with local councils, it was highlighted that stigma is especially an issue in small communities. For example, even if someone completes a drug rehabilitation programme, they continue to be labelled as an addict (sometimes based on physical appearances). As a result, they have difficulty getting employment opportunities apart from fishing.

Journey highlighted that even in urban centres such as Kulhudhufushi, children suffering from substance use disorder do not want to go to the regional hospital for treatment because the hospital staff know them and their families personally. In addition, lack of privacy and social stigma prevents them from reaching out to essential services even during a crisis.

Local councils also noted that stigma towards
women who have a history of drug dependency is a barrier for social reintegration. Perceptions about women drug users as being sexually exploited and having unwanted pregnancies was were given as an example. On the other hand, they also noted that men have difficulty reintegrating, having failed to live up to social expectations of being the breadwinner for the family.

Frustrated employment prospects

Former offenders often struggle finding employment. Having a criminal record excludes people from employment opportunities – given that the criminal record is kept for 5 years even if a prisoner is released on parole.

According to discussions with the Island Councils, many islands do not have a lot of employment opportunities in general, and people are forced to migrate to the capital city in search of employment. As a result, offenders from the islands who live in Male’ are more vulnerable to being drawn back to drugs and crime once they are out of the prison. In addition, HRCM highlighted that former offenders have difficulty getting employment in an already competitive job market. Therefore, once out of jail, some people resort to petty crimes for survival.

Lack of adequate housing and family poverty

Stakeholders highlighted that lack of adequate housing and poor living conditions are significant challenges for social reintegration. Given the lack of re-entry support, imprisoned individuals often have to return to living with family members who are already struggling with housing and financial challenges. Furthermore, drug-dependent individuals often struggle with housing while getting treatment given the lack of residential rehabilitation services. If they are ordered by the Drug Court to attend community-based reintegration programmes which are only available in Male’, this becomes especially challenging as the cost of living in Malé for the required 3 months is unaffordable to most. The Drug Court also acknowledges that due to lack of treatment options outside Malé, drug-dependent persons often struggle with housing while dealing with financial difficulties.

Lack of adequate housing was also highlighted as a challenge by island councillors who stated that extended families have to live together in many islands, mainly since new land plots haven’t been allocated in years. Even when land is given, lack of finances makes it challenging for them to build houses.

5.5 Social Reintegration Services currently available

Prison-based Reintegration

Prison-based reintegration is currently available to only sentenced prisoners. Those on remand, regardless of the length of detention, do not have access to any reintegration programmes. The main reintegration programme for sentenced prisoners is the ‘Phases’ Rehabilitation Framework developed in 2016.

66 The programme is divided into four phases

- Discipline and basic education: This phase includes disciplining activities such as foot drills, physical training, and basic education and religious classes.

- Psychological programme: Psychological interventions include life skills classes and drug awareness sessions run for 3-9 months. In addition, religious sessions are also held – a total of 60 sessions are held.
The Phase Rehabilitation programme is implemented in both Maafushi and Asseyri Prisons. Inmates are required to complete each phase to advance to the next. Programmes are only implemented depending on the number of prisoners who are enrolled. For example, the Phase 1 programme requires 10 inmates to be registered to begin. According to the Rehabilitation Framework, inmates are enrolled in programmes after individualised assessments and depending on the type of offence.

However, according to inmates, this is not the case. During the interviews inmates stated that, for example, under Phase 2 Psychological programme, they all attend general life-skills sessions and religious classes. Although the Phase programme is open for all inmates, enrolment depends on the capacity and availability. During the fieldwork for this research, only 97 out of 800 inmates in Maafushi Jail were enrolled in the Phases programme. Out of the 30 female prisoners in Maafushi Prison, only 7 were enrolled in the phases programme (female prisoners are only incarcerated in Maafushi prison).

Furthermore, several aspects of prison life such as healthcare, opportunities for contact with the outside world, and prison regime was assessed to understand how custodial experiences contribute to social reintegration.

**HEALTHCARE**

Adequate healthcare during custody directly contributes to social reintegration both during custody and after release. Conversely, poor healthcare during imprisonment can lead to long term physical and mental health conditions which prevent offenders from successfully reintegrating into the community after release. According to the UNODC, research shows that prisoners tend to have poorer health outcomes than the general population, as they disproportionately come from poorly educated and socioeconomically disadvantaged groups.

Inmates reported that there is no proper health and psychological assessment done on admission to the prison. Although some medical check-ups such as HIV-AIDS and other contagious diseases are screened on entry, for most other conditions, there is no standard testing apart from asking the inmates if they have any medical condition. In addition, according to inmates, no psychological assessments are done at the entry-level.

Several female inmates indicated that they have expressed concern about the lack of proper medical examination and assessment. In addition, some individuals who reported having serious mental health conditions such as depression and suicidal thoughts indicated that they have not received a proper psychological assessment or care despite identifying the

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66 Maldives Correctional Service, Rehabilitation Framework 2016
67 ibid.
68 UNODC toolkit on Social Reintegration defines ‘prison regime’ as encompassing prison work, vocational training, education, library provision, offending behaviour programmes, counselling, group therapy, exercise, physical education, sport, social and cultural activities, and preparation for release.
issues in the early stage. Others with serious physical conditions such as eye problems and skin conditions have not received adequate evaluation.

The views of inmates are also supported by existing human rights monitoring reports by the HRCM  as well as from the preliminary findings shared by the UN Working Group on Arbitrary Detention.  Inmates sometimes wait as long as 7 months to get a specialist doctor’s consultation.  Lack of physical and mental healthcare for as well as improper maintenance of inmate medical records have also been observed by the HRCM.  Given that a significant number of the inmate population in Maldives is jailed for drug usage, it is particularly concerning that prisoners have no individualised medical or psychological support.

CONTACT WITH THE OUTSIDE WORLD

Maintaining social relations with the outside world is a crucial aspect of social reintegration to reduce the feelings of isolation and exclusion during custody. The SMR Rule 80 states that prisoners should be encouraged to maintain contact with persons and institutions that would support social rehabilitation.

Although regulation gives prisoners visitation rights by immediate family members  During the interviews with inmates, many of them noted that it was difficult for their family members to visit them in prison due to their expensive transport options. Furthermore, due to Covid-19, visitation by family was stopped and was replaced with the option for a video call. Many prisoners noted that although they get a 7-minute biweekly call, sometimes they do not have privacy during these calls due to the presence of Prison Officers. Inmates also stated that they have the right to write letters to official institutions such as the President’s Office or HRCM. Beyond these phone calls to immediate family members, prisoners have limited contact with personnel or organisations during custody. Currently, no community-based agencies or social service activities support inmates to continue engagement with the outside communities.

PRISON REGIME

Spending purposeful time outside their cells, engaged in work, educational, and vocational activities supports social reintegration of inmates. The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) for example states that a satisfactory prison regime should ensure that all prisoners spend at


least 8 hours or more daily outside the cell.  

Inmates in both Maafushi and Asseyri prison noted that there is no individualised sentence plan or schedule of activities that they have to adhere to. There is no classification system for prisoners, except that Asseyri Prison is a lower security, open prison. Prisoners are granted 1 hour of yard time for exercise daily, however, there are no organised recreational or physical activities. Inmates noted that they sometimes play futsal, volleyball, cards, or chess, depending on personal interest and availability of equipment and gear. Several inmates also reported that they have to buy the required items for many sports and recreational activities on their own. For example, those who want to play football, have to purchase footballs from the prison, which are quite pricey. Similarly, inmates have to purchase TV, radio, and other recreational items. There are certain rules as to how long they can watch TV and are usually not available after 10:00pm.

Both female and male inmates who were interviewed indicated that they have minimal access to sports and recreational activities. For example, when asked to give any examples of a recreational activity that they took part in, many of the female inmates could only speak about special games to mark Women’s Day.  

There are no organised regular artistic activities that inmates can take part in, such as music, theatre, or painting.

Educational, vocational, and work opportunities are only available to inmates who are enrolled in the Phases Rehabilitation programme. Given this, most prisoners do not have a chance to take part in vocational, educational, or work opportunities throughout their custody. Inmates indicated that among those who are enrolled in the phase programme, interested and eligible candidates have some study opportunities such as the Qaaree course levels 1-5 while in prison. At the moment, there is no specific programme for prisoners to teach or exchange skills with each other.

In both Maafushi and Himmafushi prisons, limited job opportunities are available for sentenced inmates who are enrolled in Phase 4. The most common jobs are agricultural work, maintenance, cleaning, and laundry. Female inmates enrolled in Phase 4 mainly have the opportunity to take part in cleaning jobs such as sweeping the outdoors, corridor, and doing laundry. According to inmates, those fully engaged in work are paid MVR900 per month for the first year and MVR1200 during the 2nd year and MVR1500 thereafter. Work hours and how much they work vary depending on the tasks they are required to do. Inmates indicated that they are provided special uniforms for work but that sometimes do not have access to safety equipment such as protective gear when using pesticides in agricultural work. A female inmate also raised concern regarding heavy physical labour required for mess hall work since they have to carry heavy food buckets, sometimes up the stairs or on slippery floors when it rains.

Access to information about the outside world is also limited for inmates. Although a library service is available where prisoners can request books from a list, they do not have access to a library space where they can study. Many inmates noted that the books available are often old and irrelevant to their interests. In addition, inmates do not have access to any news sources, apart from the Public Service Media channel TVM and radio (if they have access to one),

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75 6 CPT/Inf (92) 3, para 47
such as newspapers, magazines, or journals.

Children in conflict with law who are incarcerated are in the same prison as adult offenders, although separated from them. Like adult offenders, they do not have a schedule of activities and spend most of their time inside the cell. At the time of this research, there were 3 incarcerated children in conflict with law who are kept in the Juvenile Unit in Asseyri Prison: two of them have turned 18 years of age, and one is on remand.

"Due to this, they are barred from interacting with each other and effectively spend all their time in isolation."

Although they are allowed to spend three hours outside the cell on the yard (2 hours in the morning, and 1 hour in the afternoon), they do not have the opportunity for engaging in any recreational activities or sports since only one of them is allowed out at a time.

**Post-release Services**

**Aftercare and re-entry assistance**

Post-release refers to the time following custody and interventions aimed to minimise re-offending during this time, by managing risk and promoting rehabilitation. Some interventions delivered before release into the community can be considered post-release because they aim to ensure post-release adjustment. Aftercare, post-release, and transition can refer to similar processes, and to some extent will be used interchangeably for any treatments, programmes or services aiming to assist in reintegration to the community.

Stakeholders revealed that there is very little concern about the role of the institutions in designing and implementing a post-release strategy. There does not seem to be any written policies on this. The discussions also explored if there are NGOs or other community-based service providers who support ex-offenders and if there are any informal community groups that assist with social reintegration of prisoners and drug dependent persons. The overall impression is that there are no aftercare systems established in the Maldives. Once the sentence is completed, inmates are released without any pre-entry processes that support them once in the community. Although many offenders struggle with issues such as mental health problems, finding gainful employment or housing, there are no organised systems that support these processes.

"The Ministry of Home Affairs stated that they currently do not have a mandate or budget for doing aftercare services for inmates, such as helping find employment."

However, they have piloted an initiative with STELCO to offer internship opportunities for those on parole. MCS noted that some parolees have completed the internship programme and found employment at STELCO. The NGO Journey also noted that recently WAMCO provided employment opportunities for recovering addicts, but sustainability of such schemes are unclear since the working environment has to be enabling for someone struggling with drug disorders.

Apart from these limited opportunities, there are no structured, systematic, aftercare services implemented for offenders in general or children in conflict with law.

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NDA operates a halfway house in Hulhumale for clients who complete treatment at the residential rehab at Himmafushi. However, due to poor infrastructure, currently the halfway house does not provide residential treatment. Additionally, some stakeholders noted that programmes to support re-entry are not regularly organised. This was also highlighted by the HRCM on the 2021 annual Human Rights Report. 78

**Early release Schemes: Parole and Clemency**

Parole and Clemency opportunities are the two main early release schemes that support social reintegration of offenders. According to the MCS parolees are subject to conditional release lasting at least a year, whereas in the case of Clemency (also known as Presidential Pardon), offenders are released both conditionally and unconditionally. If those on parole or given clemency comply with all the conditions, all sentences are considered served.

Generally, if a prisoner has completed ⅖ of the sentence, they are considered eligible for parole. The shortest sentence that could be eligible for parole is a 6-month sentence; there is no cap on how long a sentence should be to be liable for parole. However, as per law, prisoners sentenced for certain kinds of crimes, for example, child sexual abuse, and murder are not eligible for parole.

Factors considered by the Parole Board include whether they have other pending cases, intelligence reports and their behaviour during imprisonment. MCS parole officers monitor those released under parole in collaboration with police and local councils if the parolee is based out of Male’. In some cases, if the Juvenile Court requests it, MCS will assist in the monitoring of children who are in violation of the law.

Presidential pardon or Clemency is granted after the Clemency Board does an assessment. The Clemency Board emphasises that Clemency applications take a long time because of a lack of proper data management and information sharing, despite the fact that the law requires the Board to review the application and send a written advice to the President within 90 days. The Board also noted that since many inmates do not get the opportunity to take part in any rehabilitative or reintegration programmes during custody, it is unfair to consider their participation in these programmes when evaluating them for clemency. The Clemency Board also stated that instead of applying for parole, offenders apply for clemency since they might have the opportunity to be released unconditionally and avoid conditions required under parole. Despite no legal barriers, Clemency and Parole opportunities are currently not granted for those ordered for drug treatment by the Drug Court. The Clemency Board highlighted this as a concern since they receive cases where the applicant is ordered for drug treatment but loses the opportunity due to current practice.

Some stakeholders highlighted the political nature of Clemency decisions. The increase in the number of people given clemency right before each election period regardless of the type of crime and behaviour/conduct in prison is seen by many stakeholders as a reason for weakening the incentive for reform. According to the MCS in late 2017 and early 2018 (election year), MCS released about 800 prisoners under conditional release through Clemency.

Non-Custodial Reintegration Opportunities

Diversion Mechanism

Although minor offences are eligible for diversion under Article 97 (a) of the CPC, no published reports indicate how frequently the diversion mechanism is used.

A diversion mechanism for children in conflict with law is laid out under Chapter 8 of the Juvenile Justice Act (18/2019), however, this is also yet to be implemented. DJJ stated that programmes and measures under the Diversion Mechanism are currently under development. At the moment, DJJ works with children in conflict with law who are sentenced to house arrest or in remand, who are based in the community. They are required to attend some classes such as life skills sessions, anger management classes, and religious classes. These classes are not regularly scheduled and were stopped due to Covid 19. Depending on court orders, children under house arrest are able to go to work or school with parental supervision.

Alternatives to Incarceration

Currently there are minimal non-custodial reintegration opportunities available to offenders, drug-dependent persons, and children in conflict with law. The Penal Code provides for non-custodial sentences, such as community service, but this is yet to be implemented, despite a Supreme Court ruling mandating the MCS to do so within 60 days from when the ruling was published 1st July 2021. 79 On January 16th, 2022, ‘Maldives Correctional Services’ Regulation on Implementing Non-Custodial Sentences’ was gazetted and came to force the same day. 80

In practice, alternatives to incarceration are currently implemented for only drug-dependent persons, if they are ordered for treatment by the Drug Court. There are three main drug treatment options available in Maldives. 81

1. Drug Detoxification

Currently there are detoxification centres in Addu, Fuvahmulah, Gdh Thinadhoo, and Hanimaadhoo. The detoxification programme is 14-21 days and focuses on providing opioid substitution therapy or methadone maintenance treatment. Apart from the medical component the programme is also structured to include psychosocial components which are to be delivered through counsellors. However, due to lack of counsellors based in the centres, the psychosocial components are not regularly conducted. Furthermore, according to a report by the Parliament’s petition committee, the required medication for treatment is unavailable in many of the detoxification centres and some of the centres also do not have in-house medical doctors.82

Those seeking detoxification treatment are required to be based in the island where these centres are during the treatment period. After the detoxification treatment, depending on the indicative assessment, clients are required to go residential treatment at the DTRC or take part in Community-based reintegration.

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81 Details of the treatment program can be found here: https://drugcourt.gov.mv/index.php?option=com_content&view=article&id=214&Itemid=688&lang=dhi
2. Community-based Reintegration: Basic and Extensive

This programme is designed for those ordered by the Drug Court for community-based rehabilitation. The basic programme lasts for 3 months, divided to 3 stages (1 month for each stage). The extensive programme lasts for 6 months, divided into 4 stages (1 month each for the first 3 stages, and 3 months for the 4th stage). According to NDA, classes include general life skill sessions, anger management, drug addiction awareness sessions. Community-based programmes are available in only some of the Drug Detoxification and Community-Rehabilitation Centres and in the Half-way House in Hulhumale. Due to lack of budget for programmes as well as lack of staff including counsellors to provide services, currently there is a long waitlist for community-based programmes in some of the centres and reintegration programmes are not regularly available. For example, although Addu City has one of the highest numbers of drug-dependent individuals, there is only one counsellor who has been working at the Hithadhoo Drug Detoxification and Community Rehabilitation Centre since 2015.  

3. Residential Treatment

The Drug Treatment and Rehabilitation Centre (DTRC) in Himmafushi is the only residential rehab for drug dependent persons. The capacity at the centre is 184 (172 spots for men, 12 spots for women) and currently, it caters to both female and male clients (gender-segregated). At the time of this research, there were 58 male residents only, although according to the Drug Court over 500 people were on the waitlist for treatment. A staff at the Centre stated that more clients were expected to come once the Covid-19 restrictions were lifted. However, the DTRC only had 7 counsellors working and if run on full capacity, it would drastically increase their workload and overwhelm the staff.

Majority of the clients at the DTRC are those with a suspended sentence from the Drug Court and are enrolled in treatment to avoid imprisonment. However, people with drug disorders can also voluntarily join the DTRC. The DTRC’s rehabilitation programme is a 4–6-month long behaviour shaping programme based on the ‘therapeutic community’ approach. The programme is divided into 7 stages, with each stage lasting between 14 days to 1 month. A typical day for a client includes the following elements:

- Wake up at 4:00 am
- Prayer
- Coffee Break at 5:30 am
- House/Room Cleaning 6:00-6:45 am
- Washup and Breakfast
- Pre-Morning Meeting
- Morning Meetings
- Classes (Quran classes, psychosocial classes such as anger management, stress management etc) between 11:00-14:00 with break for prayer and lunch.
- Prayer, tea-break, and time for recreation

15:00-17:30

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- Wash up at 17:30
- Prayer break and recitation of Quran between 17:50-19:30
- Taking part in Department Functions 20:30-21:30
- Evening Wrap Up at 21:30
- Sleep at 10:00 pm

Although an indicative assessment is done on each client to identify their drug-usage history and level of addiction as part of the Drug Court process. NDA noted that an assessment is done once clients join the DTRC as well to identify specific needs and treatment plan is devised accordingly. However, the treatment plan in the DTRC is not based on individual needs according to clients. Clients indicated that they all have similar treatment plans and daily schedules, regardless of their drug usage history or level of addiction.

Currently there is no Psychologist or Psychiatrist resident in the centre. The only individualised mental health support they receive is during weekly meetings with their counsellors (7 counsellors were working at the centre as stated earlier). Clients noted that there have been cases of individuals with severe psychological and mental conditions such as bipolar disorder who had to withdraw from treatment. Most of the clients interviewed indicated that no serious attention is given to psychological and mental health issues. One client remarked that "if praying does anything that is all that people have."

The DTRC residents have limited contact with the outside world apart from 7 minute bi-weekly phone calls to immediate family members. There is 1 TV for all the residents, and they are only able to watch the Public Service Media's channel TVM on Fridays. Residents noted that they do not know any information regarding current affairs unless it’s mentioned during morning meetings.

Sports and other recreational activities are limited, although it’s part of the daily schedule for all residents. Apart from futsal, there are no sports activities that are regularly organised. Residents noted that there is a gym and a music room but much of the equipment needs repair. Similarly, the library was damaged by termites, and resident’s only have access to a small collection of books in the General Education Department (GED).

Residents noted they do not have educational or vocational training opportunities, apart from basic literacy and religious classes under the GED. However, residents mentioned that there was an opening to register for courses from the Maldives Polytechnic. According to residents, there are no opportunities for real and purposeful work at the rehabilitation centre, except for cleaning and other menial work, which are not remunerated or related to the interests or skills of residents.

5.6 Effectiveness of Existing Reintegration Programmes

One of the main indicators of the effectiveness of social reintegration programmes is reduced recidivism (reoffending). Successful social reintegration deters individuals away from crime by offering necessary support they need. Although, there are no blueprints for social reintegration programmes that work for all countries given the diversity in laws and
A high rate of recidivism of prisoners is a common phenomenon in the Maldives as per the views of stakeholders consulted for this study. However, there are no official published statistics on overall recidivism rates. "Maldives Correction Services noted that currently there are no research studies done on recidivism and due to the data management processes currently in practice, it’s difficult to assess the level of recidivism."

The MCS however highlighted that as per their observations, a large percentage of offenders are repeat offenders. Stakeholders including the Maldives Police Service, Ministry of Home Affairs and the Department and Juvenile Justice all highlighted that re-offending was very common and that many who commit petty crimes, later on go on to commit bigger crimes. The bi-annual report of the DJJ for 2021 states that among the 88 cases of children in conflict that were submitted between January and June 2021, 48 cases were for re-offences.

According to the MPS many of those who are arrested for petty crimes are repeat offenders, which reflects lack of effective reintegration. Due to issues such as difficulty finding employment because of previous criminal records, people resort to committing crimes again for survival. The Police noted lack of social reintegration, especially for drug-dependent individuals, as a major concern for public safety as individuals’ resort to crimes such as petty theft due to drug dependency. Furthermore, the MPS highlighted that lack of rehabilitation and reintegration for those released under clemency also increases the rate of recidivism.

Termination from drug treatment programmes is also common in Maldives. According to latest available statistics from the Drug Court, in 2020, 363 individuals successfully completed drug treatment programmes, while 108 individuals were terminated from programmes for various reasons. However, disaggregated data detailing the reason for termination is not available publicly. The Drug Court noted that this information is available and shared internally between stakeholder institutions.

Available research from the past also highlights that termination from drug treatment programmes has been common since the Drug Act came to force in 2011. By 2017, six years after the Act was implemented, a total of 3967 rehabilitation orders were handed by the court, of which 22% (878 cases) were terminated from

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treatment programmes and were therefore serving the suspended jail sentence. 89

Similarly, termination from Conditional Release opportunities such as Parole and Clemency is also common in Maldives which highlights the ineffectiveness of these options as is currently practised. Stakeholders noted that both parole and Clemency opportunities are given without proper reintegration during custody or after release. According to MCS, among the 800 offenders released on Clemency from prison between late 2017 and early 2018 (see section 4.2.2), 50% have now been incarcerated as they were unable to comply with the conditions for their release. The MCS also stated that termination from Parole is also common and that many are now back in prison. According to the MCS, as far back as 2015 90, one year after the Parole Act came to force, many parolees went back to jail after non-compliance with conditions. Of the 77 people granted parole in 2015, 22 (28%) were terminated 91. Stakeholders were of the opinion that the ineffectiveness of Conditional Release programmes were due to the fact that no proper assessment is done before granting Parole and Clemency and highlighted that offenders are often released just prior to elections for political reasons.

The success of Conditional Release programmes are also hindered by the lengthy waiting periods after applying for these programmes. Inmates at both Maafushi and Himmafushi Asseyri Jail noted that they have to wait long periods of time after applying for Parole and Clemency. For example, an inmate stated that after applying for Clemency, a year later they learned that the form was never received by the Clemency Board and therefore was required to re-apply again. The long delays in processing Parole applications were also highlighted as a concern on the 2019 Prison Audit. 92 The Audit also stated that Parole and other early-release schemes are currently granted without taking into consideration inmates’ behaviour during custody which makes these schemes ineffective. 93

Research from other countries suggest that the most effective social reintegration programmes ensure continued aftercare especially after custody. Visher (2015) states that “approaches with the largest impact on recidivism, possibly 20% or greater, are likely to require intensive supervision in the community with mandatory treatment programmes tailored to individual needs.” 94 As noted earlier, there are currently no aftercare services for any category of offenders in Maldives. Furthermore, mandatory treatment options only exist for drug dependency and these programmes are not individualised.

90 The Parole Act was gazetted on 23rd December 2013 and came to force on 23rd January 2014.
Perspectives of service providers and users

Discussions with stakeholders provide a mixed impression on the effectiveness of the existing few reintegration programmes. While the MCS and NDA gave a more favourable impression on the effectiveness of existing programmes and activities, other stakeholders are less convinced of their efficacy. Inmates and residents of the DTRC were particularly critical of the benefits of existing reintegration programmes given the quality and approaches used. For example, custodial reintegration opportunities such as the Phases programme provide only very limited educational, vocational or employment opportunities and most inmates are unable to take part in the programme due to low capacity or intermittent nature of running these programmes.

Many stakeholder organisations acknowledged that, taking into consideration international standards as well as the need and demand, social reintegration programmes are direly lacking. Stakeholders also highlighted that even the limited existing opportunities for social reintegration have further been reduced due to the Covid-19 pandemic. With regard to the level of effectiveness of the existing reintegration programmes, some stakeholders are concerned that there is inadequate attention given to providing equitable opportunities for offenders to participate in reintegration programmes. For example, while in custody, prisoners’ participation in reintegration programmes or employment in the prison are taken into consideration in the evaluation of Early Release schemes such as parole or clemency, although these opportunities are not accessible to all prisoners. This issue has also been identified as a barrier for rehabilitation and reintegration by prisoners themselves. The fact that prisoners are deprived of the opportunity to partake in any form of rehabilitation and reintegration programme during custody, effectively reduces their chance of being granted early-release.

Civil Society Organisations as well as oversight bodies including the Human Rights Commission also stated that the reintegration opportunities currently offered do not meet basic standards set by International Human Rights instruments or best practices. Lack of non-custodial or alternative sentences as well as after-care services were highlighted as major areas where social reintegration opportunities are lacking.

5.7 Challenges in accessing existing social integration programmes

Lack of reintegration services in general are a major barrier for children in conflict with law, drug-dependent individuals, and other offenders. And the limited available services, such as drug treatment options, are mainly based in the Malé region. The Child Ombudsperson’s Office highlighted that during their visits to 3 of the most populated atolls, only one hospital had a psychiatrist, who was out of the island at the time of their visit. While the law requires psychological assessment and legal aid for children brought into custody, it is not possible if no one at atoll or island level can provide these essential services. This limits and delays the child’s rehabilitation opportunities from the onset. DJJ is established in Malé, and in the atoll, only FCSCs under the Gender Ministry, whose mandate differs from juvenile justice, are available.

Despite legal obligations, there are also currently no drug treatment options that specialise in providing services specifically for women or children. The HRCM noted
that although the number of drug dependent women are increasing, the only residential rehabilitation centre (DTRC) has 12 reserved spots for women. Stakeholders also highlighted that reintegration services such as drug treatment programmes are designed to serve men only as men offend more. Even in custody, services available for women, including employment options and vocational training are less for women.

In addition, the long waiting time for drug treatment discourages offenders from seeking treatment support in the first place. There had been many instances in which drug dependent people who had volunteered to receive treatment had relapsed into the cycle of substance abuse because they were unable to get the treatment and had no updates on their request to get treatment.

Access to service is also limited due to bureaucracy and red tape. For example, stakeholders highlighted that people who are drug dependent often have to go through several administrative hoops if they want to access service. Service providers often do not understand quick and early intervention is key. They might lose a window of opportunity by requiring a drug dependent person to deal with administrative tasks such as filing stacks of forms. In the current system, drug dependent individuals have to wait for someone else to support them to get access to service voluntarily. Additionally, administrative rules such as penalising individuals who show up late for treatment by removing them or demoting them to a prior stage result in them losing the motivation to continue with reintegration services.

The issue of accessibility for persons with disability are not addressed in any of the reintegration services currently available. Stakeholders noted that, for example, if a person is impaired mobility-wise (e.g., in a wheelchair), they cannot receive treatment simply due to lack of universal design.

In addition, lack of trained professionals means basic services such as sign language interpretation remain unavailable.
6. Conclusions and Recommendations

The current situational analysis is designed to map out and identify the existing pathways for reintegration for offenders and drug-dependent persons in the Maldives through a comprehensive analysis of existing legal and regulatory environments as well as the service provision arrangements. This study employed a desk review and stakeholder consultation as the main sources of data to capture the current situation and identify gaps. The aim is to understand the current gaps in treatment and rehabilitation of offenders in such a way as to prevent recidivism and to stop the cycle of failed adaptation by repeat offenders.

Overall, analysis of data from interviews with stakeholders, service providers and inmates/residents of prisons and rehabilitation facilities indicate that there are no targeted and comprehensive social reintegration programmes for prisoners and drug dependent persons. The current services in the area of rehabilitation are loosely organised around providing some level of support while they are in custody and have little or no focus on preparing them for release.
and reintegration back into the society.

Based on the findings of this Situation Analysis, the recommendations are made to improve the social integration services to offenders and drug dependent persons, in the following general categories.

- Legislative and regulatory reforms
- Management of rehabilitation and reintegration services
- Budgeting for Social Reintegration
- Community engagement and empowerment

**Recommendations**

Based on the findings of this Situational Analysis, the following general recommendations are made to improve the social integration services to offenders and drug dependent persons. These recommendations are divided into legislative and regulatory reforms, management of rehabilitation and reintegration services, budgeting and resourcing, and community engagement and empowerment.

**Legislative and regulatory reforms**

**Management of rehabilitation and reintegration services**

Strengthening the management structure and process of the rehabilitation and reintegration services across all relevant agencies is essential for ensuring the availability and accessibility of quality service to clients. To this effect, there is an urgent need to train relevant staff, conduct further research into social reintegration options, build data management processes, develop new diversion programmes, create work opportunities, and strengthen after-care services. Specific recommendations in this regard include:

1. Provide further and targeted training to judges, lawyers, and other relevant personnel in the justice system on restorative justice and alternative sentencing with the aim of avoiding retributive and punitive sentencing.

2. Conduct targeted research, including monitoring and evaluation, into the effectiveness and gaps in rehabilitation and social reintegration interventions to better understand the nature of challenges and possible opportunities.

3. Adopt a case-management model that incorporates individualised interventions for offenders based on risks and needs in order to make interventions effective and reduce recidivism.

4. Establish joint efforts to data collection, management, dissemination, and research support between the different agencies involved in the social reintegration of offenders.

5. Establish proper diversion options for all categories of offenders to reduce and avoid formal criminal justice interventions, especially for young offenders and those suffering from drug-use disorders.

6. Establish early intervention and rehabilitation programmes for substance users that are individualised to their specific needs and risks and widen choice of programmes and activities, with a treatment goal of not just ending addiction, but rather flourishing as productive members of society.

7. Create opportunities and encourage offenders to take up educational and vocational skill development programmes as a method of building self-confidence and divert from the environment of crime and substance abuse.

8. Conduct individual assessments of all imprisoned persons to evaluate their risks and needs and consider decarceration including
through early-release programmes to reduce prison overcrowding and harm of incarceration. Given that two-thirds of prisoners currently incarcerated are for drug-offences, incarceration is unlikely to be beneficial or promote social reintegration.

9. Develop a targeted pre-release intervention programme for all prisoners, designed to build the required skills, competencies, and attitudinal changes for a smooth and effective transition to community life after release.

10. Establish special measures to prepare for the release of long-term prisoners, whose support structures in the community may have broken down during their imprisonment.

11. Establish and strengthen the role of halfway houses for offenders who are showing improvement and are ready to be released.

12. Strengthen the support and care mechanisms for children in conflict with law, by engaging their families, the wider community and service providers such as schools, health centres and community-based organisations.

Budgeting and resourcing

Providing adequate resources and budget for rehabilitation and reintegration efforts is fundamental for its success. In particular, there is an urgent need to invest in preventive interventions in the education and health systems, and development of human and technical capacity required for effective management of the rehabilitation and reintegration programmes. Specific recommendations in this regard include:

1. Invest in public school systems to establish early intervention processes for at risk children, including strengthening mental health support systems available to children.

2. Invest in public education systems to be more inclusive of all students, with diverse interests and skills, and avoid discriminatory practices that may lead to students dropping out. Widening educational choices and ensuring students can pursue quality education without having to migrate to Malé or abroad should be prioritised.

3. Invest in public health care systems to ensure universal mental health support is available and accessible to all, especially to reduce inequality in care and avoid incarceration of people suffering from mental health and drug-use disorders.

4. Invest in public housing to stop the criminalization of homelessness and poverty. Research has consistently shown lack of adequate housing to be a major social problem in Maldives and are root causes of issues such as youth delinquency.

5. Invest in development of human and technical resources for social reintegration including in areas such as inclusive education and mental health care.

Community engagement and empowerment

A major weakness in the current social reintegration approach is the lack of avenues for community engagement and community-based reintegration infrastructure. Hence, building public awareness, promoting community-based interventions, promoting family ties, and reducing stigmatisation and social exclusion, and building the social reintegration interventions through strong collaboration across agencies and communities from a whole-of-society perspective are needed. Specific recommendations in this area include:

1. Build public awareness on the harmfulness
of incarceration and promote non-custodial sanctions, including diversion and restorative justice approaches in addressing crimes by communicating evidence that show link between low levels of recidivism and restorative justice measures.

2. Establish and promote community-based interventions that encourage members of the public to mobilise shared skills and resources for reintegration interventions. This could include training and establishing circles of support and cooperative partnerships to help offenders with reintegration including establishing family-ties and finding employment.

3. Adopt policies to support families of offenders to promote family ties and reduce stigmatisation and social exclusion. This could include investing in programmes to help families cope emotionally and financially.

4. Ensure any strategies, policies or programmes for social reintegration are developed and evaluated on a collaborative basis, employing a whole-of-society perspective, through a participatory process that ensures community control and engagement. This is vital, given the crucial need for community support for social reintegration.
7.

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Annexes

Annex 1: Data collection instruments and tools

The following are indicative questions/lines of inquiry that will be used in the stakeholder consultations and in-depth interviews, which are derived from the UNODC’s Custodial and non-custodial measures: Social Integration (Criminal Justice Assessment Toolkit) and adapted to the context of Maldives.

Availability of statistics and data

1. What are the numbers of prisoners (juvenile and drug offenders separately), persons in custody, and in rehabilitation centres?

2. What is the percentage of recidivist offenders (i.e., those who have re-offended) in the prison system?

3. What is the number/percentage of prisoners who have failed to return from work, education release or home leave, over the past 3 years?

4. What rehabilitation facilities are there in prisons?
**Legislative environment**

1. How is the question of social reintegration addressed in the criminal and criminal procedure codes?

2. Does the penal enforcement code/prison act provide for temporary and early conditional release schemes from prisons? What are the rules? Is conditional release discretionary or mandatory?

3. To what extent does prison regime include activities that encourage social reintegration?

4. Does legislation allow and encourage the use of restorative justice in all stages of the criminal justice process, including in prisons, in order to assist with the rehabilitation of the offender? What are the rules?

5. Are there any legal restrictions that prevent offenders or ex-offenders from obtaining employment or undertaking education? What do these restrictions comprise?

6. Do educational institutions, for example, have their own rules that prohibit admission of individuals with a crime record? Do business companies in practice not employ those with a criminal record? Is the situation the same in the public sector?

7. Are there sufficient and special alternatives to pre-trial detention for children, provided for in legislation, such as close supervision, placement with a family, in an educational setting or a home? (Beijing Rules, 13.2). What are they?

8. Have there been any legislative reforms that give former prisoners certain rights to assist with their reintegration? If so, what do they consist of?

**Administration, coordination and management**

1. What diversion options exist in legislation and practice? Who has authority to divert cases from prosecution?

2. Can cases be referred to restorative justice programmes, by the police, prosecutors, or the courts, with the goal of settlement by mediation between victim and offender?

3. Which institutions receive a budget for restorative justice programmes? How is this budget distributed?

4. Are community agencies involved in the social reintegration of prisoners, such as social services, educational authorities, vocational training services, and health services?

5. What proportion of the prison service budget is allocated to the social reintegration activities?

6. What percentage of the total budget is allocated to pre-release and post-release support for offenders?

7. Does the training curriculum for all prison staff make it clear that social reintegration is the guiding principle of the prison service and is the curriculum itself based on this principle?

8. If there is a probation or similar service, do its responsibilities include supervision of prisoners released on temporary release schemes and early conditional release schemes? What do these responsibilities consist of?

9. If a prisoner has been released at the end of his/her term or on remission, rather than parole, does the probation service provide any support services pre- or post-release?

10. Is there a policy and strategy for cooperation between the different ministries?

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95 United Nations Office on Drugs and Crime (UNODC) (n 24).
involved in the social reintegration of offenders?

11. Has any research been carried out into the rates of re-offending among offenders on whom alternative measures or sanctions were imposed?

Community involvement

1. Are there NGOs running victim-offender mediation schemes or other restorative justice programmes that provide service during imprisonment and after release with the objective of assisting social reintegration?

2. What NGOs exist that can provide assistance to prisoners during their preparation for release and support after release? What do their activities consist of?

3. Are volunteers involved in the supervision or support of ex-offenders in the community? To what extent?

4. What activities and efforts such as conferences, seminars, and public service announcements have been organised to increase awareness about the adverse effects of imprisonment on offenders and their families?

5. Is the mass media engaged to help foster a more supportive public attitude toward the wider use of measures such as parole?

6. Are private businesses encouraged by the government, relevant ministries, or prison service to provide offenders and ex-offenders with employment – i.e., in workshops in prisons, for prisoners on work release, or those who can work outside (e.g., from open prisons), former prisoners and those who have received alternative sentences?

**Diversion and alternative sentencing**

1. If restorative justice programmes are used at the pre-charge and pre-trial stages, how many such cases were referred to a restorative justice programme over the past 3-5 years, by the police, and prosecutors? What were the outcomes?

2. Are there programmes that offer a pre-sentencing restorative process leading to sentencing recommendations?

3. What are the most frequent alternative measures or sanctions applied to address the social reintegration needs of offenders?

4. Is treatment provided for drug addiction? What does the treatment consist of?

5. How often are sentenced prisoners allowed to receive visits – for what duration?

6. Do prisoners have access to newspapers, magazines, and journals? Is television or radio available to all prisoners?

7. Is there an organised, structured daily programme for prisoners included in their sentence plans? What period in the day is set aside for these activities?

8. Do prisoners have access to the national education curriculum? How does the system work?

9. Can prisoners receive nationally recognized diplomas/certificates on completion of their courses?

10. Are prisoners with the requisite skills encouraged to teach others?

11. Who provides training? Do civil institutions or businesses provide training?

12. Is the opportunity for work provided to all...
Counselling, education and support services

1. Does the prison system run offending behaviour programmes or group therapy/counselling to address the offence related needs of prisoners?

2. Are these programmes or courses of therapy fully integrated into an individualised assessment and sentence management system?

3. What recreational activities are provided for in legislation and practice? What are the rules and regulations relating to participating in recreational activities?

4. To what extent are juveniles given access to the education curriculum for their age group?

5. To what extent are juveniles given access to vocational training of their own choice? What kind of training do they receive?

Preparation for Release

1. Does legislation put an obligation on prison authorities to prepare prisoners for release? To what extent is preparation for release integrated into the individualised assessment and sentence management system?

2. What efforts are made to coordinate with social and health agencies of civil society during this period, to ensure that prisoners receive the necessary support on their release?

3. What special measures are taken to prepare for the release of long-term prisoners, whose support structures in the community may have broken down during their imprisonment?

4. What are the rules for granting home leave? Are they followed?

5. Are prisoners permitted to work outside of prison in the community? Upon what assessment criteria?

6. Is there a system of halfway houses? What are the criteria for release into halfway houses? What are the rules and obligations in halfway houses?

7. What special provisions are in place to address the particular post-release reintegration needs of juveniles? Is there a separate probation service responsible for the supervision of juveniles?

8. What provisions, if any, have been made in laws and regulations relating to social support and education that give juveniles special rights for support after release from prison?

Post-release support

1. Are there any NGOs that provide post-release support to ex-offenders? What do their activities consist of?

2. Are there any informal community groups that assist with the social reintegration of former prisoners?

3. Do NGOs run post-release restorative justice programmes? How do these schemes work, how often are they used?
Custodial Reintegration  96

HEALTHCARE

1. Is the prison medical officer obliged to see and examine every prisoner as soon as possible after his or her admission and thereafter as necessary, to discover any physical or mental illness and to take all necessary measures? Does this include the noting of any physical or mental defects that might hamper rehabilitation, and the determination of the physical capacity of every prisoner for work? Does this happen in practice? SMR, Rule 24

2. How many psychiatrists and psychologists are employed by the prison service? How many staff positions in each prison, according to legislation? How many are there in practice?

3. What treatment is provided for the mentally ill? Are they transferred to specialist care in the civil health service? Are they accommodated in a special section allocated to them with adequate medical care? Are they accommodated with other prisoners or kept in isolation?

4. Is treatment provided for drug or alcohol addiction? What does the treatment consist of? Does it combine medical treatment with therapy? Is treatment linked to public health services? Is drug addiction a widespread problem among offenders? How widespread is the problem?

PRISON REGIME

Contact with the Outside World

1. How often are sentenced prisoners allowed to receive visits – for what duration? Are these visits closed/open, i.e., do they permit physical contact? Are family visits allowed (with children)? How often? Are conjugal visits allowed? How often?

2. Are prisoners allowed to telephone their family/relatives/friends? How often? Are telephone facilities provided in prisons? Are they adequate? Are calls monitored?

3. How often can prisoners send and receive letters? Are their letters subject to censorship?

4. Do prisoners have access to newspapers, magazines, and journals? Is television or radio available to all prisoners? Where are they placed?

5. Is cooperation with civil society organisations provided for in legislation? To what extent is prisoners’ continuing part in the community emphasised by encouraging the presence and activities of social services and community-based agencies inside the prison?

6. In practice, which agencies work inside prisons? What kind of services do they provide?

7. Are sporting events outside prisons promoted? Is there a calendar of sporting events?

Individualization

1. Do regulations or statutes require that assistance be provided according to individual needs by planning prisoners’ personal development based on individual assessments? Is a sentence plan prepared for each prisoner at the beginning of his or her sentence? What does the plan include? Is the prisoner consulted? Who else may be consulted?

2. Is a flexible classification system of prisoners maintained? Is the plan kept under regular review?

3. Is there an organised, structured daily programme for prisoners included in their sentence plans? What period in the day is set aside for these activities?

96 These questions were adapted and asked to inmates as well as residents of the DTRC in order to evaluate reintegration programmes from their perspective and experiences
4. Are transfers to lower security prisons/open prisons made based on individual assessment? If not, what are they based upon?

Education

1. Do prisoners have access to the national education curriculum? How does the system work? Does the prison administration work in close cooperation with the Ministry of Education? What are the rules for taking exams?

2. Are teachers employed by the prisons or encouraged to visit from outside? How many teachers are required to teach in each prison by law and in practice?

3. Are there provisions for distance education? Is there access to computers? Who decides who may have access to the computers?

4. Can prisoners receive nationally recognized diplomas/certificates on completion of their courses? Do certificates note that they were received in prison? It is important that they should not.

5. Are prisoners with the requisite skills encouraged to teach others? For example, do prisoners who can read and write well tutor prisoners who are not literate? Do they receive recognition or credit for this activity?

6. Does each prison have a library? Are libraries adequately stocked with current affairs and reading materials in the language most commonly spoken? Are prisoners allowed to study in the library? Is there sufficient space and furniture for study? Are books and journals available in minority and foreign languages?

Vocational guidance and training

1. What skills are taught in prison? Can prisoners exercise personal choice in which training programme to join? Are vocational skills training programmes designed to help prisoners receive employment after release, e.g. do they correspond to the needs in the community into which the prisoners will be released?

2. Are prisoners trained to a recognized national standard? Do they receive recognized certificates? Do the certificates note that they were received in prison? It is important that they should not.

3. Who provides training? Do civil institutions or businesses provide training?

Work

1. Aside from keeping the prison clean, is the opportunity for work provided to all sentenced prisoners? What work is available in the prisons?

2. Do prisons produce goods for the internal prison market, e.g. furniture, clothes, bed linen?

3. Are items produced for schools, hospitals, public services, the public?

4. Is the primary purpose of work to generate income for the prisons or to ensure that the prisoners spend their time constructively and receive skills that will help them with employment after release? If the principle is said to be the latter, is this clearly stated in the penal enforcement code? Is the principle put into practice? How is this evident?

5. Is the opportunity for work offered to un-sentenced prisoners? What type of work is offered?
6. Is the work remunerated? What are prisoners paid for their work inside prisons/ outside prisons? How does this compare to the national minimum wage? How are the wages earned banked? Are prisoners able to save any of their money?

7. Where no remuneration is provided what rewards are earned? For example, do prisoners receive extra food or payment in kind?

8. How long is the typical working day and workweek? Are holidays provided?

9. Are prisoners appropriately dressed and protected for their work activities? What safety procedures are in place?

10. Are outside contractors allowed to provide work for prisoners in prisons? If so, what are the conditions? Do they provide vocational training? Is the remuneration comparable to that on the outside market? Do prisoners then receive an opportunity to continue working in the same business following release?

Counselling and Offending Behaviour Programmes

1. Does the prison system run offending behaviour programmes or group therapy/ counselling to address the offence related needs of prisoners? What are they? Are the staff that deliver the programmes appropriately trained? Are they specialists from outside or NGOs? How many prisoners participate? What are the results? Have any evaluations been undertaken?

2. Are these programmes or courses of therapy fully integrated into an individualized assessment and sentence management system?

3. If the above does not exist, are there any initiatives to address the special needs of prisoners? What do they consist of? Who runs them?

4. What are the areas in which prisoners most commonly need specialist assistance (e.g. substance abuse, self-harm, anger management, sexual offences etc)?

Recreation

1. What recreational activities are provided for in legislation and practice? What are the rules and regulations relating to participating in recreational activities?

2. Are visits encouraged from external arts organizations/groups? Do they occur? On a regular basis?

3. What sports facilities are available? What equipment do they have? In practice, how often do prisoners take part in sports activities?

4. Are there theatres in prisons? How often are shows produced? Who organizes the shows? Who attends the performances?

5. Are there musical facilities – is there a choir, a band, and orchestra? How many prisoners take part? Do the musical groups perform? Who attends the performances?

Special Categories of Offenders: Women

1. How are women separated from male prisoners? Are they in separate institutions or in wings of the same institution?

2. Do women have the same opportunities as male prisoners to benefit from all regime activities, including work, vocational training, education, cultural and recreational activities, sports, offending behaviour and preparation for release programmes? If not, what regime activities do they not have access to? What type of work and vocational training are women engaged in? What number/ percentage is working?
3. Are women provided with any special support pre- and post-release, by the probation service, if it exists? What support services are available?

4. Do they receive any particular support during the serving of an alternative sentence? For example, if they have been victims of domestic violence, are there special programmes available to which they can be directed, run by psycho-social support services, NGOs, women’s group, etc.? How many are participating in such programmes at the time of assessment?

5. Are there any special services or unit provided for pregnant woman and women with infants?

**Special Categories of Offenders:**

**Drug-dependent Offenders**

1. Can imprisoned drug addicts benefit from any treatment programmes for their addiction? Are drug addicts screened for underlying mental illness for which they may also need treatment? What do the programmes consist of? Who runs them – specialists from civil health agencies or medical specialists in prisons? How widely available are they? How many prisoners are participating? Can prisoners participate in programmes outside the prison for certain periods? What are the rules?

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**Annex 2: The Review Matrix**

In order to ensure that the situation analysis captures the essential elements of the existing reintegration pathways in Maldives, a review matrix is developed based on the main objectives specified in the TOR. This review matrix is expected to be instrumental in ensuring that the findings of this situation analysis is built on evidence that is credible, reliable, and useful. The matrix will also help triangulate evidence through multiple lines of evidence, collected from existing data and through stakeholder consultations.
<table>
<thead>
<tr>
<th>Core Component</th>
<th>Exploration Focus</th>
<th>Indicators</th>
<th>Data sources and analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal and policy environment</td>
<td>1. What are the existing legal and regulatory provisions for reintegration of offenders? 2. What are the gaps in the current legal and regulatory environments?</td>
<td>• Existence of clearly defined legal and regulatory instruments targeted towards offender reintegration</td>
<td>• Laws, regulations related to prisons, drug rehabilitation centres</td>
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<td></td>
<td></td>
<td></td>
<td>• Specific legal/ regulatory provisions in other sources which address the reintegration dimension</td>
</tr>
<tr>
<td>Legal and regulatory challenges and obstacles</td>
<td>1. What are the institutional challenges and obstacles in the legal/regulatory environment related to reintegration services? 2. What are the main issues of inter-agency coordination? 3. What are the main gaps in service provision? 4. What has been done so far to address these challenges?</td>
<td>• Regulatory and institutional challenges are identified • Issues of inter-agency coordination are identified and addressed • Quality of service provision is monitored regularly • Corrective actions / improvements are sought to address quality and coordination issues</td>
<td>• Stakeholder consultations • Review of service monitoring &amp; evaluation reports • Review of relevant institutional documents</td>
</tr>
<tr>
<td>Compliance with standards and norms</td>
<td>1. What are the gaps in compliance with international standards and norms in relation to the treatment of prisoners?</td>
<td>• Existing rules and procedures in Maldives are in compliance with the local and international standards and norms.</td>
<td>• Stakeholder consultations • Review of institutional documents</td>
</tr>
<tr>
<td>Core Component</td>
<td>Exploration Focus</td>
<td>Indicators</td>
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<tr>
<td>Social, economic and personal challenges</td>
<td>1. What are the personal challenges faced by offenders which prevent them from reintegration? 2. What are the socio-economic and other environmental factors that prevent offenders from effective reintegration?</td>
<td>• Offenders (service seekers) are aware of existing personal challenges in reintegration • Existing challenges in the society and economy related to effective reintegration are discernible</td>
<td>• In-depth interviews with service seekers (offenders, family) • Stakeholder consultations with service providers</td>
</tr>
<tr>
<td>Social reintegration programs currently available</td>
<td>1. What are the social reintegration programmes available to offenders (all categories)? 2. Are the existing programmes compliant with the international norms and good practices? 3. Are the existing programmes effective for: children in conflict with the law, women offenders, offenders with drug use disorders, prisoners released after extended periods of pretrial detention, violent offenders, and members of criminal gangs</td>
<td>• Specific programmes and interventions are available for reintegration of offenders • Existing programmes and interventions are effective/ineffective to the purpose</td>
<td>• Stakeholder consultation • Review of working procedures/ SOPs and guidelines related to prisons, detention centres, and rehabilitation centres • Stakeholder consultations • In-depth interviews with current inmates, former inmates, and families</td>
</tr>
<tr>
<td>Core Component</td>
<td>Exploration Focus</td>
<td>Indicators</td>
<td>Data sources and analysis</td>
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| Effectiveness of existing reintegration programs | 1. How effective are the existing reintegration programmes when measured in light of recidivism/relapse statistics?  
2. What issues/problems have been associated with higher rates of recidivism? | • The existing programmes are able/unable to reduce the rate of recidivism  
• Factors leading to relapse of individuals to criminal behaviour are identified | • Stakeholder consultations  
• In-depth interviews with current inmates, former inmates and families |
| Challenges of access to reintegration services  | 1. What are the overall challenges faced by juvenile offenders in accessing service?  
2. What are the overall challenges faced by adult offenders in accessing service?  
3. What are the overall challenges faced by drug dependent persons in accessing service? | • Existing reintegration services are available/not available and easily accessible/inaccessible for most inmate | • Stakeholder consultations  
• In-depth interviews with current inmates, former inmates and families |

The above matrix will also inform the nature of data to be collected through in-depth interviews and stakeholder consultations. Furthermore, the matrix will also ensure that the data analysis approach maintains a strict linkage with the stated objectives of this situation analysis.
## Annex 3: Tasks/ Fieldwork Schedule

### Deliverables

Inception report which lays out background, context, methodology, workplan, data collection instruments

1. Initial scoping meetings
2. Background reviews
3. Development of the Inception Report
4. Finalising the Inception Report

### Desk review and data collection

5. Desk review / review of relevant laws and regulations and literature
6. Selection of the interviewers/ enumerators
7. Training of the interviewers/ enumerators
8. Pre-testing the interview guide/ instruments
9. Field work (interviews)
10. Final Data cleaning and dataset preparation

### First Draft of the report

11. Data analysis
12. First draft of the report sent for feedback
13. Feedback incorporated

### Final report following validation meeting with stakeholders

14. Validation meeting/ workshop
15. Comments from validation incorporated
16. Final report submitted to TM
### Annex 4: Interviews conducted

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<td>1</td>
<td>Children’s Ombudperson’s Office</td>
<td>23</td>
<td>Maafushi Prison Inmate Female 01</td>
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<td>2</td>
<td>Juvenile Court</td>
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<td>Maafushi Prison Inmate Female 02</td>
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<td>Journey</td>
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<td>Maafushi Prison Inmate Female 04</td>
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<td>5</td>
<td>Department of Juvenile Justice (DJJ)</td>
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<td>Maafushi Prison Inmate Female 05</td>
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<td>6</td>
<td>Maldives Police Services</td>
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<td>Centre for Mental Health</td>
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<td>Clemency Board</td>
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<td>Ministry of Home Affairs</td>
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<td>Ministry of Gender</td>
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<td>Asseyri Prison Juvenile 01</td>
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<td>Hands Together</td>
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<td>Himmafushi Prison</td>
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<td>Asseyri Prison Inmate 01</td>
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<td>Juvenile 3-DJJ (male)</td>
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