



DEATH BEHIND BARS

Torture and Denial of Medical Care in Detention in Egypt



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Compiling the names of the 323 individuals who died in Egyptian detention facilities between August 2013 and September 2015, as a result of the widespread practice of torture and/or denial of medical care, this report sheds light on the root causes and factors of deaths in detention, an issue that has yet to be addressed by the authorities. The presentation of all these cases of death in a single report gives a clear image of the multiple dysfunctions of the Egyptian judicial and prison administration system and their fatal consequences on detainees.

As the international community recently agreed on adopting new standards on the treatment of prisoners, the conditions of detention in Egypt are still far from implementing the best existing practices. “Deaths Behind Bars” compares the existing norms on healthcare in detention in the country with international human rights standards, and looks at conditions of detention in general across the country, in order to show their discrepancies and how these differences form the basis of the reported deaths. The same comparison is made between the widespread and systematic practice of torture in detention, a phenomenon triggered by the lack of appropriate legal barriers to prevent it, and the institutionalisation of impunity for its perpetrators, leading to severe abuses. Illustrated with specific cases, the wide-ranging legal analysis made in the report confirms that what occurs in the field is the result of the absence of legal safeguards for prisoners and the total disregard of the authorities for the prisoners’ conditions of detention, despite their renewed commitment to improve them.

The discretion left by Egypt’s domestic law to official bodies regarding the regulation of detention centres and the lack of judicial supervision is another topic that is studied in the report and for which appropriate legal responses must be found in order to improve the conditions of detainees in Egypt. In this sense, the report does not only portray the conditions of detention per se in Egypt, but it also provides constructive and efficient recommendations for the Egyptian administration to improve the conditions of detainees in the country and to better respect international human rights standards as a whole.

Abbreviations

AED Alliance Européenne pour les droits de l’homme – European Alliance for Human Rights

CCP – (Egyptian) Code of Criminal Procedure

CESCR – Committee on Economic, Social and Cultural Rights

ECOSOC – Economic and Social Council of the United Nations

EIPR – Egyptian Initiative for Personal Rights

HRCtee – UN Human Rights Committee

ICCPR – International Covenant on Civil and Political Rights

ICESCR – International Covenant on Economic, Social and Cultural Rights

NCHR – National Council for Human Rights

SCAF – Supreme Council of the Armed Forces

SRH – UN Special Rapporteur on Health

SRT – UN Special Rapport against Torture and Other Degrading, Inhuman or Cruel Treatment or Punishment

UPR – Universal Periodic Review

WGAD – UN Working Group on Arbitrary Detention

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

What emerges from Egyptian detainees' testimonies about their conditions of detention is the absolute deprivation of their dignity. Stripped of their rights as soon as they enter a detention facility, they become the witnesses and sometimes the victims of numerous acts of torture, denial of medical treatment and degrading conditions of detention, which are regularly brought to the attention of the international community. In reaction, the Egyptian authorities either deny these abuses or launch symbolic investigations for which few have seen tangible outcomes.

While numerous statements have already been made about the deteriorating human rights situation in Egypt, this report prepared by Alkarama sheds light on a topic relatively unknown to the public – the number and causes of deaths in detention – with a view to pinpoint the gaps in the Egyptian legislative arsenal to prevent such occurrences and to provide lawmakers and other stakeholders both with the key components of a strategy and with an incentive to act urgently and effectively.

As a reminder, since July 2013, Egyptian citizens have been the silent victims of massacres that may amount to “*crimes against humanity*”¹, of thousands of arbitrary arrests, death sentences² and moqueries of mass trials, as well as countless cases of enforced disappearances and extrajudicial or summary executions, notwithstanding the numerous violations of their rights to freedom of opinion, expression, peaceful assembly and association.

What the Egyptians thought they were leaving behind when they started the revolution in 2011 actually never vanished. In fact, today's situation is even worse than under the previous regimes, and international actors all agree that the country is “*shifting away from democracy*”³. In the midst of these violations, the Egyptian authorities try to show that “*prisons in Egypt have become like hotels*”⁴, but testimonies emerging from various detention facilities across the country show a very different reality.

If the issue of appalling conditions of detention is not a new phenomenon in Egypt, whose previous governments had also been criticised for, the number of deaths in detention has been on the rise under the current regime. Although in March 2015⁵ the authorities pledged to better protect and promote human rights in front of the international community, torture and denial of medical care in detention are increasingly used by the authorities as tools for their repressive policies that aim to stifle any kind of dissidence.

With the aim of filling this gap in mind, Alkarama has gathered first-hand information from testimonies of the victims' relatives and reports compiled by other organisations, official bodies and the media since July 2013. It also received detailed cases of victims from the European Alliance for Human Rights (AED)⁶. The product of this research and the information received reveal that, between 14 August 2013 and 16 September 2015, 323 individuals aged from 15 to 76 have died in detention facilities.⁷ As a full year,

1 Alkarama, [Egypt: Ensure accountability for crimes against humanity](#), 16 August 2013.

2 UN News Centre, [UN human rights chief deplors Egypt's 'outrageous' mass death sentences](#), 29 April 2014. As of today, never had that many citizens seen their sentences confirmed by the Grand Mufti of Egypt. According to Alkarama estimations, at least 450 death sentences have been reviewed and approved. Appeals are ongoing while seven executions have been carried out so far, all in 2015.

3 Associated Press, [White House criticizes Egypt in report to Congress, but \\$1.3 billion in aid likely to continue](#), 8 June 2015.

4 Los Angeles Times, [Egyptian official denies torture, says prison is like a hotel](#), 2 July 2014.

5 Alkarama, [Egypt: UPR - Time to Translate Commitments into Concrete Action](#), 20 March 2015.

6 L'Alliance Européenne pour les droits de l'homme is a human rights organisation based in France that investigates human rights abuses in North Africa and helps victims of abuses to obtain justice, restore their dignity and make abusers accountable. The European Alliance for Human Rights is committed to ensure governments compliance with international standards and securing reparations for victims.

7 Alkarama uses the terms “detention facility” as an expression to include official prisons, police stations and security forces camps. Similarly, detainees refers to all kind of individuals detained, without taking into account the kind of detention facility concerned while prisoners only refers to individuals in official prisons.

2014 counts most victims, with 137 deaths in detention in total, while 81 deaths were reported for the second half of 2013 and there has been 105 deaths between January and September 2015. In comparison, 52 individuals died in detention under the Supreme Council of the Armed Forces (SCAF) from February 2011 to June 2012, and 56 under Morsi's presidency from June 2012 to July 2013. The analysis of the victims' profiles shows that they are counted, not only among the thousands of suspected or real political opponents, but also among common law criminals; and that the Egyptian authorities have made themselves responsible, by act or by omission, not only of the death of men but also of women and children, with the youngest victim to die of torture documented by Alkarama being a 15-year-old child.

Alkarama identified four triggering and intertwining elements that explain the scope of this phenomenon. Even if the authorities' behaviour remains an important aspect in the occurrence of these deaths, Egyptian law (i) leaves too much discretionary power to the authorities to amend detention policies and regulations; (ii) does not offer satisfactory safeguards for detainees regarding their conditions of detention; (iii) does not sufficiently address the question of medical care in detention; and (iv) does not criminalise torture and ill-treatment appropriately. These four factors put together have a direct effect on the lives of detainees and inevitably lead to the death of hundreds of them.

The report therefore provides recommendations to the Egyptian authorities with the aim of filling this legal vacuum and addressing the multiple abuses that are regularly reported in Egyptian detention centres. To be effective however, these recommendations also require the implementation of the existing legal framework by the Egyptian authorities, as it nevertheless offers some protection to detainees.

2. EGYPTIAN DETENTION CENTRES: TYPES AND CONDITIONS OF DETENTION

2.1 TYPES OF DETENTION FACILITIES AND IMPLEMENTATION

To understand the issue of deaths in detention in Egypt, it is necessary to analyse the kind of detention centres that exist across the country and subsequently the kind of detainees that are most likely to be found dead in them. The main differences between these facilities depend on their status – whether they are official detention centres or not – and consequently on whether regulations on the treatment of detainees apply to them. According to official figures, there are 42 public prisons in Egypt, regulated by law n°396 on the Organisation of Prisons.

This number, however, does not include the numerous prisons, created by decrees of the Interior Ministry, inside police stations and security forces camps. In fact, while there are no official records on the total number of detainees in Egypt, it seems that most of them are detained in one of the hundreds of police stations existing across the country and where conditions of detention are worse than in regular prisons and reports of abuses more frequent, in particular of torture and ill-treatment.

Prisons/Complex	Place
Abu Zaabal Prison; Al Marag Prison; South Tahir Prison	Qalyubia
Al Qanater Prison	El Qanater el Khayreyya
Al Qata Prison	Giza
Asyut Prison	Asyut
Banha Prison	Banha
Burj Al Arab Prison ; Alexandria Prison	Alexandria
Damanhur Prison for men	Damanhur
Faiyum Prison	Faiyum
Hard Labour Detention Centre	Beheira
Mansoura Prison	Dakahlia
Minya Prison	Minya
New Valley Prison	Kharga Oasis
Port Said Prison	Port Said
Qana Prison	Qana
Shibin Al Kawm Prison	Shibin Al Kawm
Sohag Prison	Sohag
Tanta Prison	Tanta
Tora (a) Complex; Tora (b) Complex; Istinaf Prison	Cairo
Wadi Natrun	Alexandria Road
Zagazig Prison	Al Sharqia

List of Egyptian Prisons and Complex⁸ – Egypt Interior Ministry

Although police stations may only hold individuals for the time of their custody – which, according to Article 36 of the Egyptian Code of Criminal Procedure (CCP), should not exceed 24 hours, allowing for the release of the detainee if he has not been referred to the public prosecution and brought to a preventive detention facility – practice shows that custody often exceeds legal limitations and that detainees remain inside police stations even after their indictment by the prosecution.

⁸ Some prisons like Tora contains several prisons, which explains the difference between the total of prisons in Egypt and the number of prisons listed in the table.

Hence, it appears that the vast majority of detainees in Egypt are held in police stations or detention centres affiliated to them, thus increasing the risks of abuses and ultimately death. Out of the 323 cases documented between August 2013 and September 2015, 191 individuals died in police stations or affiliated detention centres, while 128 died in prisons and 4 in unknown places of detention.

Evidence from the victims' table suggests that most criminal detainees died in one of these detention facilities, while most political detainees died inside prisons.⁹ An explanation for this can be found in the fact that there are more criminal detainees than political ones but also that the latter are more likely to be transferred to prisons – where their situation would be legalised – than common criminals who receive less attention and are therefore more vulnerable to abuses. Holding a record number of political detainees since the start of Sisi's presidency, prisons are overcrowded. As a consequence, the authorities keep ordinary criminals in police stations and other detention facilities that are not suited to hold detainees for long periods of time. Moreover, prisons regulations do not apply to these temporary detention facilities, depriving detainees of the legal safeguards relative to their conditions of detention.

OFFICIAL PLACES OF DETENTION

Law n°396¹⁰ lists the different kinds of prisons existing in the country:

(a) Penitentiaries

(b) General prisons

(c) Central prisons

(d) Special prisons established by decree of the President of the Republic indicating the categories of prisoners to be committed to such prisons, how they are to be treated and the conditions of their release.

The Minister of Interior shall issue a decision specifying where prisons of each type are to be established and the sphere of each one."

The law gives the Interior Ministry full discretion regarding the creation of detention facilities and how they should be monitored, excluding the possibility for an independent supervisory authority. In this sense, the Interior Ministry issued decrees in 2014¹¹ designating some police stations as official prisons, even though they neither meet the legal requirements imposed by Egyptian law and international human rights standards, nor are prepared to hold individuals for more than 24 hours. The lack of equipment and of training for the police personnel, leave detainees with a sword of Damocles over their heads, as testified by the high number of deaths in police stations.

Hence, the Interior Ministry designated the police stations of Banha, El Khasos, 15th of May City and El Nahda as official prisons, without requiring that any change be made to their operational modes or infrastructures (see annexes C.1; C.3; C.4). It did the same with buildings owned by the administration (see annex C.2). In the end, the Egyptian administration created new prisons out of existing detention facilities where violations occur regularly, as the death of a detainee in June 2015 in El Khosous Prison – a former police station – testifies¹².

9 Noting that during the period covered, more criminal detainees died in detention facilities than political ones.

10 English version: Open-ended intergovernmental group of experts on the standard minimum rules for the treatment of prisoners, *Response of the government of the Arab Republic of Egypt to note cu 2011/26 and note cu 2012/157/do/js*, UNODC/CCPCJ/EG.6/2012/Gov.16, 7 November 2012. This version does not include the latest amendments that were adopted in October 2015.

11 See annexes C.1, C.2, C.3, C.4 (in Arabic).

12 Mohamed Atta Allah Hassan Ali was jailed in El Khosous police station and newly prison by the decision of the Ministry of Interior. Denied medical care, he had been brought to Ains Shams specialised hospital but he fell into a hepatic coma and died

Another legal issue arising from the decrees establishing these *ad hoc* prisons is that they do not indicate if the prison administration should be responsible for monitoring them and whether prison regulations apply to them, reinforcing the pre-existent risk of abuses for detainees. Without appropriate supervision of these new places of detention, it is highly likely that abuses will continue unabated, without any possibility for the prisoners to obtain redress.

In fact, the Interior Ministry “legalised” the unlawful detention of thousands of detainees without any possibility for them to challenge these decisions. Facilities that could not and should not, as prescribed by law, hold detainees are now seen as regular prisons. Additionally, the Ministry acted in a discretionary fashion regarding the choice of these places of detention and it is likely that other police stations will be designated as prisons, under the pretext of reducing overcrowding. It is also plausible that other detention facilities, such as security forces camps, be legalised in the future and that their monitoring be delegated to the security forces, notorious for their abuses of prisoners.¹³

There already exists places of detention in Egypt that are run by the Security Forces and by the formerly known State Security Investigations Services (*Mabahith Amn ad-Dawla*) – now called Homeland Security. Their number and location have not been disclosed to this day, as these detention facilities are illegal. In fact, the security forces are not entitled to detain people but numerous reports show that it is common practice in Egypt. People arrested by these forces are thus detained outside the framework of the law, making it extremely difficult to get their detention acknowledged by the authorities and hence almost impossible to file complaints against the security apparatus. Alkarama documented numerous cases of human rights violations committed by the security forces inside these detention centres, in particular cases of torture perpetrated to force people to confess to crimes before referring them to the public prosecution¹⁴.

The table of victims (annex A) lists eight individuals who died during their detention in Security Forces or Homeland Security camps, but their number could be higher as it is extremely difficult to estimate the number of individuals detained in these facilities. Many of these cases of detention by the security forces are secret, and thus those held in such facilities can therefore be considered as a victim of enforced disappearance, a practice that can be characterised as a crime against humanity when it is systematic and widespread,¹⁵ as is the case today in Egypt.¹⁶ The total absence of judicial supervision of these detentions aggravates the risk of human rights violations and Alkarama received cases of extrajudicial executions that could have been the result of torture or medical negligence by the security forces but were disguised as killings of alleged armed militants, particularly in the Sinai region.¹⁷

It appears that other unconventional places of detention are being used by the authorities where individuals have been reported dead. Two individuals have been found dead in the military prosecution building of Ismailia as a result of torture, and three others in court facilities, a disturbing element when these facilities are supposed to be safe for detainees. Additionally, numerous testimonies from victims show that these

of complications to the liver.

13 For instance, allegations were issued in media regarding the place of detention of Mohamed Morsi, former Egyptian president sentenced to death in 2015, and the possibility that the authorities may have faked his detention centre to make it legal. The Guardian, [Egypt government denies fabricating evidence in Mohamed Morsi trial](#), 5 December 2014.

14 Alkarama, [Egypt: Authorities Execute 6 Men for Crimes that Occurred After their Arrests](#), 19 May 2015

15 Article 7-1(i) of the Rome Statute establishing the International Criminal Court.

16 Alkarama, [Egypt: Enforced Disappearances of a Father and Son - International Community Must End Complicit Silence on Gross Human Rights Violations](#), 18 June 2015. The United Nations Working Group on Enforced or Involuntary Disappearances acknowledged in its last report that there is “a recent pattern of short-term disappearances” in Egypt. See Human Rights Council, Report of the Working Group on Enforced or Involuntary Disappearances, 10 August 2015, A/HRC/30/38, para. 67.

17 Alkarama, [Egypt: Arbitrary Execution and Enforced Disappearance of Son and Father in North Sinai](#), 18 February 2015.

courts do not dismiss confessions obtained under torture, especially military courts, inciting officers to perpetrate acts of torture against detainees to obtain declarations of guilt, which can ultimately lead to the death of the accused. Eventually, two minors were killed in juvenile centres, the youngest being 15 years old.

Beyond the discrepancies between the different places of detention in Egypt, they all share a common aspect: the fact that their inhuman and cruel conditions of detention, regularly denounced by local and international organisations, are one of the main factors of death in detention, justifying the urgency for improved conditions of detention, and in particular for better access to medical care.

2.2 CONDITIONS OF DETENTION *PER SE*

Conditions of detention in Egypt have been problematic for a long time, well before General Sisi came to power in July 2013, but testimonies from detainees reveal that the state of detention facilities has reached an unprecedented level of inhumanity. In fact, reports received by Alkarama throughout the period of this study show that conditions of detention are an important tool of the authorities' arsenal to stifle opponents and critics and that these appalling conditions are deliberately used by the authorities to further repress and discourage real or alleged dissidents.

These conditions have been made worse by the overcrowding of police stations and prisons, as a result both of the thousands of arbitrary arrests conducted by the authorities against real or alleged political opponents since July 2013, and of amendments to article 143 of the Code of criminal procedure that made it possible to renew pre-trial detention of individuals for months, if not indefinitely in specific circumstances. As a consequence, police station cells are sometimes filled with over three times their capacities. For instance, a recent report describes a cell built to accommodate 10 individuals filled with 30;¹⁸ other organisations recount cases of cells intended for 20 detainees containing 70.¹⁹ The absence of a clear framework to regulate the dimensions of cells and the number of people they can detain adds to this problem.

These figures are far from the requirements of the Revised Standard Minimum Rules for the Treatment of Prisoners (hereinafter Minimum Rules),²⁰ which aim to provide States with appropriate guiding principles on how to treat detainees, whether the individual has been convicted or not. Regarding the accommodation of detainees, Rule 12 of the Minimum Rules states that,

“Where sleeping accommodation is in individual cells or rooms, each prisoner shall occupy by night a cell or room by himself or herself. If for special reasons, such as temporary overcrowding, it becomes necessary for the central prison administration to make an exception to this rule, it is not desirable to have two prisoners in a cell or room.

Where dormitories are used, they shall be occupied by prisoners carefully selected as being suitable to associate with one another in those conditions. There shall be regular supervision by night, in keeping with the nature of the prison.”

18 These figures have been attested by photos emerging from police stations which were later confirmed by the authorities: Maswary, 4 June 2015, [حقيقة تكديس المساجين داخل قسم السيدة زينب.. ومصدر أمني: سجن 15 مايو الحل](#)

19 Amnesty International, [Egypt: Spate of detainee deaths points to rampant abuse at Cairo's Mattareya Police Station](#), 4 March 2015.

20 Adopted on 30 August 1955 by the UN Congress on the Prevention of Crime and the Treatment of Offenders, the Minimum Rules were later approved by the UN Economic and Social Council of the United Nations (ECOSOC) by two resolutions in 1957 and 1977. In light of the constant evolution of human rights standards, the Commission on Crime Prevention and Criminal Justice adopted new rules – the Mandela rules – that remodelled the Minimum Rules with the aim of better protecting prisoners, particularly regarding the absolute prohibition of torture and ill-treatment, and access to independent healthcare in detention. They were approved in October 2015 by the United Nations General Assembly. Reuters, [U.N. panel adopts new rules on treatment of prisoners](#), 22 May 2015.

In stark contrast with this recommendation, which views prisons' overcapacity as a temporary issue, overcrowding has become the rule in Egypt. This has been confirmed by the Egyptian national institution for the protection and promotion of human rights, the National Council for Human Rights (NCHR), in a report released in late May 2015, which states that the capacities of prisons have been exceeded by 160% and that of police stations by 400%.²¹ The fact that the Egyptian authorities declared that detention facilities inside police stations would now be considered as prisons, as mentioned above, is an evasive solution because these institutions are not adapted to hold detainees for long-term sentences, in particular in view of their overcrowding. This issue took on such proportions that individuals who were placed in solitary confinement were finally joined by other detainees because of the lack of space in other prison cells.²²

This situation is also made worse by the absence of separation between individuals in custody or preventive detention, convicted criminals and political detainees. Although both Egyptian law and international standards require that these different types of detainees be isolated from one another, they always end up in shared cells. The main reason for this is that, as a result of overcrowding, the authorities can no longer ensure the separation. The other reason is, as mentioned above, the fact that the authorities use it as a tool to punish individuals – by putting all types of detainees together, they leave the most vulnerable ones to all kind of abuses by other inmates. There is therefore no partition between individuals who, because of their criminal records, could be dangerous to other prisoners. The result of this can lead to death. Such was the case of a detainee stabbed to death by another detainee in Belbais' Police Department.²³

Alkarama also documented several cases where prisoners were assaulted by other detainees, voluntarily or at the demand of the wardens. One notable case is that of an adolescent woman who was harassed both by the prison personnel and by other inmates at the request of one of the guards.²⁴ As for children who should be detained in specific juvenile centres,²⁵ they are not segregated from adults and are therefore left to all kind of abuses by guards and/or other inmates, as documented by Alkarama in numerous cases, such as that of a teenager who tried to commit suicide after he was sexually abused by a police officer.²⁶ Moreover, the authorities do not offer appropriate protection for children and the latter are most often prosecuted and sentenced to similar sentences as those of adults, in clear disregard of their particular vulnerability and need for adapted punishments and in total violation of international human rights standards.

Furthermore, and despite the UN guidelines regarding the accommodation of detainees, according to which *“every prisoner shall, in accordance with local or national standards, be provided with a separate bed, and with separate and sufficient bedding (...),”*²⁷ the vast majority of detainees in Egypt are not given individual beds and are often forced to sleep directly on the floor. This also violates Egyptian law, which states that *“each prisoner, male or female, shall receive the following items: a bed, a mattress, a bed sheet, a pillow, two pillow cases, one woolen blanket during summer or two during winter...”*²⁸ and that pre-trial detainees are also supposed to have *“one hospital-style bed, a mattress, one pillow, two pillow cases, two*

21 Ahram online, [Egypt's NCHR says 2600 killed since Morsi's ouster](#), 31 May 2015.

22 This was the case for Mr Waleed Abdularoof Shalaby, a journalist sentenced to death in the “Rabaa operations room” case on 11 April 2015. See more: Alkarama, [Egypt: 9 Journalists Sentenced to Death or to Life in Prison for “Implying Security Forces Violated Human Rights”](#), 21 May 2015.

23 See table of victims attached.

24 Alkarama, [Egypt: Arbitrary Detention, Torture and Sexual Abuse of an Adolescent Woman](#), 16 October 2014.

25 Article 10.2 (b) of the ICCPR and Rule 11.d of the Minimum Rules.

26 Alkarama, [Egypt: Teenage Student Sexually Abused in Alexandria Police Station](#), 19 January 2015.

27 Rule 21 of the Minimum Rules.

28 Egyptian Ministry of Interior, Decree 81/1959 on the treatment and living conditions of prisoners, 6 August 1959.

*bed sheets, one woolen blanket in summer and two in winter...*²⁹.

As a result of the cells' overcrowding, detainees are sometimes forced to stand for hours and take shifts to be able to lie down and sleep, sharing their blankets, when these are not confiscated by guards. Some are not even able to stretch their legs, while others report having to sleep on each other. It is only in so-called first-class cells, reserved to high-profile prisoners, that bunk beds are sometimes made available for detainees. Prison overcrowding is also a major source of infection, with sick inmates left in their overcrowded cells, increasing the risk of an epidemic.

Alkarama also received numerous reports of poor ventilation inside prisons, resulting from the number of individuals jailed in the same cells, but also from the lack of windows inside detention facilities. Prisons cells in Egypt frequently only have a small pane that is not clean and sometimes are the only source of light that prisoners can benefit from, especially for detainees held in solitary confinement. By not allowing sufficient amount of air in, these small windows are particularly problematic for detainees with respiratory issues, who are furthermore forced to share their cells with individuals who smoke or use recreational drugs. During the summer, the overcrowded and tiny cells retain the heat, making it extremely difficult for prisoners to breathe correctly, because of humidity and insufficient air renewal³⁰, which can also lead to death, as documented by Alkarama in the victims' table, which lists several individuals who died from suffocation.

Alkarama also documented cases of death from poor ventilation and overcrowding in prison vans during the transfer of detainees. The most notorious case occurred in August 2013, during a prison transfer of 612 detainees to Abu Zaabal Prison, when 37 individuals died due to suffocation after the police fired tear-gas inside the van.³¹ The van in question had been filled with 45 prisoners – over twice the number of prisoners it could reasonably hold, as an engineer's report explicitly states that it was built to admit a maximum of 24 people.³² Furthermore, the van had stayed six hours in the sun and the men inside had been left with nearly nothing to drink. At the time, the authorities released several contradictory statements regarding these deaths before agreeing to open investigations and prosecuting four of the 15 police officers who had been in charge of the van. Three of them were given suspended sentences, while only one was sentenced to 10 years in prison with hard labour, a sentence that was reversed in appeal in June 2015 while the court ordered a retrial.

Hygiene and sanitation are another major issue in Egyptian jails. Numerous reports have shown that cells in prisons and police stations do not meet the necessary safeguards required by international human rights standards. Egyptian prisons regulations specify that the prison's doctor should supervise the cleanliness of cells, but because of their regular absences, they do not fulfil their obligations. Cells are particularly dirty and infested with coackroaches, bedbugs and other insects causing prisoners further distress and sleep deprivation. Some detainees also report cells filled with rats.³³ The prison administration does not provide cleaning supplies to detainees, who have to rely on their relatives for this too. As for sanitary facilities, not all detention places have toilets inside the cells themselves, forcing inmates to wait for specific hours to be able to use them. When toilets are available, they are never cleaned, except by detainees themselves and are an important factor of infections in detention. Even when toilets are available inside the cells, they are not adequate and only seem there to diminish the prisoners' dignity. Finally, the food is of very poor

29 Article 83 of the Decision n°79 for 1961 Promulgating the Prison Regulations, 1961.

30 Egyptian Initiative for Personal Rights, Health in Egyptian Prisons, A field study on the determinants of health behind bars, June 2014.

31 Alkarama had at the time sent a communication to the United Nations Special Rapporteur on Extrajudicial, Summary or Arbitrary Executions.

32 The Guardian, [How did 37 prisoners come to die at Cairo prison Abu Zaabal?](#), 22 February 2014.

33 EIPR, *op. cit.*

quality, contributing to the general ill health.

Regarding visits, new amendments to the law on prison procedures have extended the maximum time of visit from 15 minutes for normal visits and 30 minutes for special ones to 60 minutes for either normal or special visits. The correct application of the law, however, greatly differs from one case to another, and families often face the arbitrariness of the authorities who refuse to grant them their right of visit. Finally, some individuals are being held for several months in solitary confinement, which means that they are also prevented from seeing their relatives, despite the fact that a prolonged detention of this type amounts to torture according to the SRT.³⁴ Alkarama has documented numerous cases of individuals who were detained *incommunicado* for months without any access to the outside world, such as the case of a 23-year-old civil engineer and charity worker arrested by the Homeland Security on 22 September 2014 and secretly detained and tortured for 119 days.³⁵ The amendments proposed by the Interior Ministry to the prisons regulations have fixed a six-month limit to solitary confinement, which is far from the commonly recommended limit set up by international bodies.³⁶

While the above failures of the prisons regulations and administration regarding conditions of detention are an important generator of deaths in detention, according to the findings in this report, it is the lack and sometimes absence of medical care in detention facilities that is at the origin of most deaths in detention since July 2013. Besides the denial of medical care, Egypt's systemic regime of torture, added to the absence of appropriate medical treatment, also leads to the death of numerous detainees, while impunity continues to be favoured by the legislators, preventing families of the victims to obtain any effective form of remedy.

34 UN General Assembly, Interim Report by the Special Rapporteur of the Human Rights Council on Torture and other cruel, inhuman or degrading treatment or punishment, 5 August 2011, 66th session, A/66/268.

35 Alkarama, [Egypt: Young Egyptian Charity Worker Severely Tortured in Azouli Military Prison Reappears after Middle East Eye Story](#), 28 January 2015.

36 The Revised Minimum Rules have in this sense recommended the prohibition of prolonged solitary confinement of more than 15 days while Rule 45.2 prohibits its use against women and children.

3. INTERNATIONAL AND LEGAL OBLIGATIONS RELATED TO HEALTH CARE IN PRISON AND THE PROHIBITION OF TORTURE

3.1 HEALTH CARE OBLIGATIONS

The conception of imprisonment is not meant to completely deprive an individual of his rights, but mainly to restrict his freedom of movement. He should, therefore, be free to enjoy his other rights, with the intrinsic restrictions that detention implies. In these conditions, the right to health is of particular relevance because its definition touches on many elements that are often lacking in detention facilities in Egypt. This part of the report aims at highlighting the practical and legislative issues that exist in the country regarding the prisoners' right to medical care, as well as the lethal consequences the denial of this right can have.

With regards to the definition of the right to health *per se*, Article 12 ICESCR³⁷ specifies that it is not only related to the right to healthcare but that its realisation is correlated to the fulfilment of several other human rights. It encompasses *"the rights to food, housing, work, education, human dignity, life, non-discrimination, equality, the prohibition against torture, privacy, access to information, and the freedoms of association, assembly and movement."*³⁸ The main idea is that right to health is subordinated to *"a wide range of socio-economic factors that promote conditions in which people can lead a healthy life"*³⁹ which contains *inter alia*, access to clean water and adequate sanitation as well as a healthy environment and diet, in short to appropriate conditions of detention, as briefly touched upon in the previous part. Regarding the beneficiaries of these rights, the UN Committee on Economic, Social and Cultural Rights (CESCR) underlined – in its General Comment on Article 12, ICESCR – the importance of the principle of non-discrimination and the need for everyone to be able to enjoy them freely.

The Committee specifically highlighted the obligation of the State to *"respect the right to health by (...) refraining from denying or limiting equal access for all persons, including prisoners or detainees (...) to health services"*.⁴⁰ Prisoners and detainees – and here the distinction is important – cannot be denied the right to health under the sole pretext of their detention. The fact that detainees are mentioned by the Committee means that even those who are not detained in official prisons and who are therefore not defined as prisoners under Egyptian law should benefit from the rights of the Convention. This is an important point regarding the question of detention in Egypt, as the majority of individuals are held in detention centres that are not official prisons. The CESCR guarantees should nevertheless apply to them.

In addition to the CESCR General Comment and the ICESCR, the Minimum Rules also address the question of medical care in detention and set out a principle of non-discrimination in this regard. It first indicates that the rules enshrined shall be applied impartially, including regarding political or other opinions. In Egypt, this clarification is of particular relevance since July 2013, given the thousands of arrests conducted against real or alleged Muslim Brotherhood supporters and secular activists. Political dissidents are entitled to the same rights as common criminals, even if the reality in the field presents a different image. While criminal detainees are not guaranteed sufficient access to medical care, it appears that political detainees are discriminated against even more with regards to the delivery of medical care, as demonstrated below.

The admission in prison should be a key moment in the detainees' medical care, as the Minimum Rules set out a number of rules to be followed by the prison personnel at this specific time, including the requirement for a doctor to examine each prisoner's health upon arrival or at the soonest possible date. The same obligation is provided by Egyptian law under Article 27 of Decision n°79 for 1961 Promulgating the Prison Regulations. The Egyptian law is, however, incomplete as it does not stipulate that the number of doctors present in detention facilities should be proportionate to the number of prisoners. Moreover, the practice

37 The International Covenant on Economic, Social and Cultural Rights (ICESCR) was ratified by Egypt on 14 January 1982.

38 OHCHR, Committee on Economic, Social and Cultural Rights, General Comment n°14: The Right to the Highest Attainable Standard of Health (Art. 12), 22nd Session, 11 August 2000, E/C.12/2000/4, para. 3.

39 Ibid. Para. 4.

40 Ibid. Para. 34.

differs from the law, as it is rare for a resident physician – and even rarer for a resident psychologist – to always be present in prison, undermining the possibility for detainees to be examined by a doctor upon their arrival. Subsequently, it becomes harder for the prison personnel to later assess each detainee's medical condition and adapt their conditions of detention in response.

Furthermore, this obligation does not concern unofficial prisons, leaving aside the majority of individuals who are detained in police stations or State Security departments and are thus almost guaranteed not to be examined by a doctor upon arrival.⁴¹ Finally, because the authorities have no legal obligations regarding the medical examination of detainees in custody, no measures are taken when an individual develops symptoms of illness during their pre-trial detention inside police stations or State Security departments. As emphasised above, it is therefore not particularly surprising to find that the majority of deaths identified in this report occurred inside police departments, justifying the need to have doctors present in all kinds of detention centres in Egypt rather than sporadically and only in prisons.

Besides the presence or absence of doctors inside detention centres, there is also an issue regarding their competence to treat detainees correctly. This observation applies particularly to the psychiatric knowledge that any physician should have, which is not specified in Egyptian law, but is required by the Minimum Rules that stipulate that every institution should have “*qualified personnel acting in full clinical independence and shall encompass sufficient expertise in psychology and psychiatry*”.⁴² As a consequence, even if a medical examination is made upon arrival or after, doctors are often unable to detect or treat cases of mental instability or psychological traumas that are more frequent in detention. This is particularly problematic because without a proper medical follow-up, detainees with psychological issues are at greater risk of committing suicide. According to the authorities, 11 individuals committed suicide in detention during the period covered by the report. There is also a need for a better specialisation of medical personnel as well as improved infrastructures. For instance, only two Egyptian prisons – Wadi El Natrun and Borg El Arab – have specific cells for disabled people, despite their particular vulnerability. Women and children also lack specific cells and care, especially pregnant women, as reported by several detainees.⁴³

The presence of doctors and their lack of specialisation in detention centres is all the more necessary now that many detainees who died in detention were not showing any kind of pathology when they were arrested. A preventive medical examination upon admission in a detention centre and a regular medical exam in detention, as underlined in Rule 30 of the Minimum Rules, could have prevented some deaths. For example, five detainees have died after severe asthma crises that led to their suffocation. With an appropriate medical supervision, these crises could have been avoided or treated in time. It also seems that symptoms that are usually easily treated outside detention centres, such as asthma, could be aggravated by the conditions of detention, confirming the need to quickly address this issue and to have permanent medical staff in places of detention.

Moreover, despite the requirements of Article 26 of Decision n°79 for 1961 Promulgating the Prison Regulations,⁴⁴ doctors do not inspect prisons every day, even when the prison has a resident doctor. This is even truer regarding the medical examination of prisoners in solitary confinement, where individuals are at greater risk of developing illnesses or psychological traumas. Even when individuals – in this case, particularly political detainees – ask for the authorisation to see a doctor because they are in pain, the prison administration often refuses them this right, or only at a later stage.⁴⁵ In the vast majority of cases

41 Ibid.

42 Rule 25.2.

43 Egyptian Initiative for Personal Rights, *Health in Egyptian Prisons, A field study on the determinants of health behind bars*, June 2014.

44 This decision complements the original Law n°396 for 1956 Concerning the Organisation of Prisons.

45 Alkarama, [Egypt: Former Freedom and Justice Party MP Dies in Detention After Being Denied Medical Care](#), 28 May 2015.

of arbitrary detention documented by Alkarama and submitted to the UN Working Group of Arbitrary Detention (WGAD), the authorities have refused medical visits to prisoners without giving reasons for their refusal, and without offering victims the possibility to challenge their decision. Put together, these elements have contributed to a strong rise in deaths in detention since July 2013, by facilitating the developments and spread of diseases in detention centres and by impeding their early detection and treatment.

The case of Jamal Mohamed Assaed Tafeh, submitted to the UN Special Rapporteur on the Right to Health (SRH) by Alkarama is illustrative of these practices and of the prison administration's complete disregard for the health of detainees. Arrested on 7 January 2014, Jamal was transferred to successive detention centres before being moved to Gamasa prison, where he awaited trial. Before his arrest, he underwent an open-heart surgery that necessitated permanent medical attention, an element that the prison administration was aware of. Not examined upon his arrival to Gamasa, and because of the harshness of the conditions of detention that weren't adapted to his condition, his health deteriorated rapidly. Despite developing two pneumonias, he was denied both medication and the right to see a doctor until his life was at direct risk. Even after the doctors who eventually examined him recommended his hospitalisation, the prison administration deliberately refused it.⁴⁶ Still in detention, Jamal is in particularly bad condition.

His case also sheds light on another dysfunction of the Egyptian prison regulations, which is that decisions from doctors are not legally binding on the prison administration. Although the Egyptian authorities amended the prison legislation in September 2014 – without prior consultation of the relevant stakeholders – they still did not make doctors' recommendations binding, allowing the prison personnel to challenge physicians' recommendations. In the event of a divergence of opinion regarding a prisoner's medical conditions, the new law only opened the possibility to challenge the director's decision before a committee formed by the Medical Services Department. This amendment is positive but could also further delay the decision to medicate or hospitalise the victim, allowing his condition to deteriorate and therefore making the amendment counterproductive or inefficient. With the prison administration having the last word even in cases of emergency, lives of individuals remain into the hands of officials who do not have the medical competences to evaluate the need for a detainee to be hospitalised or released.

As a consequence, prisoners are not given an explanation when their request to see a doctor or to be hospitalised is not considered, even though Rule 31 of the Minimum Rules specifies that sick detainees should be examined on a daily basis. Additionally, the procedure for the release of prisoners on health grounds is particularly complex and transfer requests from families are commonly dismissed by the prison administration – even when demands are supported by doctors – reinforcing the risk that detainees die from their diseases as prison hospitals are unable to ensure the necessary medical care for each individual.⁴⁷ The multiplicity of stakeholders involved in a decision regarding the health of a detainee, together with the complexity of procedures, also increases significantly the risk of death in detention. Simplified procedures, especially for urgent cases, would help the authorities prevent such incidents.

Furthermore, prison doctors are employed by the Ministry of Interior and subsequently fall under its authority, not that of the Ministry of Health. As a consequence, they must follow the same hierarchy as the rest of the prison personnel, a situation which can create conflicts of interest undermining the independence and impartiality of doctors. Amendments to prison regulations that were adopted in late October 2015⁴⁸ have not addressed this issue, even though the initial draft law first specified that doctors would be under the authority of the Ministry of Health. Hence, doctors can still not conduct independent medical examination of detainees. Additionally, it was reported that, except in cases of emergency, many

46 Alkarama, [Egypt: URGENT APPEAL – Allow Jamal Tafeh's Immediate Hospitalisation](#), 2 September 2014.

47 In fact, instead of examining each cases individually, the authorities prefer to simultaneously release several detainees on health grounds, as they did in September 2015 when 77 detainees were released pending investigations into their cases.

48 Alkarama, [Egypt: New Prison Law Creates Breeding Ground for Abuses and Restricts Prisoners' Rights](#), 27 October 2015.

detainees are reluctant to ask for doctors, both because of their lack of trust in the competence of the doctors themselves – the medical staff in prison is often junior⁴⁹ – and because they do not believe that their demands will be accepted.⁵⁰ This issue is exacerbated by the absence of appropriate medication in prison, which prevents physicians to correctly and timely treat sick detainees. The absence of well-timed medication can furthermore have a disastrous effects on other prisoners if the subject is affected by a virus or bacteria, especially when taking into account the systemic overcrowding of detention centres in Egypt. Article 40 of the Prisons Regulations⁵¹ nevertheless provides that:

“The pharmacist shall be entrusted with all types of medicine, medical tools and surgical instruments. He shall be responsible for keeping and maintaining them.”

Documentation from Alkarama and reports by local organisations however show that detention centres’ pharmacies do not have the most basic medication or only in small amounts, which is a particularly serious issue when taking into account the considerably higher risk of diseases in prisons compared to other public places. As a consequence, when victims are granted the right to see a doctor they are often given pain-killers no matter the condition they may have developed. The situation is even worse in police stations, which fall outside of the prisons regulations’ framework and therefore are not legally obliged to have a pharmacy. The only solution for detainees is then to ask their families to bring them the proper medication, which, even when they can afford it, is often confiscated by the prison personnel.

The case of Abu Bakr Ahmed Hanafi, documented by both Alkarama and the European Alliance for Human Rights (AED), is particularly illustrative of the authorities’ deliberate negligence and lack of appropriate medical care. Arrested at his work place in the Qoss Sugar Factory of the Qenna governorate on on 1 January 2014, 42-year-old Abu Bakr was in good shape and showed no signs of a disease. Charged in the “Qenna Stations” case together with 37 other individuals, he was brought to Qenna Public Prison, where he remained detained in solitary confinement for the first 20 days without access to the toilets or clean drinking water, and in a cell with poor ventilation. In June 2014, suffering from severe abdominal pain, Abu Bakr requested the right to see a doctor on several occasions, but to no avail.

Seeing that his state was seriously deteriorating, the authorities eventually authorised his urgent hospitalisation on 26 August 2014, in Qenna Public Hospital, where Abu Bakr was examined by a junior doctor who declared that his symptoms were only psychosomatic and that he could be brought back to prison. 10 days after his return to prison, as his state continued to worsen, the authorities sent him back to hospital for examination and a scan, which revealed, on 7 September 2014, that he had developed liver and pancreatic cancer. The physician consequently recommended that he be referred for treatment and an MRI scan to Asyut University Hospital. Instead, he was sent back to Qenna Public Prison.

Abu Bakr’s wife then submitted a request to the Public Attorney of Qenna to allow for his compassionate release on grounds of terminal illness or, at the very least, that he be referred to a specialised hospital. Her demand was turned down on the basis that it had to be filed during Court hearings on 20 or 25 September 2014 and not directly before the Public Attorney. Her demand before the court was later dismissed and the judge ordered the victim’s transfer to Asyut Public Hospital, a facility that is not equipped for the treatment of Abu Bakr’s condition. Following his unsuccessful hospitalisation, Abu Bakr was moved to a different hospital in early October, where a biopsy confirmed his initial diagnosis.

Nevertheless, the authorities sent him back to Asyut Public Prison until 28 October 2014, when he was

49 Egyptian Initiative for Personal Rights, [Health in Egyptian Prisons, A field study on the determinants of health behind bars](#), June 2014, p.15.

50 For example, Alkarama documented cases where doctors refused to examine detainees even though they had been brought to hospital by the prison personnel.

51 Ministry of Interior, Decision n°79 for 1961 Promulgating the Prison Regulations.

transferred again to Asyut Public Hospital, where he was handcuffed to a bed, in a room with six other terminally ill prisoners. A doctor who was checking on him realised that his file had been mixed with that one of another prisoner who had different symptoms. He subsequently requested another biopsy to confirm the initial diagnosis, a procedure that delayed his treatment further for another two weeks, accelerating the spread of his cancer. It is only on 12 November 2014 that he received his first chemotherapy treatment, over two months after he was diagnosed with cancer, when nothing could no longer be done. Abu Bakr was subsequently referred to Qenna University Hospital for different medical exams but the prison officer refused his transfer, stating that he had to be brought back to Asyut Prison pending the prison authorities' approval. On 13 November 2014, his wife was refused the right to visit him on the grounds that he was detained in a section of the prison reserved to men. Abu Bakr died a day later in Asyut Prison, although his death certificate indicates that he died in Asyut Hospital.

Numerous reports brought to Alkarama's attention show that there is a systemic failure in the medical care of detainees. In the table of victims (see annex), the majority of individuals died in detention because of a medical issue which could have been prevented – asthma crises, diabetes, etc. – if detainees had been examined upon their arrival to prison or while in custody. Alkarama therefore argues that the absence of a clear and effective legislation on access to medical care, coupled with the Egyptian authorities' blatant disregard for both their existing legal requirements and the Standard Minimum Rules for the Treatment of Prisoners, has been one of the major causes of deaths in detention, be they natural or provoked by humans, in particular through torture.

3.2 ABSOLUTE PROHIBITION OF TORTURE AND OBLIGATION TO PROSECUTE

While the almost total absence of medical care in detention is a particularly serious issue in Egypt, the practice of torture and ill-treatment in police stations, prisons and security departments often makes the news headlines. These cases are only the tip of the iceberg, as torture has been systematically practiced in Egypt for decades, and has only been on the rise since July 2013. According to the information received by Alkarama, torture is not an isolated phenomenon that can be found in one or two police stations or prisons in Egypt; its use is generalised to all kinds of detention centres that exist across the country.

The table of victims (annex 1) lists 34 verified cases of deaths resulting from torture. These numbers do not take into account cases of natural deaths where some elements indicate that they could have happened after the victim was tortured but were not acknowledged as such by the authorities, such as cases of deaths resulting from medical negligence and ill-treatment in particular, or deaths whose causes remain unknown to date. In order to explain and contribute to addressing this serious phenomenon, this part of the study exposes the changes that are needed in Egyptian law to offer a legal framework that would effectively protect detainees from the authorities' abuses, in addition to the need to implement these legislations by the police, security forces and prison personnel accordingly.

The most comprehensive international instrument regarding the prohibition of torture is the UN Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (UNCAT)⁵², whose definition of torture (Article 1) specifies that:

“For the purposes of this Convention, the term “torture” means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity.

⁵² The Convention was ratified by Egypt on 25 June 1986.

It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions.”

Article 7 of the International Covenant on Civil and Political Rights (ICCPR) also prohibits the practice of torture and ill-treatment. In fact, the absolute prohibition of torture is a rule of international customary law, meaning that it is enforceable even in the absence of ratification of one of these conventions by a State. As regards to Egyptian law, the 2014 Constitution adopted by referendum contains two articles that address the issue of torture. Their adoption has been a positive step for Egypt but they still fall short of the relevant international standards. Indeed, none of Article 52 or 55 of the Constitution contains a definition of torture as comprehensive as that of UNCAT. Article 52 enounces that *“torture in all forms and types is a crime that is not subject to prescription”* but it does not specify what is considered as torture, which is left to the appreciation of the law. On the other hand, Article 55 underlines that:

“Every person who is either arrested, detained, or his freedom is restricted shall be treated in a manner that maintains his dignity. He/she may not be tortured, intimidated, coerced, or physically or morally harmed; and may not be seized or detained except in places designated for that purpose, which shall be adequate on human and health levels. The State shall cater for the needs of people with disability. Violating any of the aforementioned is a crime punished by Law. An accused has the right to remain silent. Every statement proved to be made by a detainee under any of the foregoing actions, or threat thereof, shall be disregarded and not be relied upon.”

But if, according to this article, confessions obtained under duress shall be dismissed, there is, again, no precision on what is covered by the term *“torture”*. It is therefore essential to have, either in the Constitution or in the law, an article that defines torture as accurately as UNCAT does, so that the State can efficiently fight against all acts of torture and ill-treatment. In addition, as was recognised by the Egyptian authorities during their second Universal Periodic Review (UPR)⁵³ by the UN Human Rights Council (HRC), the Constitution is not of direct application and laws and decrees are needed to specify its implementation and scope. The prohibition and prevention of torture in Egyptian criminal law is regulated by Articles 126 and 129 of the Egyptian Criminal Code of Procedure (CCP). Article 126 CCP states that:

“Any civil servant or public employee who orders or carries out the torture of an accused person in order to extract a confession from that person shall be subject to a penalty of rigorous imprisonment or a term of from 3 to 10 years’ imprisonment. If the victim dies, the penalty shall be the one prescribed for intentional homicide.”

As a consequence, are only punishable under this article acts of torture that have been perpetrated with the intent to extract confessions, ruling out all hypotheses where individuals are subjected to torture wantonly, in retaliation for their actions, complaints or because of real or alleged political opinions, which concerns the vast majority of cases of torture that are documented by organisations in Egypt as well as Alkarama. Such hypotheses are underlined in Article 1 UNCAT which refers to torture perpetrated with the aim of *“punishing [an individual] for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing [an individual] or a third person, or for any reason based on discrimination of any kind [...]”*

This provision also excludes cases of torture that are less known by the public, such as the deliberate refusal of medical care that can amount to torture, as has been highlighted in the Special Rapporteur on Torture (SRT)’s report on *“Applying the torture and ill-treatment protection framework in health-care*

⁵³ General Assembly, National report submitted in accordance with paragraph 5 of the annex to Human Rights Council resolution 16/21, Egypt, A/HRC/WG.6/20/EGY/1, p.16

*settings*⁵⁴. Absence of medical care can come in addition to acts of torture that have been inflicted against an individual, representing acts of cruelty or degrading treatment when they are deliberately denied treatment in order to inflict pain on the victim. This link made by the SRT demonstrates the need to have a comprehensive legal framework that embodies both medical care in detention and the absolute prohibition of torture and ill-treatment, in order to correctly address these two intertwined issues that are particularly important in Egypt. By better preventing torture and guaranteeing medical care within one decree, Alkarama believes that the Egyptian authorities could drastically reduce deaths in detention.

Additionally, the absence of sanctions regarding these exactions is particularly problematic because it denies individuals effective legal safeguards that could prevent them from being subjected to torture. Laws should cover all instances that could occur and guarantee that sanctions are enforceable when needed. Furthermore, Article 126 CCP only makes a reference to individuals who are indicted, excluding all victims who have been tortured without having been charged or for whom investigations are ongoing. This legal omission is even more problematic as numerous cases of torture reported to Alkarama occurred in pre-trial detention, in particular during the first days of detention inside police stations – which lack judicial oversight – before the individuals were officially charged by a public prosecutor.

This omission creates a space for legal impunity and can therefore encourage police or security forces officers to torture an individual. The vast majority of the acknowledged deaths under torture documented in this study occurred in police stations or security forces departments, establishing a connection between the absence of legal safeguards (in these unofficial detention centres) and the proportionate risk of being subjected to abuses, which can possibly lead to the death of the victim. Moreover, Egyptian law does not mention mental or psychological harassment as possible forms of torture, even though many victims have reported having been threatened or repeatedly insulted by officers and subjected to psychological harassment. The narrow definition of torture in Egyptian law means that cases outside its framework fall under the legislation on cruel acts under which a State official who uses his position in an act of cruelty that violates the dignity of an individual person – a terminology that is not clearly defined – or causes him physical pain, should be prosecuted and sentenced to a maximum of one year in prison and a fine of 200 Egyptian pounds (approximately 25€). In addition to the fact that victims of torture are not recognised as such, the prescribed sentence for the officer seems derisory when compared to the ordeal that victims have to go through after having been tortured.

Finally, Article 282(2) of the Penal Code establishes that anyone who illegally arrests an individual and threatens to kill him or subjects him to physical torture is punished with hard labour and not prison. Effective and adequate sentences in response are fundamental in tackling issues such as torture and ill-treatment, not only because of their alleged deterring effect but also because it shows individuals, and here particularly victims, that perpetrators will be held to account for their acts, which is determining in the trust people put into law enforcement officials. The Egyptian legislation regarding the prohibition of torture is therefore not in line with relevant international standards and the absence of a real and clear definition of torture, as set out in Article 1 UNCAT, precludes victims from seeing their claims heard by judges. It is also a cause of the systemisation of this practice against all kinds of detainees, eventually leading to the death of some of them. Effective prevention of torture and ill-treatment and the punishment of perpetrators require laws to meet the conditions set out in UNCAT.

During their last review by the HRCtee, the Egyptian authorities accepted recommendations inviting them to adopt a definition of torture in line with the one set out in Article 1 UNCAT and to better criminalise the practice of torture. They have, however, failed to implement them so far.⁵⁵ In fact, in retaliation for

54 Human Rights Council, [Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment](#), Juan E. Méndez, A/HRC/22/53, 1 February 2013 (accessed on 15 October 2014).

55 Human Rights Council, [Informe del Grupo de Trabajo sobre el Examen Periódico Universal – Egipto](#), Adición, Observaciones

their participation to the drafting process of a non-binding anti-torture law, two judges were put under investigation by the authorities in April 2015, in contrast with the Egyptian authorities' commitments during their last UPR.⁵⁶ Additionally, in late October 2015, the authorities enacted law 105 of 2015 that amended several articles of law 396 of 1956 on Prisons Regulations that created a new space for abuses against prisoners. Under the new Article 8, prison personnel have the right to use force against a detainee as soon as he/she resists an order based on prisons regulations, vague terms that could lead to new cases of torture and ill-treatment.⁵⁷

Another issue regarding the practice of torture in Egypt lies in the fact that investigations into allegations of torture are ineffective both in law and in practice. Article 24 of the CCP stipulates that any individual who has been subjected to torture or other related crime can file a complaint, and it is then of the power of the Public Prosecutor (*Al Niyabaa Al 'Aama*) to consider the claim. This body, however, does not report to the judiciary but to the executive branch, which undermines his independency and impartiality, as police officers and prison personnel are under the same authority.⁵⁸ The Public Prosecutor has a discretionary power regarding the launch of criminal investigations into acts of torture, even in the event of the death of the victim. As a consequence, victims of torture or their relatives are not entitled to request the prosecution of those responsible before a court or to ask for concrete investigations.

According to Articles 63 and 232(2) of the CCP, only a prosecutor can accuse an official, while a victim can only register a complaint for compensation through civil proceedings. The prosecution thus enjoys absolute discretion on the investigation and prosecution of torture, and it alone can lodge an appeal. In addition, impunity for perpetrators is facilitated by the slow pace of investigations that can take several years from when they are ordered. In its conclusions on the practice of torture in Egypt following a confidential inquiry under Article 20 UNCAT in 1996, the Committee against Torture (CAT) declared that the slowness of legal remedies was indeed favouring impunity for torturers.⁵⁹ In the vast majority of cases documented by Alkarama, testimonies of torture and ill-treatment are dismissed by the prosecution and when investigations are launched, their conclusions do not lead to an effective prosecution. This pattern has been repeated in cases of deaths under torture, the public prosecution having launched very few investigations into those acknowledged by the authorities.

In some cases, the public prosecutor was made aware of the exactions because the victim presented signs of torture on his body and face when he was brought before him, but he nevertheless decided to send him back to detention, without taking any protection measures, thus putting the victim at even greater risk of being tortured again. Moreover, it is not possible to make a public prosecutor liable for or accomplice to a death that occurs in detention, even when he knew that the individual was at risk of torture if he was sent back in detention, as no judicial remedy exists in such a hypothesis. Alkarama's study also documented two cases of death under torture that took place inside military prosecution facilities, and several others in courts buildings. These examples illustrate the silent participation and acceptance by the public and military prosecution of abuses against detainees, and of the way these exactions are seen as a common practice, notably because the law itself does not criminalise it accordingly. These unfortunate deaths are not surprising if they are tolerated at the highest levels. If an officer does not have a clear limit imposed by

sobre las conclusiones y/o recomendaciones, compromisos voluntarios y respuestas del Estado examinado, A/HRC/28/16/Add.1, 2 March 2015 (Spanish version).

56 Daily News Egypt, [Judges face investigation on anti-torture law](#), 14 April 2015.

57 Alkarama, [Egypt: New Prison Law Creates Breeding Ground for Abuses and Restricts Prisoners' Rights](#), 27 October 2015.

58 A thorough study by the International Bar Association Human Rights Institute has highlighted the failures of the judiciary and prosecution regarding their independence from the executive branch. International Bar Association Human Rights Institute, *Separating Law and Politics: Challenges to the Independence of Judges and Prosecutors in Egypt*, February 2014.

59 Report of the Committee against Torture, Geneva, 9 July 1996 (A/51/44), para. 206.

law and is not trained accordingly, how will he fix his own limit? This absence of limits is further enforced by the absence of regular trainings for law enforcement officials regarding the prevention of torture and how they should treat detainees, especially for low ranked officers, who are generally the ones that will perpetrate the abuses ordered by their hierarchy.

The impunity with which officers are subjecting individuals to torture increases the risk that they be killed by officers during their ordeals. It was shown in different studies that speediness in procedures and the certainty of having a court sentence at the end of the judicial process can have a deterrent effect on individuals.⁶⁰ Finally, there is a clear conflict of interest in Egyptian law regarding the prosecutors' competences, as they are responsible for inspecting detention centres, ordering forensic examinations, investigating and prosecuting officials accused of committing abuse, as well as for making arrests, obtaining confessions from the suspects and prosecuting them.

Furthermore, while obtaining a medical certificate attesting torture is essential for the victims and their families to obtain compensation in court, not only the Public Prosecutor is the only person empowered to order a legal medical examination, but the practice has shown that courts do not always accept certificates issued by hospitals in cases against government officials. In addition, legal medical reports often miss signs of torture because they are ordered too late for such signs to be visible. Alkarama documented several cases in which an individual's time in detention was extended until the bruises on his body had disappeared, before he was brought to court or to the public prosecution, undermining the possibility to physically establish the torture he was subjected to. In other cases, the authorities also declared that individuals had committed suicide in detention without leaving the possibility for the families to challenge the veracity of their accounts. Similarly, the authorities often testify that the victims died of sudden and severe hypotension or heart attack⁶¹, a factor that could result from torture, especially when taking into account the fact that most victims did not have symptoms or predispositions for these kinds of medical conditions before their arrest. In fact, the authorities do not mention the underlying causes of death, giving only the medical explanation to the death. The impossibility for families to benefit from an independent autopsy makes it difficult to contradict official statements.

For instance, in the case of 28-year-old lawyer Karim Hamdy, who died in a Matareya police station on 25 February 2015, his family was asked to sign a preliminary medical report claiming that he had committed suicide.⁶² It is only once his case was brought to the attention of the media and that pictures of his body showing clear signs of torture were released on social media that the public prosecution opened investigations into his death and requested the arrest of the police officers presumed to be responsible for it.⁶³ Without media pressure, it is nearly certain that nothing would have been done regarding his death.

Since the beginning of 2015, the public prosecution opened more investigations into cases of death under torture and related abuses⁶⁴ mostly because media, local organisations and international organisations increasingly report cases of torture, sexual abuse or death in detention. The outcomes of these investigations and subsequent trials have not been disclosed yet and it is uncertain whether they will lead to the sentencing of the perpetrators or not. In one of the rare cases of death under torture that was investigated

60 Kleinman, Mark A.R, 'When Brute Force Fails', Princeton, Princeton University Press, 1999.

61 For instance, a man died in a police station in May 2015 in vague circumstances. After his death, the police first claimed that it was because of low blood pressure and that they had tried to provide him with medical assistance but reports from his family showed that the victim had been assaulted upon arrest and that he likely died under torture in custody. The public prosecution has since launched investigations into his death. See: Daily news Egypt, [Policemen detained pending investigations on torture accusations](#), 9 May 2015.

62 Egypt, [2 prisoners allegedly die of torture in Matariya Police Station](#), 25 February 2015.

63 Middle East Eye, [Two Egyptian police arrested over 'torture' death in custody](#), 27 February 2015.

64 Daily News Egypt, [Police officers prosecuted for rape, torture leading to death](#), 25 May 2015.

by the authorities and led to the sentencing of Homeland Security officers in 2012, the officer convicted was finally acquitted by the Alexandria Criminal Court in May 2015.⁶⁵ This case casts a shadow on the independence of the judiciary and reinforces the sense of impunity for victims of torture and their families.

As underlined above, the public prosecutor is also in charge of inspecting detention centres. Prosecutors, however, rarely use this competence and the visits conducted have not led to concrete measures. These visits could be a useful tool to prevent the practice of torture. After receiving authorisation from the authorities, the Egyptian national human rights institution, the NCHR also conducted a visit of Abu Zaabal prison and reported that detainees were subjected to ill-treatment, but did not declare having received testimonies of torture, even though local and international organisations submitted several testimonies of torture victims in the past two years in this same place of detention.

Although the former General Prosecutor, Hisham Barakat first denied the NCHR allegations,⁶⁶ he later called the prosecutors and the Ministry of Interior to make surprise visits to detention centres.⁶⁷ Nine detention centres were visited, on 6 April 2015, and investigations requested into the violations reported. However, at the time of the report, no publicly disclosed action had yet been taken regarding the ongoing inquiries. In the end, the Ministry of Transitional Justice approved granting the NCHR with the right to monitor and make prison visits on the condition of notifying the authorities, where they were previously requested to obtain an authorisation.⁶⁸ This amendment could facilitate the reporting of ill-treatment and torture, but cannot be deemed sufficient as, not only is the NCHR not independent enough to monitor places of detention, but also the public prosecutor remains the only person empowered to open investigations into cases of torture committed by the authorities.

In light of the above-mentioned elements, it appears that the Egyptian legislation on torture and ill-treatment falls short of the standards outlined in UNCAT, thus undermining the rule of law in the country. As a consequence, the authorities are given *carte blanche* to perpetrate all kinds of abuses against detainees and eventually, to kill them. It is high time the authorities take the necessary measures to tackle this generalised and systematic practice by adopting a more comprehensive legislation and by training their law enforcement officials accordingly, while offering real remedies to victims and their relatives.

65 Daily News Egypt, [Policeman accused of killing Sayed Belal acquitted](#), 29 May 2015.

66 Ahram Online, [Egypt's prosecutor-general denies torture inside Abu Zaabal prison](#), 12 April 2015.

67 Aswat Masriya, [Egypt's top prosecutor orders "surprise" search operations for detention facilities](#), 8 April 2015.

68 However, on 24 and 25 August 2015, the NCHR was only able to visit Damanhour prison for women and Al Aqrab prison after an authorisation from the Ministry of Interior. Furthermore, the NCHR was at first supposed to visit Abu Zaabal and not Al Aqrab but a change was made at the last minute. In its statement, the NCHR declared that the members of the Council did not see anything wrong in Al Aqrab prison, which sparked criticism from Egyptian NGOs and eventually from members of the NCHR themselves. See Egypt Independent, [NCHR's favorable review of al-Aqrab prison sparks controversy](#), 1 September 2015.

4. DOCUMENTATION OF CASES

To illustrate the multiple issues in Egypt's detention policies and practice, Alkarama and AED summarised different illustrative cases of individuals who died in detention, either under torture or because of medical negligence.

4.1 TORTURE CASES

- Mr Imad Ahmed Mohammed **Al Attar** (المعتقل عماد أحمد محمد العطار), a 42-year-old man

Imad Al Attar was arrested on 30 January 2014 after having participated in a peaceful demonstration in the Matareya district of Cairo. He was brought before the public prosecutor who remanded him in custody. Following the renewal of his pre-trial detention, he was tortured to death by Homeland Security officers in Matareya police station as they attempted to force him into making false confessions. He was declared dead on 25 February 2015, together with Karim Mohamed Hamdy whose case is outlined below.

Although the authorities had initially declared that his death resulted from a vague “*circulatory collapse*”⁶⁹, the forensic report established at the demand of the authorities stated that Al Attar had died under brutal torture and that his death was the consequence of multiple electric shocks and beatings on his body, including genital parts. Al Attar was also denied medical care by the authorities, aggravating his health condition that ultimately led to his death. The public prosecution launched investigations into his death and the two Homeland Security officers presumed to be responsible for it should be standing trial, but they have been released on bail and their trial postponed indefinitely by the Cairo Criminal Court.⁷⁰ It remains one of the few examples of prosecution of law enforcement officials to date.

- Mr Karim Mohamed **Hamdy**, (كريم محمد حمدي), a 28-year-old lawyer

Karim Hamdy was arrested from his home in the El Marg district of Cairo on 22 February 2015. Brought to Matareya police station, he was tortured by Homeland Security officers before being referred to the public prosecutor. Despite informing the prosecutor of the acts of torture he had been subjected to, his testimony was not taken into account. Instead, the prosecutor charged him with “*possession of weapons*”, “*affiliation to the Muslim Brotherhood*” and “*violence*” and ordered his return to Matareya police station. In retaliation for his complaints to the public prosecutor, and presumably to force him to confess to the charges held against him, the young lawyer was again tortured by the Homeland Security officers. He succumbed to his wounds on 25 February 2015. To Alkarama, there is no doubt that the prosecutor knew of the high risks of torture he was subjecting the victim to by sending him back to Matareya police station, becoming complicit in his death.

Similarly, although the preliminary medical report indicated that Hamdy had committed suicide, the forensic report n°449-2015 highlighted that the young lawyer had suffered from fractured ribs, bruises and severe bleeding from his head and chest. As the case was heavily covered by the media, the authorities launched investigations into his death and two Homeland Security officers were later arrested and prosecuted for having tortured him to death. They were however released on bail and their trial similarly postponed indefinitely by the Cairo Criminal Court.

- Mr Imam Mohamed Imam **Afifi** (الإمام محمد إمام عفيفي), a 63-year-old lawyer

Imam Afifi was apprehended by local residents in the Matareya district of Cairo on 10 April 2015 after he took part in a demonstration and was allegedly handed over to the police.⁷¹ Brought to Matareya police station, the lawyer was tortured for five consecutive hours by means of beatings and cigarette burns on his entire body. On 11 April 2015, as his health was endangered, he was transferred to Matareya Educational

69 Daily News Egypt, [2 prisoners allegedly die of torture in Matariya Police Station](#), 25 February 2015.

70 Daily News Egypt, [Trial of National Security officers accused of torturing lawyer to death cancelled](#), 28 July 2015.

71 The Cairo Post, [Lawyer dies in hospital after detention at Matariya police station](#), 23 April 2015.

Hospital, where he died on 22 April 2015, after having been in a coma. Afifi had suffered from a severe brain haemorrhage and was presenting several bruises and burns on the body, attesting to the torture he had been subjected to.

The authorities however first claimed that he had died because of the beatings that he was allegedly subjected to by local residents when they apprehended him and not because of the torture he suffered in the police station.⁷² In either case, by keeping him in custody rather than bringing him to hospital straight away, the police made itself responsible for his death.

4.2 LACK OR ABSENCE OF MEDICAL CARE CASES

- Dr Safwat Khalil Khalil **Shabura** (صفوت خليل خليل شبرورة), a 58-year-old man

Safwat Shabura was arrested on 4 August 2013 on charges of “*belonging to the Muslim Brotherhood*” following the overthrow of Morsi’s government by the army. Although he was already suffering from cancer, the 58-year-old was denied chemotherapy and general medical care by the prison personnel. Detained in inhuman conditions together with 40 other detainees in a cell that could only accommodate 10, and denied medical treatment, his condition quickly aggravated and he died from cancer on 27 September 2013.

- Mr Mahmoud Abdulrahman **Al Mahdi** (محمود عبد الرحمن المهدي), a 51-year-old man

Mahmoud Al Mahdi had been arrested a first time in early 2014 and charged with “*incitement to violence*” and “*affiliation to a terrorist entity*” before being released on bail a few months later. He was however arrested again on 20 August 2014, even though he had not breached the terms of his bail, in order to force his son to turn himself in. Following his reincarceration in harsh conditions in Ataka Central Prison, in Beni Suef, Al Mahdi’s health quickly aggravated. This was further exacerbated by the complete absence of medical assistance provided by the prison personnel. Because of the overcrowding in his cell, he suffered from stress and sleep deprivation which increased his diabetes and heart problems.

Following a heart attack which he survived, a health inspector recommended that the 51-year-old be transferred to an intensive care section, but the prison personnel refused and only sent him to Beni Suef General Prison Hospital. There, another doctor recommended that he be put in intensive care, but to no avail. At the end of October, the authorities appointed another doctor who wrote in his medical report that Al Mahdi did not need to be put in intensive care and that he could therefore be brought back to prison. Consequently, the authorities transferred him to Ataka prison, but two days later his health took a turn for the worse, forcing his urgent hospitalisation in intensive care. Just a day after, however, he was brought back to Beni Suef General Prison Hospital, where he died on 3 November 2014.

- Dr Tarek Mahmoud **Ghandour** (طارق محمود الغندور), a 55-year-old Dermatology professor

Tarek Ghandour was arrested in his home in the 8th District of Nasr City on 18 December 2013. Brought to Nasr City Police Station, he was charged with “*arson of an underground station in Masr Al Ghadida*”, “*participation and incitation to demonstrate without authorisation*” and “*affiliation to the Muslim Brotherhood*”. He stayed for one month inside an overcrowded and dirty cell inside the police station during which he was refused medical treatment, despite having developed liver cirrhosis, hepatitis C and a splenomegaly.

In mid-January, he was moved to Abu Zaabal prison where he was detained for nearly five months before being sentenced to five years in prison in May 2014. From April 2014, his family started to ask for his transfer to hospital and, at the end of the month, the East Cairo General Prosecutor eventually wrote a letter to Abu Zaabal prison asking for his transfer to a specialised hospital for medical exams and if needed, surgery. The letter was supported by a report of Abu Zaabal Prison’s doctor who recommended his urgent

⁷² Egypt Independent, [Prosecution denies another lawyer died of torture in Matareya](#), 24 April 2015.

hospitalisation and particularly that he undergo a liver transplant.

The authorities' demands were, however, not followed by the prison authority and Dr Ghandour was transferred to Wadi Al Natrun Prison in June, a place of detention not equipped for his condition. In October, Tarek was, again, moved to Shebin Prison in the Menoufia Governorate, where he finally underwent medical tests at the National Liver Institute that showed that he had developed a thrombocytopenia and a esophageal varices – a consequence of cirrhosis – and that he had to undergo surgery. He was, however, immediately brought back to prison after his operation, without any time to recover. According to his family, the dermatology professor had not even been informed of the procedure nor given the time to consent to it. His health continued to decline and he started vomiting blood on 11 November 2014. He was consequently urgently brought to Monufia University Hospital, where he did not receive medical care and his family had to walk him to the Liver Institute, where he fell into a coma and died in intensive care the following morning on 12 November 2014.

- Mr Khaled Mohamed **Said** (خالد محمد سعيد), a 46-year-old man

Khaled Said was arrested as he was visiting his two sons in Beni Suef Police Department on 13 January 2014. Brought to Beni Suef Homeland Security Department where he was able to contact his wife, he was later accused by the public prosecutor on charges related to the arson of Beni Suef police station in 2013, and subsequently placed in custody in Beni Suef Central Prison, pending investigations. He remained there for six months before being released on bail in July 2014. He was, however, immediately arrested again and charged with “*belonging to the Muslim Brotherhood*” and “*arson*” and brought to Al Fayoum Central Prison while his case was referred to Beni Suef Military Court.

Despite suffering from cirrhosis and hepatitis C, Said was denied medical care from the prison personnel, which led to a quick worsening of his health condition. The prison administration also refused his family's numerous requests to hospitalise him, and only allowed the medication they were bringing to him in small amounts, when they were not simply confiscating it. He was eventually transferred to hospital for examinations that showed that he had developed a hepatosplenomegaly – an enlargement of both the liver and spleen – but was nevertheless sent back to prison despite the doctors' demands. Deprived of medical care by the prison administration despite his urgent need for treatment, he died on 23 March 2015.

- Mr Abdel Muti **Ali Khalil** (عبد المعطي علي خليل), a 54-year-old teacher and shop-owner

Abdel Khalil was arrested by police forces in his shop in Raml in the Alexandria Governorate on 27 July 2014. He was immediately brought to Raml Police Station where he was detained *incommunicado* for a couple of days. Despite suffering from several medical issues – including kidney and liver problems, diabetes and hyper-tension – pathologies for which he was medicated and regularly examined by a doctor, the 54-year-old teacher and shop-owner was denied medical care both at Raml Police Station where he initially stayed and in the Alexandria Police Department where he stayed for two months in particularly harsh conditions, before being transferred to Borg El Arab Prison. There, he was authorised to receive sporadic visits from his wife, who brought him his medication, but the prison personnel was allowing insufficient amounts to alleviate his pain. They eventually refused to accept any of Khalil's medication, and his wife was forced to bribe officers to smuggle it in.

As a consequence of the harsh detention conditions and the inappropriate medical care he was provided, Khalil's health deteriorated to the point that the doctor who eventually examined him recommended his hospitalisation, but the prison administration did not allow it at first. It is only after a serious aggravation of his condition that he was transferred to hospital, in mid-April 2015. His wife was never told which hospital he had been sent to, preventing her from visiting him. She went to the prison one last time on 20 April to ask about his whereabouts, but her demands remained again unanswered. She eventually learnt on 21 April that he had died in hospital and was never given an explanation for his death.

- Mr Mohammed Mohammed Mohammed **Al Fallahgi** (محمد محمد محمد الفلاحجي), a 58-year-old former Parliamentarian from New Damietta City

Mohammed Al Fallahgi was arrested by the Homeland Security at his place of work, in the Education Department of Damietta, on 26 August 2013. He was immediately brought to Damietta's second police station in the old town, where he was put in custody for a day before being transferred to the Central Security Forces facilities in Damietta where he remained detained *incommunicado* for over a year, until 1 October 2014. Although the majority of the accusations held against him were dismissed by the Damietta Criminal Court in February 2015, the former Member of Parliament was not released. Instead, he was charged with *"incitement to arson against the Islamic centre of Damietta"*.

During his detention, his health seriously aggravated, but his family's demands to the authorities to authorise his hospitalisation were constantly refused. The authorities eventually authorised his urgent hospitalisation on 20 May 2015, but it was too late and the hospital personnel were unable to save him. He died on 25 May 2015 from a liver failure and after having been constantly denied medical care in detention.

4. CONCLUSIONS

Failure to provide appropriate medical care, absence of resident doctors in prisons, cruel and inhuman conditions of detention, widespread and systematic practice of torture and ill-treatment in detention, absence of supervision of prisons, etc. – this is a nonexhaustive list of the Egyptian authorities' failure to meet their domestic and international obligations. As a consequence, at least 323 individuals (Egyptian and foreigners) died in Egyptian detention facilities between August 2013 and September 2015. This phenomenon is not isolated. In fact, it occurred in every Egyptian governorate, whether in official or unofficial detention facilities existing across the country – prisons, police stations, security forces camps, juvenile centres and even courts buildings.

While the authorities continue to repress all kind of dissidence in the country and to arrest hundreds of real or alleged political opponents each month, deaths in detention are on the rise because the factors of these deaths, as underlined in the report, are exponential, in the sense that the more people will be detained under these conditions and laws⁷³, the more deaths will be reported. These deaths will be the consequence either of a lack of medical care or torture, or of increasingly difficult conditions of detention, exacerbated by the issue of prison overcrowding.

While there is uncertainty around the causes of death of 35 individuals, the table shows that the majority of detainees who officially died since July 2013 succumbed to medical issues. According to the data available, the causes of deaths are often similar: cancers, diabetes and hepatitis. If we cannot ignore that several of these medical conditions could have developed long before the arrest of these individuals, it does not lessen the authorities' responsibility in the occurrence of these deaths. By not adopting an appropriate response to the detainees' various pathologies, the authorities have accelerated and aggravated their medical conditions, ultimately leading to their respective deaths. It also appears that individuals were only brought to hospital too late, when doctors were no longer able to help them and following a complex process of prisoners' transfer to medical centres. It is unsure whether an earlier hospitalisation could have saved some of the victims, but it is certain that their hospitalisation at such a late stage was not the appropriate response.

Moreover, the authorities usually do not investigate deaths in detention and refuse to deliver death certificates to families, who are only given vague reasons to explain the death of their relatives, without the possibility of requesting independent autopsies.

These vague reasons – sudden hypotension, suicide, severe fatigue – suggest that the individuals may have died in a different way or that external factors may have contributed to their death, such as ill-ventilation, lack of hygiene and ill-treatment. These dysfunctions are first and foremost the consequence of the authorities' deliberate behaviour against detainees and their families, but also the result of the lack of a clear, comprehensive and enforceable legal framework regulating the treatment of detainees, including legal safeguards to ensure the absolute prohibition of torture and provide access to medical care.

Moreover, the facts that the law doesn't provide remedies for families of the victims and that only public prosecutors have competence to open investigations, prevent families from obtaining redress for the death of their relatives. The law itself creates an environment of impunity, witnessed on a daily basis. In fact, even in cases where an investigation has been launched, the procedure is long and complex, representing an additional dissuading factor for families. The acquittal of officers prosecuted, despite elements clearly showing their responsibility in the death of the victims, also raises questions regarding the judiciary's independence, and further reinforces the families' resignation.

In the end, this report shows that, without a proper amendment of the prison system, abuses will continue unabated and deaths will keep on being reported on a regular basis. Deaths in detention are in fact symp-

73 The adoption of a new and particularly draconian anti-terrorism law in August 2015 can only add to the risk of having new massive arbitrary arrests of individuals under the pretext of the fight against terrorism. See more: Alkarama, [Egypt: Alkarama Denounces Adoption of Restrictive Anti-Terrorism Law](#), 19 August 2015.

tomatic of the authorities' behaviour since July 2013, in particular of their will to repress all kind of dissent by any means. More than a year after Abdel Fattah El Sisi's election as President of Egypt in June 2014, human rights violations across the country are unprecedented and detentions issues are only the tip of the iceberg.

These violations are nonetheless of particular concern because it is the system as a whole that has led to the death of these 323 individuals. As demonstrated in this report, these deaths are the result of (i) the absence of an efficient and independent judicial oversight of detentions; (ii) the authorities' complete disregard for decent conditions of detention; (iii) the absence of effective local remedies to handle the constant abuses of detainees; (iv) the discretion left to the executive to transform, without prior checks or necessary changes, police stations into prisons; (v) the impunity that the perpetrators of torture or ill-treatment enjoy; and (vi) the legal vacuum that exist in Egyptian law regarding these different issues.

With the appropriate political will, the four factors of death in detention – use of non-official detention facilities, deplorable conditions of detention, absence of medical care and torture – identified by Alkarama can be tackled and lead to an improved treatment of detainees. It is high time that the authorities shape a new vision for the protection and promotion of human rights in the country and effectively implement it. This is why Alkarama invites the Egyptian authorities to implement the following recommendations and to immediately ensure that the existing legal frameworks regarding the prohibition of torture, medical care in detention and conditions of detention are being enforced. Alkarama also calls on the international community to exhort the Egyptian authorities to take immediate measures to urgently remedy to this situation.

4. RECOMMENDATIONS

To the Egyptian authorities

Regarding the practice of torture and ill-treatment:

- Clearly and publicly oppose all forms of torture and ill-treatment, in every circumstance;
- Establish a national plan to fight torture with all relevant stakeholders and set up a roadmap;
- Amend the legislation on torture and put it in line with international standards, particularly with the Convention against Torture (UNCAT);
- Ensure that all confessions obtained under duress are rejected in courts;
- Establish an independent monitoring and complaint system regarding allegations of torture and ill-treatment;
- Open effective investigations into allegations of torture and ill-treatment and offer compensations to torture victims and their relatives;
- Train law enforcement officials and prison personnel on the prevention and prohibition of torture;
- Guarantee that children are isolated from adults and detained in adapted centres;
- Adopt a protective and enforceable legislation to prevent ill-treatment and torture of women in detention with an emphasis on sexual abuses;
- Ratify the Optional Protocol to the UNCAT.

Regarding access to medical care in detention and conditions of detention:

- Ensure that individuals are not detained inside police stations for periods of time exceeding the normal time in custody;
- Repeal the competence of the Ministry of Interior to designate detention facilities as being prisons;
- End detention inside Security Forces and Homeland Security Departments;
- Establish a national plan to end overcrowding of prisons and disclose the exact number and location of detainees;
- Ensure that at least one physician with psychiatric knowledge is systematically present in prisons and guarantee their independence from the prisons' administration and the Ministry of Interior;
- Guarantee that all detainees are granted the right to be examined by a doctor upon request and arrival in detention;
- Facilitate the modalities of transferring detainees to hospital, especially for urgent matters;
- Guarantee that NCHR members can independently visit detention centres at any time and that they be granted access to all parts of the facilities upon request;
- Release all detainees that are being held for political reasons;
- Resort to alternative measures other than imprisonment especially for individuals in preventive custody or who have been sentenced for small felonies;
- Ensure that all cells are correctly ventilated and meet the basic hygienic and sanitary requirements;
- Guarantee the right to visit and to exercise for all detainees;
- Ensure that all individuals detained benefit at least from the rules edicted in the Revised Standard Minimum Rules for the Treatment of Prisoners;
- Ratify the Optional Protocol to the International Covenant on Economic, Social and Cultural Rights (ICESCR).

To the international community

- Push for the ratification of both the Optional Protocols to the UNCAT and the ICESCR;
- Publicly condemn the practice of torture and ill-treatment in detention in Egypt and ask for the prosecution of perpetrators;
- Subject military, financial or any other relevant aid or investment to the effective respect of human rights;
- Advocate for the release of all individuals arbitrarily arrested and detained in Egypt.

5. ANNEXES

Annex A : Table of victims

Annex B : Official list of Egyptian prisons (Arabic)

Annex C : Ministry of Interior decisions regarding police stations and administrative buildings (Arabic)

NAME	NAME IN ARABIC	GENDER	AGE	DATE OF DEATH (M/D/Y)	REASON FOR ARREST	PLACES OF DETENTION	GOVERNORATE	CAUSE OF DEATH	DEATH DISCLOSED BY
Alsayed Issa El Sharkawy	السيد عيسى الشرفاوي	Male	53	8/14/2013	Political	Shubra El Kheima Police Station	Cairo	Unknown	Media
Ibrahim Mohammed Ibrahim Aldahshan	إبراهيم محمد إبراهيم الدهشان	Male	62	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Abu Talib Abdalgawad Suleiman	أبو طالب عبد الجواد سليمان	Male	38	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ahmed Ibrahim Kamel Hamzawy	أحمد إبراهيم كامل حمزاوي	Male	30	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ahmed Ibrahim Mohamed Kurdi Mohamed	أحمد إبراهيم كردي محمد	Male	43	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ahmed Khamis Mohamed	أحمد خميس محمد	Male	31	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ahmed Shaaban Ragab	أحمد شعبان رجب	Male	35	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ahmed Mohamed Ragab Mandour	أحمد محمد رجب مندور	Male	31	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Gamal AbdelRahman Mohamed Abdelrahim	جمال عبد الرحمن محمد عبد الرحيم	Male	20	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Hassan Ibrahim Mohammed Kurdi Mohamed	حسن إبراهيم كردي محمد	Male	49	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Reza Alsayed Ahmad Alsayed	رضا السيد أحمد السيد	Male	34	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Rafiq Mohammed Ibrahim Abdulghani	رفيق محمد إبراهيم عبد الغني	Male	30	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Sayed Barakat Shaaban Ahmed	سيد بركات شعبان أحمد	Male	36	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Said Sayed Gumaa Issa	سعيد سيد جمعة عيسى	Male	27	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Sharif Gamal Mohammed Siam	شريف جمال محمد صيام	Male	29	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Shukri Ibrahim Badr Saad	شكري إبراهيم بدر سعد	Male	50	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Safwat Ahmed Abdullah Abdulqadir	صفوت أحمد عبد الله عبد القادر	Male	20	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Tariq Mohammed Hamid	طارق محمد حامد	Male	28	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Talaat Abdelazim Ali	طلعت عبد العظيم علي	Male	38	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Adel Abdelshafi Abdelhafez	عادل عبد الشافي عبد الحافظ	Male	40	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Abdel Moneim Mohammed Mostafa	عبد المنعم محمد مصطفى	Male	Unknown	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Aladdeen Hussein Issa Ahmed	علاء الدين حسين عيسى أحمد	Male	48	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ali Mhanna Ali Abu Khdeir	علي مهني علي أبو خضير	Male	19	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Farag Sayed Farag Gad	فرج السيد فرج جاد	Male	40	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mohammed Ismail Mohammed Saleh	محمد إسماعيل محمد صالح	Male	32	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ahmed Tawfiq Suleiman	أحمد توفيق سليمان	Male	53	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mohamed Hassan Sayed Ahmed Hassan	محمد حسن السيد أحمد حسن	Male	23	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mohammed Ramzi Abdullah Khalil	محمد رمزي عبد الله خليل	Male	32	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mohammed Shehata Ismail	محمد شحاتة إسماعيل	Male	38	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mohamed Abdelmeguid Mahmoud Ibrahim El Deeb	محمد عبد المجيد محمود إبراهيم الديب	Male	27	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mahmoud Abdullah Mohammed Ali	محمود عبد الله محمد علي	Male	Unknown	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mustafa Mohamed Abdulsalam Mohammed	مصطفى محمد عبد السلام محمد	Male	32	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mustafa Mohammed Mustafa Mahmoud	مصطفى محمد مصطفى محمود	Male	Unknown	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mamdouh Sayed Abdullah Hussein	ممدوح سيد عبد الله حسين	Male	Unknown	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mansour Abdeltawab Abbas	منصور عبد التواب عباس	Male	40	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Mahdi Mahmoud Mehdi	مهدي محمود مهدي	Male	27	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Hisham Abu Azzam Hafez	هشام أبو عزام حافظ	Male	24	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Walid Sayed Mohammed Al Nagar	وليد السيد محمد النجار	Male	Unknown	8/18/2013	Political	Abu Zaabal Prison area - El Khanka	Qalyubia	Suffocation due to tear gas (police van)	Ministry of Interior
Ahmed Abu Sari	أحمد أبو سريع	Male	38	8/28/2013	Criminal	Sayeda Zeinab Police Station	Cairo	Severe fatigue (official reason)	Ministry of Interior
Mohammed Mohammed Abdullah	محمد محمد عبد الله	Male	28	8/28/2013	Criminal	Wadi El Natrun Prison - Sadat	El Beheira	Unknown	Ministry of Interior

Unknown	مجهول	Male	Unknown	8/31/2013	Political	Wadi El Natrun Prison - Sadat	El Beheira	Unknown	Ministry of Interior
Abdullah Mahmoud Raba	عبد الله محمود رباح	Male	28	9/4/2013	Criminal	Ismailia Military Prosecution Department	Ismailia	Torture leading to failure of vital organs (brain concussion + lung perforation)	Human Rights Organisation
Mazen Magdi Salim	مازن مجدي سليم	Male	Unknown	9/4/2013	Criminal	Ismailia Military Prosecution Department	Ismailia	Torture leading to failure of vital organs (fractures on the entire body and head + intense bleeding)	Human Rights Organisation
Suleiman Sayed Ali	سليمان سيد علي	Male	65	9/8/2013	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Imad Ibrahim Tawadros	عماد إبراهيم تواضروس	Male	30	9/10/2013	Criminal	Darb Al-Ahmar Police Department	Cairo	Torture leading to failure of vital organs (severe wound at the neck + fractures of hands and foot)	Ministry of Interior
Eric Lang - French Nationality	اريك لانج - فرنسي الجنسية	Male	49	9/13/2013	Political	Qasr Al-Nil Police Station	Cairo	Torture leading to failure of vital organs (internal bleeding + fracture of the skull)	Ministry of Interior
Osama Abdel Raouf Shehata Qutb	أسامة عبد الرؤوف شحاتة قطب	Male	23	9/15/2013	Criminal	Shubra El Kheima First Police Station	Qalyubia	Severe fatigue (official reason)	Ministry of Interior
Nabil Abdelazim Falta	نبيل عبد العظيم شلاتا - نبيل شلاتا	Male	39	9/15/2013	Criminal	Mansoura Police Station	Dakahlia	Unknown	Ministry of Interior
Unknown	مجهول	Male	Unknown	9/16/2013	Criminal	Darb Al-Ahmar Police Department	Cairo	Torture leading to failure of vital organs (severe wound at the head and neck + fractures)	Ministry of Interior
Shaker Mohammed	شاكر محمد	Male	Unknown	9/23/2013	Criminal	El Qanater El Khayreyya Police Department	Qalyubia	Heart attack (official reason)	Ministry of Interior
Farouk Hassanein Ryan	فاروق حسانين ريان	Male	Unknown	9/24/2013	Criminal	Abnoub Police Department	Asyut	Heart attack (official reason)	Ministry of Interior
Safwat Khalil Khalil Shabura	صفوت خليل خليل شبورة	Male	58	9/27/2013	Political	Mansoura Public Prison	Dakahlia	Cancer and absence of medical treatment	Ministry of Interior
Abdul Wahab Mohamed Abdel Wahab	عبد الوهاب محمد عبد الوهاب	Male	44	9/27/2013	Political	Minya Military Prison	Minya	Diabetes (official reason)	Ministry of Interior
Khaled Mohammed Hafez	خالد محمد حافظ	Male	Unknown	10/2/2013	Political	Wadi El Natrun Prison - Sadat	El Beheira	Unknown	Human Rights Organisation
Ibrahim Mohamed Mahmoud Amer	إبراهيم محمد محمود عامر	Male	20	10/6/2013	Political	El Dokki Police Station	Giza	Unknown	Human Rights Organisation
Unknown	مجهول	Male	Unknown	10/7/2013	Criminal	Helwan Police Station	Cairo	Unknown	Ministry of Interior
Mohammed Abdelrahman Morsi	محمد عبد الرحمن مرسي	Male	50	10/8/2013	Criminal	El Mansheya Courts Complex	Alexandria	Unknown	Ministry of Interior
Omar Khalifa Osman Abdul Samad	عمر خليفة عثمان عبد الصمد	Male	19	10/9/2013	Political	Security Forces Camp	Cairo	Torture leading to failure of vital organs	Human Rights Organisation
Ahmed Tamer Salaheddine Nabil	أحمد تامر صلاح الدين نبيل	Male	21	10/9/2013	Political	Imbaba Police Station	Giza	Torture leading to failure of vital organs	Human Rights Organisation
Ahmed Abubakr	أحمد أبو بكر	Male	52	10/12/2013	Criminal	Minya Public Prison	Minya	Hepatic Coma (official reason)	Ministry of Interior
Alaa Zaki Ali Ahmed	علاء زكي علي أحمد	Male	54	10/12/2013	Criminal	El Waily Police Department	Cairo	Diabetic Coma (official reason)	Ministry of Interior
James Henry - US citizenship	جيمس هنري - أمريكي الجنسية	Male	58	10/12/2013	Political	Ismailia First Police Department	Ismailia	Suicide (official reason)	Ministry of Interior
Abdulrahman Mustafa Alzerahi	عبد الرحمن مصطفى الزراحي	Male	Unknown	10/14/2013	Political	Tora Prison	Cairo	Pancreatic cancer (official reason)	Human Rights Organisation
Mohamed Sayed Ismail	محمد سيد إسماعيل	Male	Unknown	10/16/2013	Political	Matareya Police Department	Cairo	Torture leading to failure of vital organs (severe wound at the head)	Human Rights Organisation
Osman Ali Osman Sayed	عثمان علي عثمان السيد	Male	36	10/27/2013	Criminal	Zagazig Public Prison	Al Sharqia	Severe fatigue (official reason)	Ministry of Interior
Salah Ahmed Yousef Abuleil	صلاح أحمد يوسف أبو الليل	Male	30	10/30/2013	Political	Minya Military Prison	Minya	Kidney failure (official reason)	Ministry of Interior
Hamdi Mohamed Mahmoud Alglaoui	حمدي محمد محمود الكلاوي	Male	61	11/2/2013	Criminal	Zifta Police Department	Gharbia	Torture leading to failure of vital organs (wounds at the head, neck, shoulder)	Human Rights Organisation
Unknown	مجهول	Male	Unknown	11/6/2013	Criminal	Giza Police Station	Giza	Unknown	Ministry of Interior
Shukri Sayed Sulaiman	شكري سيد سليمان	Male	76	11/7/2013	Criminal	Ismailia Second Police Department	Ismailia	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mansi Aqladeus Habib Dos	منسي اقلاديوس حبيب دوس	Male	27	11/26/2013	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	11/28/2013	Criminal	Osim Police Department	Giza	Unknown	Ministry of Interior
Unknown	مجهول	Male	54	12/16/2013	Criminal	Zagazig Public Prison	Al Sharqia	Liver failure (official reason)	Ministry of Interior
Hassan Khalifa Ahmed Khalifa	حسن خليفة أحمد خليفة	Male	Unknown	12/17/2013	Criminal	Minya Public Prison	Minya	Unknown	Ministry of Interior
Fikri Sayed Ibrahim Saidi	فكري السيد إبراهيم الصعيدي	Male	70	12/20/2013	Criminal	Bella Police Department	Kafr El Sheikh	Heart attack (official reason)	Ministry of Interior
Khalaf Mohammed Abdul Khaliq	خلف محمد عبد الخالق	Male	67	12/22/2013	Political	Adwa Police Department	Minya	Medical negligence and ill-treatment	Ministry of Interior
Unknown	مجهول	Male	Unknown	12/25/2013	Criminal	Dar es Salaam Police Station	Cairo	Unknown	Ministry of Interior
Unknown	مجهول	Male	Unknown	12/25/2013	Criminal	Dar es Salaam Police Station	Cairo	Unknown	Ministry of Interior
Mahmoud AbdelAziz	محمود عبد العزيز	Male	Unknown	12/26/2013	Political	Fayoum Center Police Department	Fayoum	Unknown	Media
Unknown	مجهول	Male	Unknown	12/30/2013	Criminal	Bulaq Dakrur Police Department	Giza	Unknown	Ministry of Interior
Mohamed Nasr Zaghloul	محمد نصر زغلول	Male	Unknown	12/30/2013	Political	Unknown place of detention	North Sinai	Unknown	Media
Saed Shahat	سعيد الشحات	Male	Unknown	12/30/2013	Political	Unknown place of detention	North Sinai	Unknown	Media
Sami Mahmoud Ibrahim Aburokba	سامي محمود إبراهيم أبو ركية	Male	62	1/6/2014	Political	Tora Prison	Cairo	Medical negligence and ill-treatment	Ministry of Interior

Mohammed Anwar Hussein Hedo	محمد انور حسين حيدو	Male	63	1/11/2014	Criminal	El Qanater El Khayreyya Prison	Qalyubia	Stroke (official reason)	Ministry of Interior
Maher Mohammed Ibrahim	ماهر محمد إبراهيم	Male	52	1/13/2014	Criminal	Qotour Police Department	Gharbia	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Abdulrahman Ali Abdulrahman	عبد الرحمن علي عبد الرحمن	Male	18	1/14/2014	Political	Unknown place of detention	Sohag	Unknown	Human Rights Organisation
Ahmad Sayed Sayed	أحمد السيد السيد	Male	61	1/19/2014	Criminal	BPA Police Department	Beni Suef	Asthma crisis leading to suffocation (official reason)	Ministry of Interior
Mohammed Sayed Ghazlana	محمد السيد غزلاني	Male	60	2/5/2014	Criminal	Tora Prison	Cairo	Liver failure and medical negligence	Ministry of Interior
Unknown	مجهول	Male	Unknown	2/6/2014	Criminal	Shobra Police Station	Cairo	Unknown	Ministry of Interior
Unknown	مجهول	Male	Unknown	2/15/2014	Criminal	Maadi Police Station	Cairo	Torture leading to failure of vital organs (electrocution)	Ministry of Interior
Unknown	مجهول	Male	64	2/16/2014	Criminal	Helwan Police Station	Cairo	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Osama Ahmed Abdulrahim	أسامة أحمد عبد الرحيم	Male	34	2/19/2014	Criminal	The New Valley Public Prison	The New Valley	Suicide (official reason)	Ministry of Interior
Unknown	مجهول	Male	39	2/20/2014	Criminal	Kafr El Sheikh Center Police Department	Kafr El Sheikh	Epileptic seizure and severe fatigue (official reason)	Ministry of Interior
Unknown	مجهول	Male	53	2/20/2014	Criminal	Shebin Police Department	Menoufia	Liver failure (official reason)	Ministry of Interior
Farag Suleiman Abdulrahman Mohammed	فرج سليمان عبد الرحمن محمد	Male	48	2/28/2014	Criminal	Montazah First Police Department	Alexandria	Heart attack (official reason)	Ministry of Interior
Rami Ahmed Mohamed	رامي أحمد محمد	Male	26	3/1/2014	Criminal	Shubra El Kheima Second Police Department	Qalyubia	Severe fatigue (official reason)	Ministry of Interior
Mahrous Ali	محروس علي	Male	Unknown	3/2/2014	Criminal	Alexandria Security Directorate	Alexandria	Unknown	Human Rights Organisation
Yousri Ram	يسري رم	Male	27	3/3/2014	Criminal	El Khanka Police Department	Qalyubia	Hepatic Coma (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	3/4/2014	Criminal	Khalifa Police Department	Cairo	Unknown	Ministry of Interior
Mahmoud Abdelhadi Ahmed	محمود عبد الهادي أحمد	Male	59	3/4/2014	Political	Ismailia Public Prison	Ismailia	Medical negligence and ill-treatment	Ministry of Interior
Unknown	مجهول	Male	Unknown	3/11/2014	Criminal	Dar es Salaam Police Station	Cairo	Unknown	Ministry of Interior
Unknown	مجهول	Male	Unknown	3/13/2014	Criminal	Dar es Salaam Police Station	Cairo	Unknown	Ministry of Interior
Reda Abdelfattah Amara	رضا عبد الفتاح عمارة	Male	52	3/17/2014	Criminal	Damanhour Public Prison	El Beheira	Liver failure and medical negligence	Ministry of Interior
Hani Abdeltawab Fahim	هاني عبد التواب فهميم	Male	51	3/21/2014	Criminal	Beni Suef Courts Complex	Beni Suef	Heart attack (official reason)	Ministry of Interior
Salah Abdallah	صلاح عبد الله	Male	67	3/22/2014	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohamed Abdulnabi Mohammed Abdulnabi	محمد عبد النبي محمد عبد النبي	Male	53	3/23/2014	Criminal	Wadi El Natrun Prison - Sadat	Menoufia	Right foot infection (official reason)	Ministry of Interior
Ahmed Attia	أحمد عطية	Male	Unknown	3/24/2014	Criminal	Khalifa Police Department	Cairo	Medical negligence and ill-treatment	Ministry of Interior
Nabil Moawad Trabiah	نبيل معوض طرابية	Male	26	3/30/2014	Criminal	Monia Nasr Police Department	Dakahlia	Heart attack (official reason)	Ministry of Interior
Unknown	مجهول	Male	48	4/1/2014	Criminal	Shubra El Kheima First Police Station	Qalyubia	Tuberculosis and heart attack	Ministry of Interior
Fathi Ramadan	فتحي رمضان	Male	45	4/5/2014	Political	Minya Public Prison	Minya	Heart attack (official reason)	Ministry of Interior
Haitham Saed Hassan	هيثم سعيد حسن	Male	Unknown	4/6/2014	Criminal	Talbiya Police Department	Giza	Unknown	Ministry of Interior
Unknown	مجهول	Male	Unknown	4/9/2014	Criminal	Zagazig Juvenile Centre	Al Sharqia	Suicide (official reason)	Ministry of Interior
Saed Mohamed Amara	سعيد محمد عمارة	Male	Unknown	4/9/2014	Criminal	Tanta Public Prison	Gharbia	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohamed Sayed Abdelfattah	محمد سيد عبد الفتاح	Male	49	4/10/2014	Criminal	Kerdasa Police Department	Giza	Torture leading to failure of vital organs (multiple wounds and fractures)	Ministry of Interior
Mohamed Ahmed Mohamed Khalil	محمد أحمد محمد خليل	Male	36	4/13/2014	Criminal	Imbaba Police Station	Giza	Shot dead	Ministry of Interior
Syed Ali Geneidi	سيد علي جنيدي	Male	63	4/16/2014	Political	Fayoum Public Prison - Demu	Fayoum	Heart attack and medical negligence	Ministry of Interior
Mohammed Sayed Moawad	محمد سيد معوض	Male	47	4/19/2014	Criminal	BPA Police Department	Beni Suef	Severe fatigue (official reason)	Ministry of Interior
Mustafa Mohamed Ahmed Ali Alaswani	مصطفى محمد أحمد علي الأسواني	Male	25	4/20/2014	Political	Matareya Police Department	Cairo	Torture leading to failure of vital organs	Media
Unknown	مجهول	Male	Unknown	4/27/2014	Criminal	Mokattam Police Department	Cairo	Unknown (possibly stroke)	Ministry of Interior
Gumaa Ali Hamida	جمعة علي حميدة	Male	65	5/2/2014	Political	Burj Al Arab Public Prison	Alexandria	Liver failure and medical negligence	Ministry of Interior
Unknown	مجهول	Female	Unknown	5/7/2014	Criminal	Aswan Second Police Department	Aswan	Internal bleeding (possibly due to torture)	Ministry of Interior
Ezzat Abdelfattah Suleiman Gharbaoui	عزت عبد الفتاح سليمان الغرابوي	Male	46	5/8/2014	Criminal	Matareya Police Department	Cairo	Torture leading to failure of vital organs (internal bleeding at the head and rib cage + ribs fractures)	Ministry of Interior
Abdulrahman Abdullah Abdulrahman	عبد الرحمن عبد الله عبد الرحمن	Male	Unknown	5/9/2014	Criminal	Talbiya Police Department	Giza	Unknown	Ministry of Interior
Mohammed Zakaria Awad	محمد زكريا عوض	Male	39	5/15/2014	Criminal	Port Said Security Directorate	Port Said	Injuries caused by a fall from the fourth floor	Ministry of Interior
Ahmed Fathi Zaki	أحمد فتحي زكي	Male	24	5/16/2014	Criminal	Sidi Salem Police Department	Kafr El Sheikh	Unknown	Ministry of Interior

Hassan Mahmoud Karim Syed	حسن محمود كارم سيد	Male	54	5/18/2014	Criminal	Esna Police Department	Luxor	Hepatic coma (official reason)	Ministry of Interior
Salim Sayed Salim Awadallah	سليم سيد سليم عوض الله	Male	37	5/22/2014	Criminal	Abu Qurqas Police Department	Minya	Heart attack (official reason)	Ministry of Interior
Mohammed Abdullah Ismail Sallam	محمد عبد الله إسماعيل سلام	Male	32	5/31/2014	Political	Wadi El Natrun Prison - Sadat	Menoufia	Medical negligence and ill-treatment	Human Rights Organisation
Name not available	الاسم غير متوفر	Male	65	6/1/2014	Criminal	Warraq Police Department	Giza	Diabetic Coma (official reason)	Ministry of Interior
Gamal Mustafa	جمال مصطفى	Male	Unknown	6/6/2014	Criminal	Tora Prison	Cairo	Stroke and medical negligence (official reason)	Human Rights Organisation
Mohammed Sabir Hassan	محمد صابر حسن	Male	37	6/7/2014	Criminal	Unknown place of detention	Menoufia	Tuberculosis	Ministry of Interior
Sameh Ibrahim Abulfotouh	سامح إبراهيم أبو الفتوح	Male	33	6/8/2014	Criminal	Ain Shams Police Station	Cairo	Torture leading to failure of vital organs	Ministry of Interior
Mohammed Zaki Mohammed	محمد زكي محمد	Male	60	6/8/2014	Criminal	Nasr City Second Police Department	Cairo	Respiratory issues leading to suffocation	Ministry of Interior
Hamdi Nadi Awad Aladaam	حمدي نادي عوض الأدهم	Male	30	6/11/2014	Criminal	Snores City Police Department	Fayoum	Torture leading to failure of vital organs	Human Rights Organisation
Ahmed Mohamed Ibrahim Sayed Ahmed	أحمد محمد إبراهيم سيد أحمد	Male	22	6/15/2014	Criminal	Matareya Police Department	Cairo	Medical negligence and ill-treatment	Ministry of Interior
Rami Mohammed Ibrahim	رامي محمد إبراهيم	Male	32	6/15/2014	Criminal	Imbaba Police Station	Giza	Unknown	Ministry of Interior
Ahmed Ramzi Abdellatif	أحمد رمزي عبد اللطيف	Male	28	6/16/2014	Criminal	Basateen Police Department	Cairo	Respiratory issues leading to suffocation	Ministry of Interior
Ali Mahmoud Mohammed	علي محمود محمد	Male	40	6/16/2014	Criminal	Ain Shams Police Station	Cairo	Unknown	Ministry of Interior
Hisham Ahmed Abdulrahman	هشام أحمد عبد الرحمن	Male	50	6/18/2014	Criminal	6th of October City Police Department	Giza	Liver failure + blood poisoning + medical negligence	Ministry of Interior
Ramadan Sayed Ramadan	رمضان سعيد رمضان	Male	28	6/20/2014	Criminal	10th of Ramadan Second Police Department	Al Sharqia	Suffocation in detention	Ministry of Interior
Mustafa Ahmed Fawzi	فوزي مصطفى أحمد	Male	Unknown	6/20/2014	Criminal	Talbiya Police Department	Giza	Unknown	Ministry of Interior
Mohammed Almahdi Sayed Younis	محمد المهدي سيد يونس	Male	49	6/24/2014	Criminal	Bahna Center Police Department	Qalyubia	Diabetic Coma (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	6/25/2014	Criminal	Matareya Police Department	Cairo	Diabetic Coma (official reason)	Ministry of Interior
Mahmoud Sayed Hassan	محمود سيد حسن	Male	Unknown	6/25/2014	Criminal	Imbaba Police Station	Giza	Unknown	Ministry of Interior
Ahmed Ali Mohamed Suleiman	أحمد علي محمد سليمان	Male	27	6/26/2014	Political	Badr Prisoners Camp Prison	El Beheira	Unknown	Human Rights Organisation
Abdulmagid Mohamed Mohamed Mahmoud	عبد المجيد محمد محمد محمود	Male	67	6/26/2014	Political	Asyut Public Prison	Asyut	Medical negligence and ill-treatment	Human Rights Organisation
Baligh Hamdi Hassan	بليغ حمدي حسن	Male	Unknown	6/29/2014	Criminal	Warraq Police Department	Giza	Unknown	Ministry of Interior
Mohsen Ali Muhammad Ali	محسن علي محمد علي	Male	39	6/30/2014	Criminal	Minya Public Prison	Minya	Respiratory issues leading to suffocation	Ministry of Interior
Wagih Sabri Hassanein	وجيه صبري حسانين	Male	Unknown	7/2/2014	Criminal	El Omraneya Police Department	Giza	Unknown	Ministry of Interior
Khalid Mohammed Abdullatif	خالد محمد عبد اللطيف	Male	Unknown	7/2/2014	Criminal	6th of October City First Police Department	Giza	Unknown	Ministry of Interior
Unknown	مجهول	Male	41	7/3/2014	Criminal	The New Valley Public Prison	The New Valley	Severe fatigue (official reason)	Ministry of Interior
Ahmed Osman Ahmed Mohyeddin	أحمد عثمان أحمد محيي الدين	Male	36	7/4/2014	Criminal	Second Mansoura Police Station	Dakahlia	Diabetic Coma (official reason) + ill-treatment	Ministry of Interior
Hanafi Mohammed Awad	حنفي محمد عواد	Male	Unknown	7/5/2014	Criminal	Imbaba Police Station	Giza	Unknown	Ministry of Interior
Unknown	مجهول	Male	27	7/7/2014	Criminal	Hamoul Police Department	Kafr El Sheikh	Severe fatigue (official reason)	Ministry of Interior
Sayed Adam Mohammed	سيد آدم محمد	Male	Unknown	7/12/2014	Criminal	Qasr al-Nil Police Station	Cairo	Unknown	Ministry of Interior
Hani Attia Issawi	هاني عطيه عيسوي	Male	39	7/12/2014	Criminal	Imbaba Police Station	Giza	Unknown	Ministry of Interior
Ashraf Abdullah Mohammed Shaheen	أشرف عبد الله محمد شاهين	Male	35	7/12/2014	Criminal	6th of October City Second Police Station	Giza	Unknown	Ministry of Interior
Bayoumi Said Bayoumi	بيومي سعيد بيومي	Male	26	7/12/2014	Criminal	Banha Public Prison	Qalyubia	Overdose of sleeping pills (official reason)	Ministry of Interior
Mahmoud Mohamed Saadeddine Mohammed	محمود محمد سعد الدين محمد	Male	26	7/14/2014	Political	Burj Al Arab Public Prison	Alexandria	Coma resulting from a liver failure + medical negligence	Human Rights Organisation
Unknown	مجهول	Male	20	7/14/2014	Criminal	Suez Police Station	Suez	Suicide by overdose of painkillers (official reason)	Ministry of Interior
Abdul Bari	عبد الباري	Male	60	7/17/2014	Criminal	Ain Shams Police Station	Cairo	Severe fatigue (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	7/17/2014	Criminal	Ain Shams Police Station	Cairo	Heart attack (official reason)	Ministry of Interior
Islam Sayed Salim Abdullah	إسلام السيد سالم عبد الله	Male	23	7/19/2014	Criminal	Raml Second Police Station	Alexandria	Torture leading to failure of vital organs (electrocution and beatings)	Ministry of Interior
Adel Abdul Sabour	عادل عبد الصبور	Male	70	7/21/2014	Criminal	Sohag Complex	Sohag	Unknown	Ministry of Interior
Ahmed Mahmoud Ahmed Saleh	أحمد محمود أحمد صالح	Male	27	7/23/2014	Criminal	Ahnesia Police Department	Beni Suef	Suicide (official reason)	Ministry of Interior
Ahmed Khalaf Ezz Alarab	أحمد خلف عز العرب	Male	33	7/29/2014	Criminal	Mansoura Second Police Station	Dakahlia	Hepatic coma	Ministry of Interior
Ahmed Abu Bakr Abdelsalam	أحمد أبو بكر عبد السلام	Male	40	7/30/2014	Political	The New Valley Public Prison	The New Valley	Stroke	Ministry of Interior

Mohammed Amin Hafez	محمد أمين حافظ	Male	Unknown	8/2/2014	Criminal	El Qanater El Khayreyya Prison	Qalyubia	Died from his wounds after an amputation surgery	Human Rights Organisation
Unknown	مجهول	Male	Unknown	8/3/2014	Criminal	Maadi Police Station	Cairo	Diabetic coma (official reason)	Ministry of Interior
Saeed Ahmed Abulela	أحمد سعيد أبو العلا	Male	Unknown	8/3/2014	Criminal	Khalifa Police Department	Cairo	Severe fatigue (official reason)	Ministry of Interior
Unknown	مجهول	Male	37	8/4/2014	Criminal	6th of October City First Police Department	Giza	Unknown	Ministry of Interior
Unknown	مجهول	Male	42	8/9/2014	Criminal	Tammy Amdid Police Department	Dakahlia	Heart attack (official reason)	Ministry of Interior
Khalid Mohammed Abulela	خالد محمد أبو العلا	Male	30	8/9/2014	Criminal	Faraskour Police Department	Damietta	Medical negligence and ill-treatment	Ministry of Interior
Mohammed Abdulrahim	محمد عبد الرحيم	Male	51	8/12/2014	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohammed Nabil Abdulmohsen	محمد نبيل عبد المحسن	Male	Unknown	8/13/2014	Criminal	Misr El Kadima Police Department	Cairo	Overdose of heroin (official reason)	Ministry of Interior
Hassan Nadi Hassan Abdelal	حسن نادي حسن نادي عبد العال	Male	15	8/18/2014	Political	Basateen Police Department	Cairo	Torture leading to failure of vital organs	Ministry of Interior
Islam Talat	إسلام طلعت	Male	42	8/18/2014	Criminal	Matareya Police Department	Cairo	Coma + medical negligence	Ministry of Interior
Emad Hamid Mohammed Asran	عماد حميد محمد عسران - عماد الأصيل	Male	39	8/18/2014	Political	The New Valley Public Prison	The New Valley	Diabetes + medical negligence	Ministry of Interior
Ibrahim Ahmed Ismail	إبراهيم أحمد إسماعيل	Male	17	8/20/2014	Criminal	Nag Hammadi Police Station	Qena	Suffocation	Ministry of Interior
Mahmoud Mohamed Mohamed Seghir	محمود محمد محمد الصغير - محمود الصغير	Male	49	8/22/2014	Political	Burj Al Arab Public Prison	Alexandria	Diabetic coma	Ministry of Interior
Tarek Abdelfattah Mahmoud	طارق عبد الفتاح محمود	Male	38	8/23/2014	Criminal	Dishna District Court	Qena	Shot dead	Human Rights Organisation
Khaled Mahmoud Abdelaziz	خالد محمود عبد العزيز	Male	44	8/26/2014	Criminal	El Khanka Police Department	Qalyubia	Severe pneumonia	Ministry of Interior
Reda Mohamed Ibrahim Ahmed	رضا محمد إبراهيم أحمد	Female	45	8/26/2014	Criminal	El Qanater El Khayreyya Prison	Qalyubia	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Hassania Mohammed Ibrahim	حسنية محمد إبراهيم	Female	51	8/27/2014	Criminal	Zagazig Center Police Department	Al Sharqia	Unknown	Human Rights Organisation
Emir Abdulrahim Abdulaziz Abdulnabi	أمير عبد الرحيم عبد العزيز عبد النبي	Male	26	8/28/2014	Criminal	Shubra El Kheima Second Police Department	Qalyubia	Unknown (possibly liver failure)	Ministry of Interior
Wael Mahmoud Abdelhakim	وائل محمود عبد الحكيم	Male	37	8/30/2014	Criminal	The New Valley Public Prison	The New Valley	Heart attack (official reason)	Ministry of Interior
Unknown	مجهول	Male	41	8/30/2014	Criminal	Edfu Police Department	Aswan	Medical negligence and ill-treatment	Ministry of Interior
Badawi Mohammed Sadiq Rizk	بدوي محمد صادق رزق	Male	40	9/1/2014	Criminal	Minya Public Prison	Minya	Pancreatic infection (official reason)	Ministry of Interior
Saber Abdesayed Qazi Zidane Talkhawwy	صابر عبد السيد قاضي زيدان الطلخاوي	Male	Unknown	9/2/2014	Political	Burj Al Arab Public Prison	Alexandria	Diabetes and hepatitis + medical negligence	Media
Mohammed Rashid Abuzayed	محمد راشد أبو زايد	Male	52	9/2/2014	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	9/8/2014	Criminal	Sayeda Zeinab Police Station	Cairo	Severe fatigue (official reason)	Ministry of Interior
Odey Ismail Al Mahdi	عدي إسماعيل المهدي	Male	Unknown	9/9/2014	Criminal	Tanta Second Police Station	Gharbia	Suicide (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	9/9/2014	Criminal	Imbaba Police Station	Giza	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Unknown	مجهول	Male	68	9/17/2014	Criminal	Raml Second Police Station	Alexandria	Heart attack (official reason)	Ministry of Interior
Saber Ezzat Daabas	صابر عزت دعيس	Male	Unknown	9/25/2014	Criminal	Belbais Police Department	Al Sharqia	Stabbed to death by another Prisoner	Media
Mohammed Sayed Rushdie Sayed	محمد السيد رشدي السيد	Male	27	9/26/2014	Criminal	Sidi Gaber Police Station	Alexandria	Severe fatigue (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	9/26/2014	Criminal	Salloum Police Department	Matrouh	Torture leading to failure of vital organs	Ministry of Interior
Unknown	مجهول	Male	64	9/27/2014	Criminal	Minya Public Prison	Minya	Hepatitis C (official reason)	Ministry of Interior
Ahmed Gaber Ahmed Abdelmawla	أحمد جابر أحمد عبد المولي	Male	38	9/28/2014	Criminal	Basateen Police Department	Cairo	Unknown	Ministry of Interior
Gamal Mohammad Qasim	جمال محمد قاسم	Male	34	9/29/2014	Criminal	Ataka Prison	Suez	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Abdulnabi Tamam Mohammed Tamam Khalifa	عبد النبي تمام محمد تمام خليفة	Male	40	10/15/2014	Political	Atfih Police Department	Giza	Stomach infection	Media
Mahmoud Abdelrazeq Elshafei Ruby	محمود عبد الرازق الشافعي الروبي	Male	68	10/24/2014	Political	Wadi El Natrun Prison	Giza	Medical negligence and ill-treatment	Media
Mahmoud Abdulrahman Al Mahdi	محمود عبد الرحمن المهدي	Male	51	11/3/2014	Political	Ataka Prison - Suez	Suez	Medical negligence and ill-treatment (and probably torture)	Media
Mahmoud Atta Al Mahdi	محمود عطا المهدي	Male	37	11/7/2014	Criminal	Deir Mawas Police Station	Minya	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	11/8/2014	Criminal	Imbaba Police Station	Giza	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Abeer Mohammed	عبير محمد	Female	Unknown	11/9/2014	Criminal	Hermonthis Police Department	Luxor	Severe fatigue (official reason) but signs of torture	Ministry of Interior
Ezz Izzat Abdullah	عز عزت عبد الله	Male	36	11/10/2014	Criminal	Mansoura Second Police Station	Mansoura	Heart attack (official reason)	Ministry of Interior
Sayed Mohammed Abdulmuttalib	السيد محمد عبد المطلب	Male	52	11/10/2014	Criminal	Mit Salsil Police Department	Mansoura	Asthma crisis leading to suffocation (official reason)	Ministry of Interior
Tarek Mahmoud Ghandour	طارق محمود الغندور	Male	55	11/12/2014	Political	Shebin Prison	Menoufia	Liver failure + internal bleeding	Media

Abu Bakr Ahmed Hanafi Alqadi	أبو بكر أحمد حنفي القاضي	Male	46	11/14/2014	Political	Qena Public Prison	Sohag	Stomach cancer	Media
Abdo Mohammed	عبد محمد	Male	30	11/15/2014	Criminal	Bulaq Dakrur Police Department	Cairo	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohammed Yahya Ramadan	محمد رمضان يحيى	Male	19	11/16/2014	Political	El Kobba Police Department	Cairo	Torture leading to failure of vital organs	Media
Zaki Abulmagd Ahmed	زكي أبو المجد أحمد	Male	50	11/17/2014	Political	Tora Prison	Cairo	Medical negligence and ill-treatment	Media
Unknown	مجهول	Male	65	11/21/2014	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohammed Abuzaid	محمد أبو زيد	Male	Unknown	12/2/2014	Political	Mit Ghamr Prison	Dakahlia	Heart attack (official reason)	Ministry of Interior
Shams Sayed Abdulhamid	شمس سيد عبد الحميد	Male	22	12/10/2014	Criminal	Matareya Police Department	Cairo	Torture leading to failure of vital organs	Media
Unknown	مجهول	Male	65	12/11/2014	Criminal	Dar es Salaam Police Station	Cairo	Liver inflammation	Media
Mahmoud Anwar Ahmed Mohammed	محمود أنور أحمد محمد	Male	38	12/13/2014	Criminal	Mina El Basal Police Department	Alexandria	Sudden and severe hypotension leading to circulatory shock (official reason)	Media
Islam Mohammed Khamis	إسلام محمد خميس	Male	21	12/15/2014	Criminal	Ghomrok Police Department	Alexandria	Severe fatigue + overdose of drugs (official reason)	Ministry of Interior
Abu Rawash	أبو رواش	Male	35	1/3/2015	Criminal	Marg Police Department	Cairo	Heart attack + medical negligence	Media
Yasser Abdelazim	ياسر عبد العظيم	Male	Unknown	1/28/2015	Political	Sadat Police Department	Menoufia	Torture leading to failure of vital organs	Media
Sayed Eid Touhami	سيد عيد تهامي	Male	25	2/1/2015	Criminal	Rod El Farag Police Department	Cairo	Torture leading to failure of vital organs	Media
Hamada Sayed Mohammed Abdullatif	حمادة سيد محمد عبد اللطيف	Male	29	2/3/2015	Criminal	Abu Qurqas Police Department	Minya	Torture leading to failure of vital organs but official reason said he committed suicide	Ministry of Interior
Mohammed Hamdi	محمد حمدي	Male	Unknown	2/7/2015	Criminal	Ain Shams Police Station	Cairo	Severe respiratory issues leading to suffocation (+ possible torture)	Media
Mustafa Ibrahim Mahmoud	مصطفى إبراهيم محمود	Male	28	2/24/2015	Criminal	Matareya Police Department	Cairo	Hypotension + overdose of heroin (official reason)	Ministry of Interior
Karim Mohammed Hamdy	كريم محمد حمدي	Male	28	2/25/2015	Political	Matareya Police Department	Cairo	Torture leading to failure of vital organs	Ministry of Interior
Imad Ahmed Alattar	عماد أحمد العطار	Male	42	2/25/2015	Political	Matareya Police Department	Cairo	Suffocation	Ministry of Interior
El Izb AbuBakr Awad Mohammed	العزب أبوبكر عوض محمد	Male	46	2/26/2015	Criminal	The New Valley Public Prison	The New Valley	Heart attack (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	3/9/2015	Criminal	Kafr El Sheikh First Police Station	Kafr El Sheikh	Asthma crisis leading to suffocation (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	3/12/2015	Criminal	Sherbini Police Station	Dakahlia	Diabetic coma (official reason)	Ministry of Interior
Saad Abdulwahid Issa	سعد عبد الواحد عيسى	Male	43	3/15/2015	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension + heart attack (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	3/19/2015	Criminal	Ain Shams Police Station	Cairo	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Khaled Mohamed Said	خالد محمد سعيد	Male	46	3/23/2015	Political	Beni Suf Central Prison	Beni Suf	Internal bleeding + cirrhosis	Ministry of Interior
Mohamed Mahmoud Awad Abed	محمد محمود عوض عابد	Male	38	3/26/2015	Criminal	Mansoura First Police Station	Mansoura	Tuberculosis	Ministry of Interior
Ibrahim Mohamed Mahmoud Energeri	ابراهيم محمد محمود النجيري	Male	Unknown	3/26/2015	Criminal	Mansoura Second Police Station	Mansoura	Torture leading to failure of vital organs	Media
Khaled Khalil Khidr	خالد خليل خضر	Male	30	3/26/2015	Political	Minya Center Police Department	Minya	Torture leading to failure of vital organs	Media
Shehata Aziz Makar	شحاتة عزيز مكار	Male	68	3/27/2015	Criminal	The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Hussein Mahmoud Abdelwahab Abdelmawla	حسين محمود عبد الوهاب عبد المولى	Male	Unknown	3/29/2015	Criminal	Haram Police Department	Giza	Torture leading to failure of vital organs	Media
Mohamed Nagib Abdulmohsen	محمد نجيب عبد المحسن	Male	41	3/30/2015	Criminal	Malawi Prison	Minya	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Unknown	مجهول	Male	Unknown	4/9/2015	Criminal	Bulaq Dakrur Police Department	Cairo	Heart attack	Ministry of Interior
Mohammed About Anwar About	محمد عبود أنور عبود	Male	30	4/15/2015	Political	Minya New High Security Prison	Minya	Sudden and severe hypotension leading to circulatory shock (official reason) but family believes it is the result of torture	Ministry of Interior
Unknown	مجهول	Male	55	4/17/2015	Criminal	Misr El Kadima Police Department	Cairo	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Waleed Ali Taghian	وليد علي طغيان	Male	25	4/17/2015	Political	Gamasa Public Prison	Suez	Liver cancer + medical negligence	Media
Sayed Amin Mohammad	سيد أمين محمد	Male	30	4/18/2015	Criminal	Misr El Kadima Police Department	Cairo	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Ibrahim Abdelmonem	ابراهيم عبد المنعم	Male	Unknown	4/19/2015	Criminal	El Mansheya Police Department	Alexandria	Heart attack + medical negligence	Media
Abdel Muti Ali Khalil	عبد المعطي علي خليل	Male	54	4/21/2015	Political	Burj Al Arab Public Prison	Alexandria	Liver infection + diabetes	Media
Imam Mahmoud Imam Affi	الإمام محمود إمام عفيفي	Male	63	4/22/2015	Political	Matareya Police Department	Cairo	Torture leading to failure of vital organs	Media
Unknown	مجهول	Male	18	4/22/2015	Criminal	Asyut Juvenile Center	Asyut	Suicide	Media
Sayed Abdul Hai	السيد عبد الحي	Male	40	5/6/2015	Criminal	Kafr Saad Police Department	Damietta	Diabetic coma	Media

Sayed Sayed Alksebre	السيد السيد الكسبري	Male	Unknown	5/6/2015	Criminal	Rashid Police Station	El Beheira	Torture leading to failure of vital organs	Media
Hisham Al Nass	هشام النص	Male	31	5/10/2015	Criminal	Dar es Salaam Police Station	Cairo	Severe fatigue (official reason)	Media
Mohammed Shahat Al Maghazi Abda	محمد الشحات المغازي عبدة	Male	Unknown	5/11/2015	Criminal	Samanoud Police Station	Dakahlia	Sudden and severe hypotension leading to circulatory shock (official reason)	Media
Mohamed El Shahat Oleiba	محمد الشحات عليبة	Male	Unknown	5/12/2015	Criminal	Mansoura Police Station	Dakahlia	Torture leading to failure of vital organs	Media
Sameh Sayed Ahmed Musa	سامح سيد أحمد موسى	Male	30	5/13/2015	Criminal	Giza Prosecution Building	Giza	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohamed Farid Ismail Abdel Halim Khalil	محمد فريد إسماعيل عبدالحليم خليل	Male	58	5/13/2015	Political	Tora Prison	Cairo	Hepatic coma (+cirrhosis and hepatitis C)	Ministry of Interior
Unknown	مجهول	Male	Unknown	5/17/2015	Criminal	Dar es Salaam Police Station	Cairo	Unknown	Media
Unknown	مجهول	Male	Unknown	5/17/2015	Criminal	Al Burj Police Department	Kafr El Sheikh	Medical negligence and ill-treatment	Media
Unknown	مجهول	Male	Unknown	5/19/2015	Criminal	El Mansheya Nasser Police Station	Cairo	Unknown	Media
Mohammed Alaa Khalifa	محمد علاء خليفة	Male	Unknown	5/22/2015	Political	Minya New High Security prison	Minya	Asthma crisis leading to suffocation (official reason)	Ministry of Interior
Sayed Ahmed Abed Rabou Ahmed	سيد أحمد عبد ربه أحمد	Male	40	5/22/2015	Political	Matareya Police Department	Cairo	Suicide (official reason) but family believes that it is the result of torture	Media
Rami Nabil	رامي نبيل	Male	Unknown	5/23/2015	Criminal	El Badrasheen Police Department	Giza	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohammed Mohammed Mohammed Fallaghi	محمد محمد محمد الفلاجي	Male	58	5/25/2015	Political	Gamasa Public Prison	Damietta	Medical negligence and ill-treatment (possibly liver failure)	Media
Hani Fathi Aziz	هاني فتحي عزيز	Male	33	5/27/2015	Criminal	Imbaba Police Station	Giza	Torture leading to failure of vital organs (electrocution)	Media
Unknown	مجهول	Male	46	5/31/2015	Criminal	El Qoreen Police Department	Al Sharquia	Diabetic coma + stroke	Media
Unknown	مجهول	Male	34	6/1/2015	Criminal	Beni Suef Police Department	Beni Suef	AIDS (official reason)	Ministry of Interior
Nabil Mohammed Abdelmeguid Maghraby	نبيل محمد عبد المجيد المغربي	Male	72	6/4/2015	Political	Tora Prison	Cairo	Cancer	Media
Mohammed Abulmagd	محمد أبو المجد	Male	Unknown	6/7/2015	Criminal	Agouza Police Department	Giza	Tuberculosis	Ministry of Interior
Sayed Hassan Al Rassd	السيد حسن الرصد	Male	46	6/7/2015	Political	Banha Central Security Camp	Qalyubia	Torture leading to failure of vital organs	Media
Mohamed Atta Allah Hassan Ali	محمد عطا الله حسن علي	Male	Unknown	6/12/2015	Criminal	El Khosous Police Station	Qalyubia	Hepatic coma + liver failure	Ministry of Interior
Gaber Shaaban	جابر شعبان	Male	26	6/12/2015	Criminal	Samalout Police Department	Minya	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Qassim Mohammed Hussein Hassan	قاسم محمد حسين حسن	Male	49	6/18/2015	Criminal	Matareya Police Department	Cairo	Sudden and severe hypotension (+ kidney failure and possible torture)	Media
Mustafa Ramadan Tawfiq	مصطفى رمضان توفيق	Male	41	6/23/2015	Criminal	Bani Mazar Police Department	Minya	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Ashraf Fikri Shoaib	أشرف فكري شعيب	Male	Unknown	6/26/2015	Criminal	Talkha Police Department	Dakahlia	Sudden and severe hypotension and suffocation (official reason)	Media
Unknown	مجهول	Male	54	6/27/2015	Criminal	Zagazig Public Prison	Al Sharquia	Tuberculosis + hypotension	Ministry of Interior
Essam Hamed Abdullah Mohammed	عصام حامد عبد الله محمد	Male	50	7/7/2015	Political	Wadi El Natrun prison	El Beheira	Medical negligence and ill-treatment	Media
Adel Abdulrahman	عادل عبد الرحمن	Male	Unknown	7/12/2015	Political	Ain Shams Police Station	Cairo	Asthma crisis leading to suffocation (official reason)	Media
Unknown	مجهول	Male	Unknown	7/25/2015	Criminal	Matareya Police Department	Cairo	Unknown (suffering from cramps)	Media
Unknown	مجهول	Male	Unknown	7/25/2015	Criminal	Sheikh Zayed Police Station	Giza	Severe fatigue	Media
Unknown	مجهول	Male	Unknown	7/26/2015	Criminal	Matareya Police Department	Cairo	Torture leading to failure of vital organs	Media
Ahmed Hussein Awad Ghozlan	أحمد حسين عوض غزلان	Male	52	8/1/2015	Political	Damanhour Public Prison	El Beheira	Medical negligence	Media
Izzat Salamoni	عزت السلاموني	Male	Unknown	8/1/2015	Political	Tora Prison	Cairo	Medical negligence	Media
Ramadan Abdulaziz Ibrahim Badawi	رمضان عبد العزيز إبراهيم بدوي	Male	46	8/2/2015	Political	Nafusa Mountains Central Security Forces Prison	Sohag	Medical negligence	Media
Hamida Saber Atwa	حميدة صابر عطوة	Female	57	8/4/2015	Criminal	El Mansheya Nasser Police Station	Beni Suef	Heart attack	Ministry of Interior
Mohammed Nabi Khalil Al Hobj	محمد عبد النبي خليل الشويخ	Male	Unknown	8/4/2016	Criminal	Imbaba Police Station	Giza	Sudden and severe hypotension leading to circulatory shock (official reason) but family believes it is the result of torture	Ministry of Interior
Marjan Salem	مرجان سالم	Male	Unknown	8/5/2015	Political	Tora Prison	Cairo	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Salah Abdelkarim Mohammed Ahmed	صلاح عبد الكريم محمد احمد	Male	23	8/7/2015	Criminal	Heliopolis Police Station	Cairo	Medical negligence and ill-treatment	Ministry of Interior
Mahmoud Hanafi	محمود حنفي	Male	Unknown	8/7/2015	Political	El Raml First Police Department	Alexandria	Medical negligence and ill-treatment	Ministry of Interior
Essam El Din Derbala	عصام الدين دربالة	Male	Unknown	8/9/2015	Political	Tora Prison	Cairo	Sudden and severe hypotension leading to circulatory shock (official reason)	Media

Mohammad Mehdi Mehdi Haggag	محمد مهدي مهدي حجاج	Male	Unknown	8/9/2015	Political	El Raml Second Police Department	Alexandria	Medical negligence and ill-treatment	Media
Abdel Kawi Darwish Sayed	عبد القوي درويش السيد	Male	35	8/9/2015	Criminal	Ibsheaway Police Department	Fayoum	Poisoning (official reason)	Media
Unknown	مجهول	Male	23	8/10/2015	Criminal	Hurghada Second Police Department	Red Sea	Suicide (official reason) but family believes that it is the result of torture	Media
Mohammed Abbas Mehran	محمد عباس مهران	Male	Unknown	8/10/2015	Criminal	The The New Valley Public Prison	The New Valley	Sudden and severe hypotension leading to circulatory shock (official reason)	Media
Mohammed Hassan Mohammed	محمد حسن محمد	Male	Unknown	8/10/2015	Criminal	Kom Ombo Police Station	Aswan	Sudden and severe hypotension leading to circulatory shock (official reason)	Ministry of Interior
Mohammed Abdul Hamid Ahmad	محمد عبدالحميد أحمد	Male	65	8/11/2015	Criminal	Qism El Gamaleya Police Department	Cairo	Suffocation and shortness of breath	Media
Mohammed Jamal Abbas	محمد جمال عباس	Male	Unknown	8/12/2015	Criminal	Shubra First Police Department	Qalyubia	Suffocation and heart attack	Ministry of Interior
Ahmed Mohammed Atawil	أحمد محمد الطويل	Male	Unknown	8/12/2015	Criminal	Shubra First Police Department	Qalyubia	Suffocation and shortness of breath	Ministry of Interior
Hani Said Mohammed	هاني سعيد محمد	Male	Unknown	8/12/2015	Criminal	Shubra First Police Department	Qalyubia	Suffocation and shortness of breath	Ministry of Interior
Jamal Sayed Sultan	جمال السيد سلطان	Male	Unknown	8/12/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and shortness of breath	Ministry of Interior
Nagy Hassanein Idriss Nagy	ناجي حساين ادريس ناجي	Male	Unknown	8/12/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and shortness of breath	Ministry of Interior
Abdelrazek Ahmed Hassan Omar	عبد الرزاق أحمد حسن عمر	Male	Unknown	8/12/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and shortness of breath	Ministry of Interior
Yasser Saad Ahmed Mohamed	ياسر سعد احمد محمد	Male	Unknown	8/12/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and shortness of breath	Ministry of Interior
Ayman Fathi Mahmoud	ايمن فتحي محمود	Male	Unknown	8/12/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and shortness of breath	Ministry of Interior
Mustafa Ahmed Mohammed	مصطفى احمد محمد	Male	Unknown	8/12/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and shortness of breath	Ministry of Interior
Unknown	مجهول	Male	65	8/12/2015	Criminal	Abu Kabir Police Station	Al Sharquia	Hepatic coma	Ministry of Interior
Refaat Radwan	رفعت رضوان	Male	60	8/12/2015	Political	Abu Zaabal Public Prison	Qalyubia	Medical negligence and ill-treatment	Media
Abdelrahman Youssef	عبد الرحمن يوسف	Male	Unknown	8/13/2015	Political	Ataka Public Prison	Suez	Medical negligence and ill-treatment	Media
Hamdi Rizk Ismail	حمدي رزق إسماعيل	Male	Unknown	8/16/2015	Political	Gamasa Public Prison	Qalyubia	Suffocation and shortness of breath	Media
Ragab Khalifa Abdulwahab	رجب خليفة عبد الوهاب	Male	Unknown	8/18/2015	Political	The New Valley Public Prison	The New Valley	Medical negligence and ill-treatment	Media
Gaber Ahmed Mohammed Abu Amira	جابر أحمد محمد أبو عميرة	Male	74	8/19/2015	Political	Burj Al Arab Public Prison	Alexandria	Medical negligence and ill-treatment	Media
Abdel Aal Mustafa	عبد العال مصطفى	Male	57	8/19/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and hypertermia	Ministry of Interior
Talaat Allam Ali	طلعت علام علي	Male	64	8/19/2015	Political	Minya Public Prison	Minya	Hypertermia	Ministry of Interior
Ragab Khamis Abdulwahab	رجب خميس عبد الوهاب	Male	35	8/19/2015	Criminal	The New Valley Public Prison	The New Valley	Suffocation and high fever	Ministry of Interior
Bahaa El Din Sayed Ali	بهاء الدين سيد علي	Male	Unknown	8/20/2015	Criminal	Central Security Forces Department 10.5Km - Alexandria Road	Giza	Suffocation and high fever	Media
Ahmed Mohamed Hamed	أحمد محمد حامد	Male	37	8/21/2015	Political	Fayoum Police Station	Fayoum	Torture leading to failure of vital organs	Media
Shaaban Abdellatif Abdelaal	شعبان عبد اللطيف عبد العال	Male	52	8/24/2015	Criminal	Ibsheaway Police Department	Fayoum	Medical negligence and ill-treatment	Media
Khalid Ahmed Zahran	خالد أحمد زهران	Male	Unknown	8/27/2015	Political	Asyut Public Prison	Asyut	Medical negligence and ill-treatment	Media
Mahmoud Ayyad	محمود عياد	Male	Unknown	8/29/2015	Political	15th of May Public Prison	Cairo	Medical negligence and ill-treatment	Media
Ahmed Mohammed Abdulhakim Mesbah	أحمد محمد عبد الحكيم مصباح	Male	20	8/29/2015	Political	Lazoghli Homeland Security Headquarters	Cairo	Murder	Media
Mohamed Ahmed	محمد أحمد	Male	47	8/30/2015	Criminal	Hurghada Second Police Department	Red Sea	Heart attack + sudden and severe hypotension (official reason)	Ministry of Interior
Hosni Khairi Diab Afifi	حسني خيري دياب عفيفي	Male	Unknown	9/1/2015	Political	Tora Prison	Cairo	Medical negligence and ill-treatment	Media
Abdelraouf Mahmoud Kamel	عبد الرؤوف محمود كامل	Male	50	9/3/2015	Political	10th of Ramadan Central Security Forces Department	Al Sharquia	Medical negligence and ill-treatment	Media
Unknown	مجهول	Male	45	9/7/2015	Criminal	Minya Public Prison	Minya	Heart attack (official reason)	Media
Unknown	مجهول	Male	Unknown	9/16/2015	Criminal	Khalifa Police Department	Cairo	Suicide (official reason)	Ministry of Interior
Hashim Hassan	هاشم حسن	Male	Unknown	9/16/2015	Political	Qena Public Prison	Qena	Unknown	Media

فيما يلي عرض بمواقع مناطق السجون :

م	السجن	الموقع
1	منطقة سجون طره (أ)	شارع كورنيش النيل المعادى - القاهرة
2	منطقة سجون طره (ب)	طريق الأوتوستراد - القاهرة
3	منطقة سجون القناطر	الرياح المنوفى - القناطر الخيرية
4	منطقة سجون أبو زعبل	أبو زعبل القليوبية
5	منطقة سجون القطا	طريق الخطاطبة برفاش - مركز إمبابة - الجيزة
6	منطقة سجون برج العرب	الغريبات الجديدة - الإسكندرية
7	منطقة سجون وادي النطرون	طريق مصر إسكندرية الصحراوي
8	سجن المرج	سجن المرج القلج الخانكة - القليوبية
9	سجن الإستئناف	باب الخلق - القاهرة
10	سجن المنصورة	حى شرق المنصورة - الدقهلية
11	سجن الزقازيق	قسم ثان الزقازيق - شرقية
12	سجن بورسعيد	بجوار السوق التجارى الجديد - قسم شرق بورسعيد
13	سجن الإسكندرية	الحضرة - محرم بك - الإسكندرية
14	سجن دمنهور رجال	عزبة عويضة - الأبعادية - دمنهور
15	سجن الفيوم	قرية دمو - الفيوم
16	سجن أسيوط	ترعة الإبراهيمية - بجوار نادي البلدية - أسيوط
17	سجن قنا	الحميدات - قنا
18	سجن سوهاج	ميدان العارف - خلف مديرية أمن سوهاج
19	سجن المنيا	طريق مصر أسوان - المنيا
20	سجن طنطا	شارع الإسكندرية - قسم أول طنطا
21	سجن شبين الكوم	شارع الرئيس حسنى مبارك - شبين الكوم
22	سجن بنها	شارع سيد بك القاضى - بنها قليوبية
23	سجن جنوب التحرير	منطقة جنوب التحرير - البحيرة
24	سجن معسكر عمل المسجونين	مركز بدر البحيرة
25	سجن الوادى الجديد	مدينة الخارجة الوادى الجديد

٤ الوقائع المصرية - العدد ١٠٠ فى ٣ مايو سنة ٢٠١٥

وزارة الداخلية

قرار رقم ١١٠٤ لسنة ٢٠١٥

بإنشاء وتشغيل السجن المركزى بقسم شرطة اخصوص

وزير الداخلية

بعد الاطلاع على القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون وتعديلاته ؛
وعلى القانون رقم ١٠٩ لسنة ١٩٧١ فى شأن هيئة الشرطة وتعديلاته ؛
وعلى قرار وزير الداخلية رقم ٧٩ لسنة ١٩٦١ فى شأن اللائحة الداخلية للسجون وتعديلاته ؛

قرر:

مادة ١ - يُنشأ سجن مركزى بمبنى قسم شرطة اخصوص بمديرية أمن القليوبية ،
يكون نطاقه المكانى دائرة قسم شرطة اخصوص .

مادة ٢ - تُنفذ فى هذا السجن الأحكام الصادرة ضد الأشخاص الوارد ذكرهم
بالمادة الرابعة من القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون .

مادة ٣ - ينشر هذا القرار فى الوقائع المصرية ، ويُعمل به من تاريخ نشره .

تحريراً فى ٢٠١٥/٣/٣١

وزير الداخلية

مجدى عبد الغفار

٦ الوقائع المصرية - العدد ٢٢٥ فى ٣٠ سبتمبر سنة ٢٠١٣

وزارة الداخلية

قرار رقم ٢٠٢٨ لسنة ٢٠١٣

وزير الداخلية

بعد الاطلاع على قانون الإجراءات الجنائية ؛
وعلى القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون ؛
وعلى القانون رقم ٥٤ لسنة ١٩٦٤ بإعادة تنظيم الرقابة الإدارية ؛
وعلى قرار وزير الداخلية رقم ٧٩ لسنة ١٩٦١ باللائحة الداخلية لقانون السجون ؛
وعلى قرار وزير الداخلية رقم ١٨٨٧٧ لسنة ٢٠٠٤ بتحديد غرف الحجز
بمقار هيئة الرقابة الإدارية ؛
وبناءً على طلب هيئة الرقابة الإدارية ؛

قرر:

مادة ١ - تعتبر المباني التالية التابعة لهيئة الرقابة الإدارية من الأماكن المرخص قانوناً بإيداع المتهمين فيها ، وذلك فى القضايا التى يتم ضبطها بمعرفة الهيئة وفقاً للضوابط القانونية المقررة فى هذا الشأن ، وهذه الأماكن هى :

م	المحافظة	العنوان	الدائرة التابع لها
١	القاهرة	(أ) المبنى الرئيسى لهيئة الرقابة الإدارية والمبنى الملحقة به الكائنة بتقاطع شارعى النهضة وأسماء فهمى - مدينة نصر . (ب) أمام كابريتاج حلوان - بجوار مركز طبى الست خضرة - حلوان الحمامات .	قسم شرطة مدينة نصر أول قسم شرطة حلوان
٢	الجيزة	القطعة رقم (٦) مركز خدمات غرب سوميد - أمام جهاز مدينة ٦ أكتوبر .	قسم شرطة ٦ أكتوبر
٣	القليوبية	ش فريد ندا - ناصية مساكن مجلس المدينة - منطقة أتريب - بنها .	قسم شرطة بنها
٤	الإسكندرية	(أ) ٢٦ ش الإسكندر الأكبر - الأزاريطة . (ب) ش ألبرت الأول - بجوار فندق مبارك الرياضى - سموحة - أمام حدائق أنطونيادس .	قسم شرطة العطارين قسم شرطة سيدى جابر
٥	البحيرة	ش الجمهورية - بجوار شركة كهرباء البحيرة - دمنهور .	قسم شرطة دمنهور
٦	مرسى مطروح	ش سوق ليبيا القديم - بجوار مكتبة مصر الجديدة .	قسم شرطة مرسى مطروح
٧	الغربية	ش على مبارك - مدينة طنطا .	قسم شرطة طنطا أول

الوقائع المصرية - العدد ٢٢٥ فى ٣٠ سبتمبر سنة ٢٠١٣ ٧

م	المحافظة	العنوان	الدائرة التابع لها
٨	المنوفية	ش محمود شاهين أمام سجن شبين الكوم .	قسم شرطة شبين الكوم
٩	كفر الشيخ	ش عبد الفتاح البراوى - متفرع من شارع طلعت حرب بجوار المركز الطبى - كفر الشيخ .	قسم شرطة كفر الشيخ
١٠	الدقهلية	ش سعد زغلول - قولنجيل - المنصورة .	قسم شرطة المنصورة ثان
١١	دمياط	ش البحر - بجوار الساحة الشعبية - أمام إدارة الرى - دمياط .	قسم شرطة دمياط
١٢	الشرقية	ش مجمع المصالح الحكومية - خلف المحافظة - الزقازيق .	قسم شرطة الزقازيق ثان
١٣	الإسماعيلية	الطريق الدائرى أمام جامعة قناة السويس - الإسماعيلية .	قسم شرطة الإسماعيلية ثالث
١٤	بورسعيد	ش صلاح سالم وطرح البحر - بجوار المجلس الشعبى المحلى - حى شرق .	قسم شرطة شرق بورسعيد
١٥	الفيوم	ش الاستاد الرياضى - منشية لطف الله - بجوار مكتبة الطفل - الفيوم .	قسم شرطة الفيوم
١٦	المنيا	ش كورنيش النيل - بجوار فندق إيتاب واستراحة كبار الزوار - المنيا .	قسم شرطة المنيا
١٧	بنى سويف	طريق المهندس سليمان متولى - الطريق الدائرى - كورنيش النيل - بنى سويف .	قسم شرطة بنى سويف
١٨	أسيوط	كورنيش ترعة الإبراهيمية - أمام مستشفى الصدر - أسيوط .	قسم شرطة أسيوط ثان
١٩	سوهاج	ميدان عبد الحميد رضوان - بجوار سينما أوبرا - سوهاج .	قسم شرطة سوهاج ثان
٢٠	الوادى الجديد	ش بورسعيد - أمام مبنى دار الضيافة - الخارجة .	قسم شرطة الخارجة
٢١	قنا	ش المستشفيات - أمام مستشفى الصدر - قنا .	قسم شرطة قنا
٢٢	الأقصر	ش الكرنك - بجوار مسجد السيد يوسف - أمام مكتبة الأقصر .	قسم شرطة الأقصر
٢٣	أسوان	شارع أبطال التحرير - متفرع من شارع كورنيش النيل - بجوار مبنى التخطيط الإقليمى - أسوان .	قسم شرطة أسوان
٢٤	السويس	شارع الجيش - بجوار نقابة المهندسين - السويس .	قسم شرطة السويس
٢٥	البحر الأحمر	طريق النصر - أمام مديرية الأمن بجوار مركز الإعلام .	قسم شرطة الغردقة
٢٦	شمال سيناء	ش الفاتح - بجوار السيرك القومى - العريش .	قسم ثان العريش
٢٧	جنوب سيناء	طريق الطور - بجوار محطة بنزين التعاون - الطور .	قسم شرطة الطور

مادة ٢ - يُلغى قرار وزير الداخلية رقم ١٨٨٧٧ لسنة ٢٠٠٤ بشأن تحديد غرف الحجز

بمقار هيئة الرقابة الإدارية .

مادة ٣ - يُنشر هذا القرار فى الوقائع المصرية ، ويُعمل به من اليوم التالى لتاريخ نشره .

تحريراً فى ٢٠١٣/٩/١١

وزير الداخلية

محمد إبراهيم

الوقائع المصرية - العدد ١١٨ فى ٢٤ مايو سنة ٢٠١٥ ٣

قرارات

وزارة الداخلية

قرار رقم ١٠٢٩ لسنة ٢٠١٥

وزير الداخلية

بعد الاطلاع على القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون وتعديلاته ؛
وعلى القانون رقم ١٠٩ لسنة ١٩٧١ فى شأن هيئة الشرطة وتعديلاته ؛
وعلى قرار وزير الداخلية رقم ٧٩ لسنة ١٩٦١ فى شأن اللائحة الداخلية للسجون وتعديلاته ؛

قرر:

مادة ١ - يُنشأ سجن مركزى بقسم شرطة النهضة بمديرية أمن القاهرة ،
ويشمل اختصاصه دائرة قسم الشرطة المشار إليه .

مادة ٢ - تُنفذ فى هذا السجن الأحكام الصادرة ضد الأشخاص الوارد ذكرهم بالمادة الرابعة
من القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون .

مادة ٣ - يُنشر هذا القرار فى الوقائع المصرية ، ويُعمل به من تاريخ نشره .

تحريراً فى ٢٢/٣/٢٠١٥

وزير الداخلية

مجدى عبد الغفار

٤ الوقائع المصرية - العدد ١١٨ فى ٢٤ مايو سنة ٢٠١٥

وزارة الداخلية

قرار رقم ١٠٣٠ لسنة ٢٠١٥

وزير الداخلية

بعد الاطلاع على القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون وتعديلاته ؛
وعلى القانون رقم ١٠٩ لسنة ١٩٧١ فى شأن هيئة الشرطة وتعديلاته ؛
وعلى قرار وزير الداخلية رقم ٧٩ لسنة ١٩٦١ فى شأن اللائحة الداخلية للسجون وتعديلاته ؛

قرر:

مادة ١ - يُنشأ سجن مركزى بقسم شرطة ١٥ مايو بمديرية أمن القاهرة ،
ويشمل اختصاصه دائرة قسم الشرطة المشار إليه .

مادة ٢ - تُنفذ فى هذا السجن الأحكام الصادرة ضد الأشخاص الوارد ذكرهم بالمادة الرابعة
من القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون .

مادة ٣ - يُنشر هذا القرار فى الوقائع المصرية ، ويُعمل به من تاريخ نشره .

تحريراً فى ٢٢/٣/٢٠١٥

وزير الداخلية

مجدى عبد الغفار

١٠ الوقائع المصرية - العدد ١٧٤ فى ٤ أغسطس سنة ٢٠١٤

وزارة الداخلية

قرار رقم ٢٣٩٦ لسنة ٢٠١٤

بإنشاء وتشغيل السجن المركزى بقسم ثان شرطة بنها

وزير الداخلية

بعد الاطلاع على القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون وتعديلاته ؛
وعلى القانون رقم ١٠٩ لسنة ١٩٧١ فى شأن هيئة الشرطة وتعديلاته ؛
وعلى قرار وزير الداخلية رقم ٧٩ لسنة ١٩٦١ فى شأن اللائحة الداخلية للسجون وتعديلاته ؛

قرر:

مادة ١ - يُنشأ سجن مركزى بمبنى قسم ثان شرطة بنها بمديرية أمن القليوبية ،
ويشمل اختصاصه دائرة قسم ثان شرطة بنها .

مادة ٢ - تُنفذ فى هذا السجن الأحكام الصادرة ضد الأشخاص الوارد ذكرهم
بالمادة الرابعة من القانون رقم ٣٩٦ لسنة ١٩٥٦ فى شأن تنظيم السجون .

مادة ٣ - يُنشر هذا القرار فى الوقائع المصرية ، ويُعمل به من تاريخ نشره .

تحريراً فى ٢٠١٤/٦/٣٠

وزير الداخلية

محمد إبراهيم

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