Re: UN Call for Submissions for the 9th session of the OEWG on Ageing

I refer to letter dated 05.04.18 from Ag. Permanent Secretary, Ministry of Social Security, National Solidarity & Environment and Sustainable Development, bearing reference MSS/19525/8/13T.

With respect to long-term care and palliative care, I have to report the following:

(i) The Mauritius Prison Service envisions a safer society through best correctional practice. Our mission statement is to keep detainees in safe, humane custody and help to prepare them for their release.

(ii) The Mauritius Prison Service has a 10-year Strategic Plan (2013-2023) which makes provisions for ageing and long-term detainees.

(iii) Around 2% of the prison population are above 60 years and are classified among the vulnerable groups in prisons. A Prison Psychologist has been recruited with a view to provide among others a psychological support to those detainees.

(iv) A Geriatric Unit has been set up at the Eastern High Security Prison of Melrose. These detainees are being accommodated in dormitories at night with a view to make them supportive to their fellow co-detainees. A round the clock medical service is available thereat.

(v) **Prisoners who require specialised treatment or surgery shall be transferred to specialised institutions or to civil hospitals** (Rule 27 of the Nelson Mandela Rule refers). Being given that palliative care is associated with life-threatening illness; therefore detainees who suffer from any serious illness are being cared at the Jawaharlal Nehru Hospital (JNH) Rose Belle in a Ward specially designed for detainees.
(vi) In cases where cancer is being detected and terminally ill detainees have to stay longer at public hospitals, petitions are being drafted and directed to the Commission on the Prerogative of Mercy. These detainees may be granted free pardon. This enables them to spend the rest of their days with their relatives to enhance their quality of life and may also positively influence the course of illness.

(vii) **Health care services should be organised in close relationship to the general public health administration and in a way that ensures continuity of treatment and care, including for HIV, tuberculosis and other infectious disease, as well as drug dependence (rule 24 (2) of the N. Mandela Rule refers).** Prisons Staff in Mauritius receive comprehensive training on how to handle prisoners living with HIV/AIDS and other infectious diseases. These prisoners receive treatment as is available in the community and which is in line with international standards. They may also be inducted on ARV and MST treatment under well defined protocol. Over and above, we allow them to have maximum visits with their relatives and involvement of other organisations within the civil society to provide psychosocial support to both prisoners and their relatives.

I submit for your consideration, please.

A. Heeramun

Chief Prisons Welfare Officer