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NSC WASHDC
DIA WASHDC
CIA WASHDC
JOINT STAFF WASHDC//J5/UNMA//
JOINT STAFF WASHINGTON DC//J-3//
CJCS WASHINGTON DC
USMISSION USUN NEW YORK
COMCJTF 180 BAGRAM AFG//CG/C3/C9/POLAD//
SECDEF WASHDC//USDP/J3//
USCINCCENT MACDILL AFB FL//CCJ3/CCJ4/CCJ5/POLAD//
USCINCSOC MACDILL AFB FL

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NSC FOR ZKHALILZAD, JDWORKEN, HMANN, RHANSON, DSEDNEY
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TAGS: PREL, PHUM, PTER, KAWC, AP, PK

SUBJECT: IMPROVED CONDITIONS AT SHIBERGHAN PRISON

REF: STATE 95030 (NOTAL)

Classified By: AMBASSADOR ROBERT P. FINN FOR REASONS 1.5

UNITED STATES DEPARTMENT OF STATE
REVIEW AUTHORITY: FRANK E SCHMELZER
DATE/CASE ID: 30 SEP 2004 .200303827

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(B) AND (D)

1. (C) Summary. The prison in the provincial (Jowzjan) capital of Shiberghan has the largest population of Taliban prisoners in Afghanistan. Shortly after the fall of the Taliban the prison suffered from over-crowding as well as shortages of food and medicine. A site visit on April 17 revealed a significantly better life for the prisoners with one-third the population of a year ago and sufficient nutrition and medical care. End Summary.

2. (C) Mazar-e Sharif-based Poloff conducted a site visit accompanied by a military civil affairs team with expertise in preventative medicine and prison assessment. A citizen soldier provided prison assessment expertise from the U.S. Army Civil Affairs Unit. Prior to being called to active duty in Afghanistan, [REDACTED]

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3. (C) The delegation interviewed the prison warden, Akhtar Khan and [REDACTED] prior to inspecting the grounds, medical facility, and interviewing 13 prisoners.

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4. (C) The warden reported this is a 43 year-old prison built to support 1000 inmates. In January 2002, the population swelled to 3478 as Taliban forces surrendered or were captured. Local forces were taxed to their capacity to care for the prisoners and requested assistance from the International Committee of the Red Cross (ICRC) for supplemental feeding assistance, prisoner registration, as well as, humanitarian medical and sanitation assistance.

5. (C) The picture is now better in April 2003 with a prison population of 1088, comprised of 564 Pakistani and 524 Afghan prisoners. Most of the prisoners have been in confinement for one and a half years. [REDACTED] there are 75 known Taliban commanders and 35 inmates convicted of civil crimes such as murder, robbery, gambling, and sexual abuse. The population was reduced by over 1000 through a series of amnesty decrees from President Karzai during Eid celebrations; others were released after investigation by the intelligence agencies. A small number of prisoners were transferred to U.S. control for detention elsewhere.

6. (C) The health of the prisoners has improved dramatically in the past year. There were three patients in the 14-bed sick ward with mild respiratory difficulties compared to an overflowing combat casualty ward in 2002. The humanitarian NGO Emergencies provides all the medicine and a medical staff of three. The physicians interviewed confirmed additional assistance is provided by the Shiberghan city public health hospital primarily to treat the 108 cases of tuberculosis (TB). There are 25 contagious TB patients housed in a stark but uncrowded TB isolation cellblock close to the infirmary and away from the prison population. The

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balance of the TB patients have been treated, do not have active TB and have been returned to the prison population. The medical facility is clean and provides a higher standard of care than the Balkh and Mazar regional clinics for Afghan citizens. The warden and medical staff reported one death in 2003 compared to 36 in 2002. There no longer is concern with dysentery or jaundice in the prison population. The ICRC has assisted in upgrading the sanitation system of the prison and the medical staff provides health education. Periodic outbreaks of lice and scabies are treated with appropriate medication and are not prevalent. The prisoner,s clothes

and bodies appeared as clean as the Afghan population we observe daily in Mazar and the Afghan countryside.

7. (C) The diet of the prisoners has steadily improved as the population decreased to a more manageable level. The ICRC provided a supplemental feeding program during the winter of 2002-2003 to ensure adequate nutrition. This was discontinued as the three meals currently provide sufficient calories. The diet includes bread and sugar for breakfast, rice for lunch and beans for dinner. Drinking water is from a tap in the cellblock.

8. (C) Poloff did not observe outward signs of physical mistreatment of the prisoners. Except for a walk through of the central courtyard where prisoners could be seen from behind locked gates and 13 randomly selected interviews with inmates, the delegation members did not go into the cellblocks for their own protection. Prison officials wanted to offer access but were correctly concerned about a spontaneous uprising of passionate Taliban and suspected al-Qa'ida prisoners against an American official. The ICRC [redacted] conduct bi-weekly visits to this prison with unfettered access to all prisoners. All the prisoners interviewed by the delegation said they had spoken with an ICRC representative and some have received and sent letters and had visits from relatives as a result of registration.

9. (C) The prisoners rotate for exercise by cellblock. The cells are emptied, scrubbed down, and bedding is aired out during their exercise rotation. Prisoners may flow between the interior and exterior courtyards during this time. Non-compliant prisoners are isolated or have their movement restricted. Prisoners may have visitors for five minutes on Mondays and Thursdays and may receive packages from family and friends.

10. (C) Comment: Following a January 2002 visit by Physicians for Human Rights (PHR) to Shiberghan prison, PHR released a report documenting the poor conditions there. Shiberghan became a synonym for misery. Human rights and press reporting since then have continued to feed off the PHR report that is now over a year old and out of date. Lodging and food at Shiberghan are on par with those of most Afghans who are not in prison. The medical facility and treatment is

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superior to what is available to citizens in the region. We saw no overt signs of animosity directed by the prison staff toward the prisoners, and the prisoners did not appear to be afraid of the guard staff. While conditions at Shiberghan are not ideal, prison officials working with IOs and NGOs have clearly improved prison standards and reduced the misery that was so evident in January 2002. End comment.
FINN

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