

Review Article

A review on prisoners health: a neglected group

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ABSTRACT

Crime is a man-made concept. Crime and its relation to various socio-demographic factors has been subject of debate since time immemorial. Crime is wide spread, diverse in nature and increasing in frequency. The rate of crime is steadily increasing day by day all over the world, India being no exception. Crime and its relation to various socio demographic and economic factors determine the nature of crime. In the age old times punishment was harsh and cruel; the punishments were exiling, enslaving, torturing, mutilating, and execution. The jails, lockups, and detention centres of various kinds have been in existence for thousands of years. But, only 200 years ago these places were used for detention for offenders. Various articles and studies had been reviewed in this study to gain the knowledge about the general health and mental health about the prisoners. The mental and general health problems among the inmates were highly prevalent when compared to general population.

Keywords: Crime, Prison, Communicable diseases, Mental illness

INTRODUCTION

Crime is a man-made concept. Crime and its relation to various socio-demographic factors has been subject of debate since time immemorial. Crime is wide spread, diverse in nature and increasing in frequency. The rate of crime is steadily increasing day by day all over the world, India being no exception.¹ Crime and its relation to various socio demographic and economic factors determine the nature of crime.

For the better understanding of violence and its effects, Centers for Disease Control (CDC) uses a four-level social-ecological model.² This model tries to take account of the following four socio-ecological factors influencing violence:

- Individual, biological, and personal factors (e.g., education, income, psychological disorders, experiencing abuse);
- Relationships (e.g., family and friendship patterns);

- Community context (e.g., schools, workplace, neighbourhoods); and
- Social factors (e.g., cultural factors, parent compulsion in the name of child welfare, male dominance, economic and social inequalities among groups within a society).²

Unemployment is one of the social factors involved in creation of crime and conviction. Also when a person is committing a crime and getting imprisoned he loses the job and earning, which affects the family's economic condition.² Income is therefore a key consideration, with jobs functioning as an effective "money delivery system" that reduces the incentive to commit economic crime. One's relative access to legitimate and illegitimate work opportunities operate to strongly influence the decision of that individual to commit crime.³

Crime is an outcome of particular interest. Many crimes in the country is attributed mainly due to the issues on

developmental deprivations and disparities which thereby resulting in the criminal attitude.⁴

Indian society currently on the phase of industrialization, urbanization and westernization in the form of structural development, socio economic improvement, and cultural development. This led to a new form of economic organization but also affected the social order, solidarity, human conduct and thought.

In India, young women are most involved in the criminal activities compared to the older ones. It was observed from various studies from all over the country that the women criminals were in between the age group of 20 to 30 years. Since they are not matured enough physically and mentally to tolerate and to getting along with their husbands and other family members. They mostly belong to low social and economic status in the society, their monthly income is also very low. Women prisoners are a small minority in the prison, but this minority is growing at a high rate. Though their needs and other rights could not be fulfilled because prisons are initially planned to accommodate male prisoners only.⁴

A child is an integral part of society in which he/she lives and because of his mental immaturity, he/she gets easily motivated by what they see around them. It is his environment and social context that provokes his actions. The children from urban and semi-urban areas who belongs to low and middle class families are more prone to commit crimes like theft, rape, and murder. This happens due the absence of proper environment both in the family and in the community. Family member rejection is the fundamental problem which sets the platform for social tragedy. Harmful environment, negligence of basic needs, wrong partner or friends and other abuses may turn a child to a delinquent.⁵

Over 33,000 juveniles centres are in India, in which the age group of 16 to 18 have been arrested for the crimes like rape and murder in 2011. A person can be charged with a crime even if that person doesn't know the law even exists. Ignorance of the law is no exception, means the person can be held responsible for his or her action even when he or she break a law which they don't know. The development of anti-social behaviour is a key indicator for the long-term pattern of the criminal activity. The peer groups play a major role in the development of delinquent behavior.⁵

PRISONS

In the age old times punishment was harsh and cruel; the punishments were exiling, enslaving, torturing, mutilating, and execution. The jails, lockups, and detention centres of various kinds have been in existence for thousands of years. But, only 200 years ago these places were used for detention for offenders.⁶ Prison is not a place where someone would be happy to live. The normal life of the offenders or inmate is restricted and the

freedom of movement and private space is limited whatever may be the reasons of punishment or whether it is seen as a punishment or as a mode of rehabilitation.⁷ The quantity and quality of prison population is significantly associated with the quality and the nature of criminals.⁷ The prison labour was introduced first in Europe in order to rehabilitate the prisoners, so that they can live a quality and productive life when they get released.⁶

The most disadvantaged, stigmatized and the underserved individuals in the community were the prison population. People from low socio economic backgrounds, poor educational level, unemployment and indigenous populations are being over-represented among prisoner populations.⁷ Since, they live their life behind bars and this takes them away from their families (parents, wives, children), jobs, friends, communities, and religious activities and puts them in an extremely bad moral environment for years. Social welfare organizations in prison revolves around vulnerable prison gangs and bad role models in jails and stresses that they are to be followed. Many prisoners are being beaten, raped, brutally murdered or made to live in fear.⁷

STATUS OF PRISONS IN INDIA

The living conditions in each and every prison and its allied institutions are meant for the care, custody, treatment and rehabilitation of prisoners. The prison should be made with basic human dignity in all the aspects such as accommodation, hygiene, sanitation, food and medical facilities. Overcrowding makes the environment worse for prisoners.

As per data of 2015 by National Criminal Records Bureau (NCRB), prisons of India having a total capacity of 3,66,781 while actual number of prisoners living in prisons was 4,19,623.⁸

As per Modern Prison Manual (2003), a normal human adult requires 2400-2800 kcal per day in his/her diet. And the drinking water should be hygienic and clean and readily available whenever he/she needs. The food in the correctional institutions is being prepared by the prisoners themselves working in rotation shifts, which are worth of around 1500-1800 kcal per day.⁸ This can eventually lead to malnourishment among the prisoners.

Sanitation is one of the most basic human rights issues of the prisoners. The hygienic conditions in prisons are predominantly affected by shortage of latrines, urinals and bathrooms, as per Draft National Policy on Prison Reforms. Due to overcrowding, improper construction of urinals and non-availability of flush system in latrines and no sewer lines in prison campus, leading to choking of sewerage system. The sub-standard sanitary conditions in the prison adds to the overall in-human conditions forced by the prisoners.

GENERAL HEALTH STATUS OF THE PRISONERS

The following studies were done elsewhere in order to assess the general health status of the prisoners. Wilper et al in 2009 done a study in United States and found that 38.5% of the inmates from federal prisons, 42.8% of the inmates from state prisons and 38.7% of the inmates from local jails are suffering from a chronic medical condition.⁹

In 2013 Kumar et al found that 29 inmates suffered from acute upper respiratory tract infections (URI), 15 inmates suffered from acute lower respiratory tract infections (LRI), 54 inmates had ascariasis, 26 inmates had diseases of musculoskeletal system and connective tissue and of 252 inmates had anaemia¹⁰. Another study done in India by Fotedar et al in 2016 showed that 71.8% of the study population had dental caries and 54.9% of the study inmates had calculus.¹¹

Bhowmick et al done a study in Faridkot in 2017 showed that about 15% of the inmates had myalgia, acid peptic disease and Upper respiratory infection and 5% had hypertension.¹²

PSYCHIATRIC MORBIDITIES AMONG PRISONERS

Many authors done studies in order to find the mental health of prisoners used the epidemiological prevalence of mental health problems to arrive the sample size. National Statistics on mental health found that prevalence of 14% among the female prisoners and 7% among the male prisoners have a psychotic illness compared with an epidemiological figure of 0.5% in the general population.¹³ Mental health, however defined as how people, communities, and organizations think and feel about themselves and their experience of mental wellbeing rather than just an absence of mental illness.¹⁴

Table 1: Prevalence of mental illness among the prisons in various studies.

Study year	Author	Study area	Results
1980	Government of Britain ¹⁷	Britain	The prevalence of psychiatric morbidity was high in remanded prisoners than the convicted prisoners.
1985	Guy et al ¹⁸	Philadelphia	<ul style="list-style-type: none"> • 2/3rd of the study participants were psychiatrically disturbed. • 34% of them were having identifiable mental illness. • 11% of the inmates needed immediate in patient care.
1995	Joukamaa et al ¹⁹	Finland	<ul style="list-style-type: none"> • Prevalence of psychiatric illness among the study participants was 50%. • 18% had personality disorders.
2002	Fazel et al ¹⁵	Multi setup systematic review	<ul style="list-style-type: none"> • 3.7% of the men had psychotic illness. • 42% of the study inmates had personality disorders. • 21% had antisocial personality disorders.
2003	Simpson et al ²⁰	New Zealand	Among the study inmates Maori prisoners had increased suicidal thoughts.
2005	Linehan et al ²¹	Ireland	<ul style="list-style-type: none"> • 7.6% had psychosis. • 10% had major depression. • 31.2% had lifetime history of any mental illness.
2005	Ireland et al ²²		<ul style="list-style-type: none"> • A comparative study between young offenders and juveniles. • Young offenders are more likely to get depressed and psychologically distressed.
2005	Butler et al ²³	Australia	43% of the study inmates had at least one among the major psychiatric illness like psychosis, anxiety, and affective disorder.
2006	Butler et al ²⁴		He found the 12 months prevalence of psychiatric illness around 80% had psychiatric illness whereas the community prevalence was 31%.
2006	Fazel et al ²⁵	Multi setup systematic review	Prevalence of substance abuse and dependence was very high in prison inmates when compared to general population.
2006	Sinha et al ²⁶	Jharkhand, India	The study inmates had poor adjustments in social and emotional areas on the scale used.
2013	Torwane et al ²⁷	Madhya Pradesh, India	<ul style="list-style-type: none"> • 57% of the inmates had depression. • 48% had psychotic disorders. • 12.3% had anxiety disorders.
2014	Gonzlaez et al ²⁸	United States	<ul style="list-style-type: none"> • 26% of the study participants had mental illness in their lifetime. • 50% of the mentally ill prisoners were not given any pharmacotherapy.

Only three studies from non-Western societies with minimum sampling, a report in a study done by Fazel and Danesh. They conducted a systemic review in 2002, 62 surveys done from 12 countries which includes 22,790 prisoners.¹⁵ There are only a limited number of studies done in Indian prisons one such study is conducted in Jaipur central jail by Bhojak et al attempting to study the psychiatric morbidities among the prison population.¹⁶

Table 1 explains the prevalence of mental illness among the prisons in various studies conducted elsewhere.

SUMMARY

Disease management in prisons can be organized through two levels of health care individual level, institutional level. At individual level self-care and drug compliance should be taught to the inmates in managing and preventing the disease. At institutional level screening of diseases and better infrastructure for treatment should be provided. The prevalence of morbid diseases like diabetes, hypertension, cardiovascular diseases and other mental disorders were high among the prison inmates. This needs to be addressed through periodic screening for chronic diseases, de-addiction counselling services, proper treatment, supervision to prevent the use of drugs and physical violence, to improve the quality and quantity of food, adopting the standard for water quality, to provide and better sanitation and ventilation. The mental illness among the prisoners were high when compared to the general population. This could be overcome by giving mental health education, awareness creation among the prison by trained staffs and this will help the prisoners to maintain the bond between their family members. This could help them to overcome the depression and make them a reformed person to return to the society and will be benefitting to the family. Effective health education on nutrition, sex education, personal hygiene, environmental hygiene and ill effects of alcohol and drug abuse should be undertaken to the prisoners. The prison should be provided enough funds to improve the quality of foods and water standards and basic sanitation in order to improve the nutritional status of the inmates and related infrastructure should be improved in order to avoid the overcrowding. Concept of open air jails, wherever possible should be constructed and more prisoners can be accommodated.

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