

# **STATE OF HYGIENE IN INDIAN PRISONS**

## **INTRODUCTION**

This article is an attempt at understanding the state of physical hygiene in Indian prisons. It aims to analyse the current state of physical hygiene in Indian prisons, the need for better hygiene, the various steps that have been undertaken and the existing shortcomings and also cite possible remedial measures for the future. Prisons are meant to primarily reform people. Instilling a sense of hygiene and sanitation is a very vital step towards ensuring that these reformed individuals are also healthy citizens, as a healthy body leads to a healthy mind.

This article aims to answer the following research questions-

- 1- What are the prevalent international norms for hygiene in prisons?
- 2- Where do Indian prisons stand with respect to this?
- 3- What are the shortcomings with respect to hygiene in Indian prisons and how does it affect prisoners?
- 4- Whether any norms exist with regards to hygiene management in Indian prisons?
- 5- How can these shortcomings be overcome?

## **CONSTITUENTS OF HYGIENE**

In this article, I intend to touch upon these aspects of hygiene-

- 1- Personal hygiene- brushing and bathing
- 2- Kitchen hygiene- the common eating facility shared by the inmates
- 3- Hygiene of cells
- 4- Prison healthcare facilities
- 5- Lavatories in prisons

## MULLA COMMITTEE

The All India Prison Reforms Committee, also known as the Mulla Committee, worked on the aspect of prison reforms between 1980-1983. The committee had submitted a report, detailing how the existing set up of jails could be improved. They had covered all the aspects- medical, administrative, hygiene etc.

In 2015, the MHA submitted another report, which detailed the implementation of the aforementioned report, which disclosed the following points<sup>1</sup> –

- 1- There seems to be a lack of water based flush type toilets in jails- in some states like Uttar Pradesh and Haryana, there was a 50 per cent shortage of such toilets.
- 2- There is also a major dependence on open pan based toilets- with Haryana, Tamil Nadu and Uttar Pradesh, having a major chunk of their toilets in jails in this form- there is an urgent need to discard this system and use water based flush toilets.
- 3- Many states have not taken any steps to assess the status of prison sanitation, hygiene, kitchen and treatment of sick prisoners. Furthermore, no mandate has been set for medical officers, psychiatrists and psychiatric social workers. It was also found that in about nine states and Union territories, no post of Medical Officers has been created to look into the healthcare of detainees in jails and correctional homes.
- 4- However, a major positive that has been found is that, in about 23 states and Union territories, the medical officer's post has been designated to be second only to the jail superintendent. This has enabled this post to assist the jail superintendent in all major activities; especially helping the jail superintendent in emergency situations.

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<sup>1</sup> mha1.nic.in, *IMPLEMENTATION OF THE RECOMMENDATIONS OF ALL-INDIA COMMITTEE ON JAIL REFORM (1980-83) VOLUME 1*, available at <http://mha1.nic.in/PrisonReforms/pdf/Mulla%20Committee%20-implementation%20of%20recommendations%20-Vol%20I.pdf> (Last visited on February 15,2016).

## **PREVALENT INTERNATIONAL NORMS**

The International Committee on Red Cross (ICRC), has come up with a set of stringent norms to ensure that detainees are allowed equitable access to basic amenities associated with maintenance of hygiene and sanitation

With regards to water these measures have been suggested<sup>2</sup>-

- 1- Availability of water 24 hours a day
- 2- There should be adequate water purification and portable systems available. These must also adhere to WHO standards.
- 3- There should be different entry points for men, women and juveniles to water. Furthermore, there should be multiple sources of water in order to avoid conflict.
- 4- There should be adequate water sources installed throughout the detention facility, at different places, for optimum usage.
- 5- “Ground reservoirs” or “water towers” should be available to hold water for emergency purposes.

With regards to toiletry system, these measures have been advised<sup>3</sup>-

- 1- Construction of one toilet to cater to 25 detainees. There should be similar provisions for single or multiple holding cells to ensure immediate and sufficient access.
- 2- There should be availability of one shower per 50 detainees with allowance for a bath at least 3 times per week.
- 3- Each toilet block must be equipped with one tap for availing the facility of washing hands.

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<sup>2</sup> icrc.org, *WATER, HYGIENE, SANITATION AND HABITAT IN PRISONS*, available at <https://www.icrc.org/eng/assets/files/publications/icrc-002-4083.pdf> (Last visited on February 15,2016).

<sup>3</sup> *Id.*,2.

#### Cleaning and maintenance of toilets<sup>4</sup>-

- 1- This could be carried out by forming a dedicated team of detainees specifically delegated with this task.
- 2- They should be equipped with requisite machinery and means, which are to be kept in a concentrated storage space.
- 3- The dedicated team should be given adequate training and mandate to manage the cleaning system.
- 4- In case, a situation arises when the toilets are blocked or becomes out of commission, urgent action should be undertaken to ensure that the hygiene conditions do not worsen.

#### With regards to women<sup>5</sup>-

- 1- Women should be able to avail secured entry to toilets throughout 24 hours
- 2- These toilet facilities should be situated in a secured location, wherein women prisoners don't feel any risk while trying to gain access.
- 3- Extra facilities should be availed to women who are pregnant, lactating, under a menstrual cycle or taking care of relatively young children.
- 4- There should be sufficient facilities available for women to avail bathing. They should have access to amenities like soap and fresh towels etc. to carry out this activity well.
- 5- Women should be provided with suitable sanitary products to deal with menstruation (including the disposal of materials) with dignity and privacy. Detainees should be provided with a sufficient supply of such products to meet individual needs.

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<sup>4</sup> *Id.*,3.

<sup>5</sup> *id.*,4.

## **BPRD'S MODEL PRISON MANUAL-**

The Bureau of Police Research and Development (BPRD), suggested a slew of measures to improve hygiene in Indian prisons, in its model prison manual<sup>6</sup>-

- 1- Prisons should have one urinal facility (commonly termed as a latrine), installed for 10 persons. The ratio of usage of such facilities during day time can be one unit per six persons.
- 2- The latrines should be constructed on a higher base ground, where sun rays are reachable, but rain water does not have sufficient access. The excreta should be able to go through the receptacles. The latrines should be equipped with foot rests next to the seats. There should be glazed ceramic tiles as further away from the floors as possible.
- 3- There should be bathing cubicle in the ratio of 1:10, with access depending on prevalent climate conditions.
- 4- There should be facilities for the purpose of rain water harvesting, recycle of water and keep up to 135 litres of water for fulfilling an individual's needs.
- 5- The kitchen should cater to up to 250 prisoners. These facilities should be well lighted, cleaned daily and also be far from sleeping barracks. There should be fly proof wire mesh and exhaust fans. There should be smoke detectors in the room as well to deal with the fire hazards.
- 6- There should be no caste or religious bias in handling kitchen duties. LPG, Kneading machines, chapatti making machines, mixers and grinders should be added as well. Utensils made of stainless steel should be preferred.
- 7- The tiles in kitchen walls should be up to a height of 2 metres for cleanliness purposes.
- 8- There should be adequate number of wards and beds to deal with men and women patients separately. All central and district prisons should have hospital facilities to cater to at least 5 per cent of the inmates at any point in time.
- 9- The prison facility should have adequate inlets for access to fresh air and light. Impermeable material should be used for construction of prison walls and bathrooms. Bathrooms should be constructed close for prisoners to have access. There should be sufficient walking space for patients to have access to refreshment.

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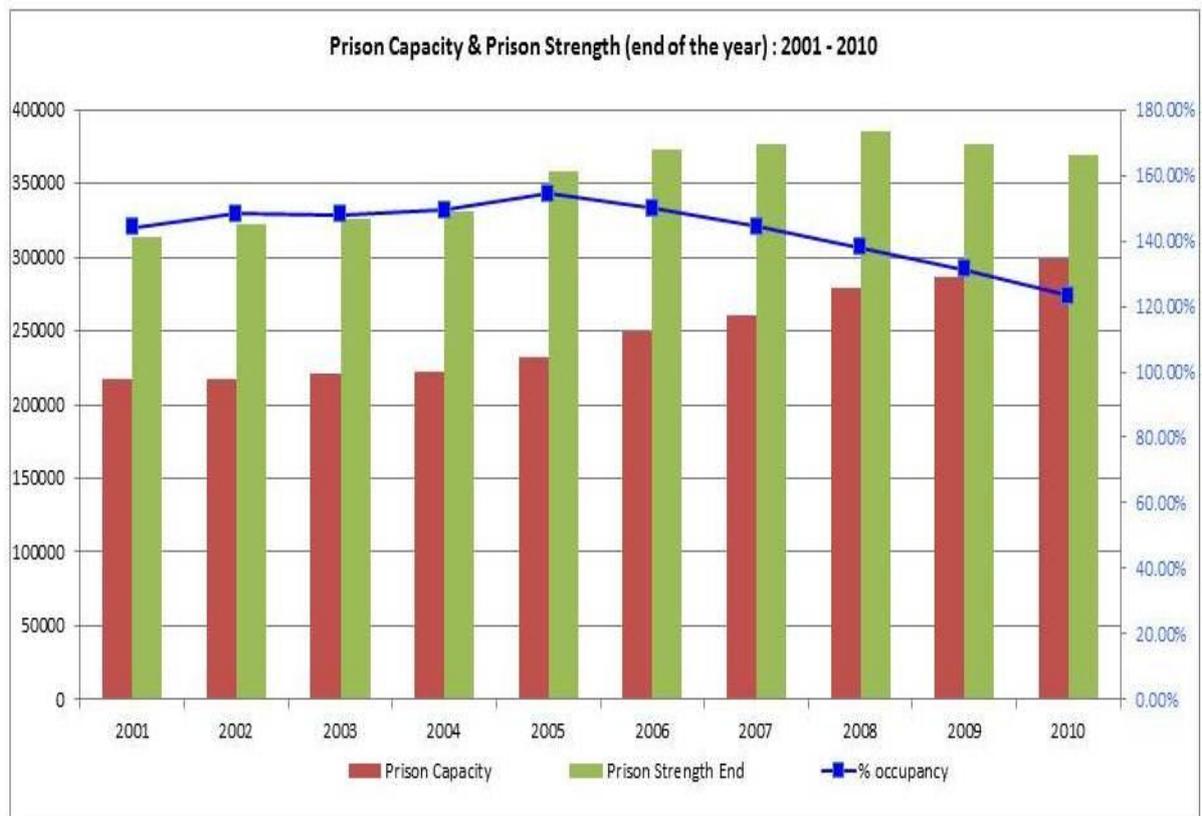
<sup>6</sup> bprd.nic.in, *MODEL PRISON MANUAL FOR THE SUPERINTENDENCE AND MANAGEMENT OF PRISONS IN INDIA*, available at <http://bprd.nic.in/writereaddata/linkimages/1445424768-content%20%20chapters.pdf> (Last visited on February 15,2016).

10- The prison hospital, should ideally be at the entrance of a jail and also consist of-

- a) Ward for patients
- b) Toilet and bathing facilities at the rate of one for every five patients
- c) Store room for hospital furniture and equipment
- d) Dressing cum-injection room
- e) Room for minor surgery
- f) Room for laboratory
- g) Room for the Medical Officer.
- h) Isolation rooms for accommodating patients with infectious and contagious diseases (such as T.B., Leprosy and H.I.V./AIDS).
- i) Isolation rooms for accommodating mentally ill patients.

## OVERCROWDING IN INDIAN PRISONS-

Overcrowding is a major problem in Indian prisons. As shown in this chart<sup>7</sup>-



It is thus logical, that in the midst of such rampant overcrowding and lack of space, it is highly difficult to manage prisons and maintain hygiene. Thus, there is an urgent need to ramp up our prison facilities- by utilizing facilities to the optimum and build sleeker and judicious newer ones.

<sup>7</sup> [contestedrealities.files.wordpress.com, Prison Capacities and Prison Strength \(End of the Year\) 2001-2010](https://contestedrealities.files.wordpress.com/2014/08/slide1.jpg), available at <https://contestedrealities.files.wordpress.com/2014/08/slide1.jpg> (Last visited on February 15, 2016).

## **MEASURES SUGGESTED BY NHRC-**

The National Human Rights Commission (NHRC), came up with these suggestions in the National Seminar on Prison Reforms, held in 2011<sup>8</sup>-

- 1- Prisons should have a more efficient medical system. They should compulsorily conduct a check-up of detainees while they are brought to jail and then regularly conduct a check-up. Their medical records should be maintained punctually.
- 2- There is an urgent need to upgrade sanitary, hygiene and drinking water amenities in prisons across India
- 3- Detention centres should become more women-friendly, with similar facilities being bestowed on the aged and mentally ill prisoners
- 4- There should be greater focus on mentally ill detainees. They should be segregated from regular prisoners, as their hygiene needs are different.
- 5- Regular exercise and yoga sessions should be conducted in conjunction with NGOs.
- 6- There should be regular cleaning of the sewage system-minus human help for cleaning septic tanks wherein mechanical means should be encouraged.

## **CURRENT STATE IN INDIAN PRISONS**

Current situation, with regards to Indian prisons is as follows<sup>9</sup>-

- 1- According to the World Prison Population list, there has been an increase or spurt in the number of detainees lodged in detention centres and jails in India.
- 2- According to this report, about 4.12 lakh prisoners, which included pre-trial detainees have been lodged in different jails in India.
- 3- However, most of these prisoners come from the under-privileged sections of the society- marginalized or socially disadvantaged groups and have limited knowledge about health and practice unhealthy lifestyles.

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<sup>8</sup> nhrc.nic.in, *MINUTES & RECOMMENDATIONS OF THE NATIONAL SEMINAR ON 'PRISON REFORMS' HELD AT INDIA HABITAT CENTRE, NEW DELHI ON 15TH APRIL, 2011*, available at <http://nhrc.nic.in/Documents/Minutes%20&%20Reco%20Prison%20Reform.pdf> (Last visited on February 15,2016).

<sup>9</sup> US National Library of Medicine, National Institute of Health, *Health and beyond...strategies for a better India: using the "prison window" to reach disadvantaged groups in primary care*, Soumyadeep Bhaumik and Rebecca J Matthews, July-September (2015), available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4535085/> (Last visited on February 15,2016).

- 4- A good number of the prisoners- almost one-third of them remain lodged in detention facilities for an average time period of about three months.
- 5- There is a healthy interaction that exists between prisoners of different detention facilities, between prisoners and the outside world and between prisoners and health care centres.
- 6- There has been a high prevalence of diseases like sexually transmitted infections (STIs), HIV-AIDS, hepatitis B and hepatitis C amongst the prisoners.
- 7- According to a study conducted between 2007-2010, around 10 percent of the detainees in Indian prisons suffered from HIV.
- 8- It was also found that the prevalence of HIV was much higher amongst women detainees than male detainees- as only 1.7 percent male prisoners were found to be suffering from HIV as compared to 9.5 per cent women prisoners.
- 9- The prevalence of HIV in Indian prisons was higher than the national average of 0.32 per cent amongst males and of 0.20 per cent amongst females.
- 10- It was also found that there has not been any major study undertaken by Indian prison officials to understand and eradicate this major problem that persists amongst the prison inmates.
- 11- According to the report on “Prevention of spread of HIV amongst vulnerable groups in South Asia” from United Nations office on drug and crimes –“63% of prisoners in India had a history of drug abuse”. This prevalence of substance abuse was anywhere between 8 per cent to 63 per cent of the prison populace.
- 12- There is also a high prevalence of unprotected sex and rampant substance abuse amongst prisoners in India, in the post release period. This has been termed as “high risk behaviour”.
- 13- Lack of conjugal life in prisons had also led to prisoners indulging in such acts of high risk. According to a study, in a jail. There could be almost 70 per cent detainees who had multiple sexual partners, while about 81 per cent had indulged in unprotected sex.
- 14- Suicide rates in Indian prisons were abnormally high. It could be attributed to anywhere between 5-11 per cent of the total number of prison deaths. Police brutality was often a major cause of such suicides.
- 15- There is an urgent need to undertake steps to create a robust and impactful prison health system in order to tackle a great deal of these health associated problems that persist in Indian prisons.

## HYGIENE IN UK PRISONS

This article aims to compare the hygiene conditions in United Kingdom with that Of India, in order to evaluate how foreign prisons cater to the sanitary needs of its detainees and compare Indian prisons with that of its former colonial master.

Some of the prominent features are<sup>10</sup>-

- 1- According to the Prison Act 1952, cells could cater to detainees only after approval by an inspector rank official, that its lighting, heating, ventilation and other facilities are adequately available to make it hospitable.
- 2- Every cell should be able to cater adequate space for furniture and normal “in-cell “activities. These cells could be uncrowded or crowded. In both the aforementioned cases, these “in-cell” activities are included-
  - A –Sleeping, dressing and undressing
  - B-Storage (volumetric measurement)
  - C- Personal pursuits such as reading, writing, TV/sound and music system, etc.
  - D-Taking meals
  - E- Usage of latrines and wash basins for maintenance of personal hygiene.
- 3- There is a big problem of slopping out- which involves usage of buckets to act as a temporary lavatory. It led to a prisoner, filing a petition in the high court.
- 4- Overcrowding has also led to cleanliness problems in cells. Governors are also meant to ensure that prisoners are being detained humanely and granted access to as many facilities as possible.
- 5- Prisoner’s personal hygiene is given a lot of importance. They are to be compulsorily bathed at least once a week. They are to be provided with requisite toiletries for their personal hygiene and cleanliness. Although, prisoners are supposed to buy such items, in cases of financial crunch, the prison will provide them with deodorant, toothpaste and toothbrush.
- 6- There should be adequate facilities available for laundry.

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<sup>10</sup>Crimeandjustice.org.uk, European Prison Observatory, *Prison Conditions in the United Kingdom*, Arianna Silvestri, September 2013 , available at <http://www.crimeandjustice.org.uk/sites/crimeandjustice.org.uk/files/Prison%20conditions%20in%20the%20UK.pdf> (Last visited on February 15,2016).

## MEASURES TO IMPROVE PRISON HYGIENE

Measures that have been suggested<sup>11</sup>-

- 1- Generating additional budget- Prison authorities can undertake measures to reduce staff by increasing reliance on mechanical or electrical means as a safe and efficient alternative. These would not only cut costs but also ensure that additional funds are saved for the purpose of improving jail amenities- hygiene based as well. Furthermore, jails can also attract profits, by involving and rewarding inmates for starting up and building upon possible business means.
- 2- Greater governmental participation- Prison administration can be made more efficient by involving officials on a larger scale. A dedicated and trained prison cadre, regular visits and inspections by politicians, governors and ministers as well as regular monitoring of prison conditions can help in maintaining hygiene levels in detention facilities.
- 3- Solution to overcrowding- There is an urgent need to build up and ramp up existing prison facilities. A means of doing that can be to encourage building up of obsolete and ignored sections of prisons into new blocks, organisation of shelves and possessions. Open camps and open prisons could also be opened up after conducting a thorough security assessment. Better resource management, can open up avenues for better utilisation of resources for maintaining hygiene levels.
- 4- Involving private parties- Potential NGOs and religious can work in tandem with prison management to improve sanitary and hygienic conditions. By actively involving volunteers, detainees can be encouraged to adequately cooperate with prison officials to improve the sanitary conditions in prisons.
- 5- Developing cordial relations between inmates and officials- By encouraging amicable relations between prison officials and detainees, i.e.one based on co-operation and not competition, a more conducive atmosphere can be generated for management of prison. Detainees should be adequately compensated for their good behaviour. By encouraging detainees to maintain a certain level of hygiene and rewarding them, not only can prisons remain clean and hygienic enough, but also create chances of a more healthy individual contributing to the society in his post detention period.

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<sup>11</sup> Unafei.or.jp, *Practical measures to improve prison conditions*, available at [http://www.unafei.or.jp/english/pdf/PDF\\_rms/no57/57-28.pdf](http://www.unafei.or.jp/english/pdf/PDF_rms/no57/57-28.pdf) (Last visited on February 15, 2016).

## **CONCLUSION-**

Thus, in conclusion, I would like to state-

- 1- There is an urgent need to undertake measures to overhaul the existing sanitary and hygienic conditions in Indian jails.
- 2- There have been measures undertaken in the past; the Mulla committee report and the Bureau of Police Research and Development (BPRD)'s model prison manual. These reports and manuals came up with significant measures and norms, that were meant to make detention centres humane and hygienic.
- 3- The prison department lacks adequate facilities, personnel and funds. These are critical needs and should not be ignored.
- 4- Furthermore steps should be undertaken to promote a harmonious relationship between the prison guards, officials and inmates. It is critical, that there should be a sense of harmony to ensure that there are no vested interests and/or less than friendly relations since they adversely affect the functioning of jails in India.
- 5- There is a need to ensure that alternate complaint mechanisms are set up that allow prisoners to approach relatively important officials and share their distress.
- 6- However, it is to be noted that implementation of the aforementioned manuals and norms have been virtually non-existent. There have also been cases of maladministration and non-administration, which has only worsened living conditions in jails. Furthermore, these individuals suffer from several potential health hazards during and post their detention period.
- 7- Finally, there is a need to set up monitoring systems to look into our jails on a periodic basis- this can involve ministry officials or officials as highly ranked as the governor. This will make implementation and maintenance more stringent.
- 8- Prisons should involve prisoners in maintaining hygiene, reward them adequately and also involve private parties like NGOs and religious groups.
- 9- There is also a need for Indian prisons to undertake studies involving foreign prisons. They should visit foreign prisons, understand their functioning, compare and contrast and exchange data for better prison management in the future.

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