Prisoner’s Rights: An In-depth Study on the Prison Infrastructure, Psychological and Physical Health of Prisoners, and Unnatural Deaths in Prison

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Abstract

India is a nation with the second highest population in the world with a moderate crime rate, thus naturally, overcrowding in prisons in India has been a prevalent issue since long back. Overcrowding in prison is the result of the slow pace of the judiciary in conducting the criminal procedures. It is evident by the fact that the number of under trial prisoners is more than the number of convicted prisoners. In such a scenario it is of massive importance that the rights of the all prisoners are adequately protected. However, in reality, it is far from being the case. The authors have studied and analysed the prominent issues that arise from a lack of competent ground staff and poor infrastructure within prisons, such as poor mental and physical health among prisoners, corruption among prison officials, and arbitrary activities inside prisons across India.

The authors have shown in this paper that how poor infrastructure in prison leads to unnatural deaths in prisons, by analysing the statistics provided by the NCRB. After a thorough analysis of the current scenario of prisons in India, the authors have studied the respective current circumstance in reference to international and UN conventions, as well as human rights. We conducted an in-depth psychological research of the inmates' conditions in the prison, as well as the psychological adversities caused by overcrowding, familial deprivation, dread of the unknown, and isolation.

Keywords – “Prisoner's rights”, “mental and physical health”, “UN conventions”, “NCRB”.

A. Introduction

The role of a prison is very diverse in nature in the modern day and hence, it cannot be summed up in one word, or even one sentence as a matter of fact. One of the functions of prison is to serve as a form of punishment to an individual for his or her anti-social behaviour. Other functions include incapacitation, deterrence, rehabilitation, denunciation and retribution. Each function in itself reflects upon the very concept of justice, equity and good conscience. It shall be noted that in the modern day, the function of rehabilitation has gained more prominence within the prison administrative system. Meaning, that more and more importance is being given to correct or modify anti-social behaviour so that offenders can be
integrated into the fabrics of society. However, it shall be noted that in order to modify an individual’s behaviour right amount of infrastructure should be available within the prison walls where the offenders are confined. Apart from proper infrastructure, the right personal staff should also be available to the within the prison walls.

This is a lot easier said than done. Due to severe overcrowding in prisons across India it is quite natural for the prison administrative system to not work quite as efficiently as desired. The optimum total capacity of Indian prisons as of the year 2021 was 4,25,609 and the total prison population at the end of 2021 stood at 130.2% of the optimum population, that is, 5,54,034. Inmate ill health, misconduct and post release recidivism are some of the effects/results of prison overcrowding which is often caused by poor living conditions and inadequate infrastructure. In the case of Dilip Mishra vs. State of U.P., it was established by the court of that overcrowding does indeed lead to social and health related issues in prisons. Prison overcrowding increases the risk of psychological stress as well as psychosomatic, mental and physical illness while also maintaining a high probability of giving rise to interpersonal communication difficulties which may eventually lead to a conflict situations. If such situations aren’t dealt with in proper fashion, the same can lead to anxiety, frustration, aggression, deviant behaviour and even behaviour against a person within the prison walls. The fact that overcrowding can lead to acts to aggression among inmates is evident by a statistic that shows that in the year 2021, 11 inmates were murdered by other inmates. The number of physical attacks on inmates by other inmates is innumerable and off records, even in NCRB records. Overcrowding in prisons is measured by more than just the ratio of prisoners to rated capacity; it also includes the extent to which a prison, or prison system, houses more prisoners than its infrastructure can humanely accommodate. Indeed, many prison systems have increased their rated “capacity” over the last thirty years without commensurate increases in programming, medical, and mental health resources.

The rate of inmate assaults on other inmates was found to have a statistically significant positive correlation with the overcrowding variable when compared to the prison's design capacity. This would suggest that the frequency of assaults by inmates against one another rises when a prison's population surpasses its intended capacity. There was also a correlation discovered between the number of prisoners for each correctional staff member and the frequency of assaults on staff and other prisoners. In both situations, the rate of assaults decreases with an increase in the inmate to officer ratio. The probability of violence between detainees increases drastically if they do not have interpersonal space between them. Overcrowding in prisons always run the risk of security breaches and difficult working conditions for the staff as well.

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4 World Prison Brief (India), available at https://www.prisonstudies.org/country/india
5 Nation Crime Records Bureau, Govt. of India, Prison occupancy (2019-2021), updated on 31/12/2021.
9 Nation Crime Records Bureau, Govt. of India, Gender wise unnatural deaths of prisoners in prisons during the year (2021), updated on 31/12/2021
B. Right to a safe environment

Principle 1 of the Stockholm declaration, adopted at the UN conference on human rights, 1972 states that “man has the fundamental right to freedom, equality and adequate conditions of life, in an environment of a quality that permits a life of dignity and well-being.”

It has already been established that overcrowding leads several interpersonal issues within prison walls and hence, ends up creating an environment which is neither safe nor healthy, both physically and mentally for the inmates. Rule 42 of the ‘standard minimum rules for the treatment of prisoners’ states that adequate living conditions addressed in this covenant including adequate personal space shall apply to all prisoners without exception. Therefore, it can be said that overcrowding leads to the violation of rule 42 of the aforesaid covenant.

Therefore, it can be said that overcrowding directly or indirectly affects and even violates a basic human right of right to a safe environment of the inmates. In all fairness, the aforesaid provision of the UN conference is too grey and vague. However, the international covenant on civil and cultural rights and the international convention on economic, social and cultural rights have very clearly show concern towards the right to a safe and clean environment. The right to life is protected under article 21 of the Indian constitution and also Article 6(1) of the covenant on civil and cultural rights. In the case of Shri D.K. Basu, Ashoke K. Johri vs State of West Bengal, the court held that the expression ‘life of personal liberty’ has been held to include the right to live with dignity and thus it would also include within itself a guarantee against torture and assault by the state or its functionaries. The expression ‘life of personal liberty’ therefore also extends towards prisoners as article 10(1) of the international covenant on civil and political rights states all persons deprived of their liberty shall be treated with humanity and with respect with inherent dignity of the human person. In the case of subhash kr. Vs. State of Bihar, the apex court of India held that the right to live with dignity becomes illusory in the absence of humane and healthy environment. It was also observed in the case of People’s democratic rights vs. Union of India that right to life guaranteed under article 21 of the Indian constitution is not confined merely to physical existence, rather, it also includes the right to live with basic human dignity within its ambit. Due to this, in the case of Andhra Pradesh vs. Challa R. Krishna Reddy that even a prisoner shall continue to enjoy all his fundamental rights including right to life.

C. Competence of prison staff.

A physically and mentally unhealthy and unclean environment within prison walls is the aftereffect of overcrowding in prisons. The prison administrative system has proven to be a failure when it comes to resolving the issue of overcrowding in prison, along with that the slow pace of the judiciary in providing

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11 Principle 1 of the Stockholm declaration, adopted at the UN conference on human rights, 1972
15 Dr. ho Agarwal HR pg 182
17 International Covenant on Civil and Political Rights
19 People’s democratic rights vs. Union of India 1982 AIR 1473 1983 SCR (1) 456 1982 SCC (3) 235 1982
criminal justice has also contributed to the same. Since, overcrowding in prisons cannot be dealt with at a macro level, it becomes necessary for the prison administrative system to contain the adversities that arise from overcrowding in prison.

As stated afore, overcrowding in prison leads to an unhealthy and even dangerous environment for all within the prison walls thus violating the right to a safe and clean environment of the inmates and hence, the prison staff has to be competent enough to handle any kind of situation in a non-arbitrary manner, so that the rights of the prisoners can be protected.

During the time frame between 2019 to 2021 a total of 534 unnatural deaths have occurred in prisons across India. In the year 2021 itself, a total of 185 unnatural deaths had occurred in prisons across the nation and ironically enough, out of which none of them were executions. A hundred and eighty-five deaths in a calendar year entails that on average, a prisoner dies of unnatural causes in India every two days. It should be noted that under ideal circumstances, apart from executions, prisoners should always be protected from unnatural deaths. Unnatural deaths in prisons include suicides, murders, accidents and even “death due to negligence by prison staff”.

**Case study** – Ram Singh, the 35-year-old primary culprit in Nirbhaya's brutal gang rape, was discovered dead in Tihar Jail cell, just hours before his scheduled appearance in Saket court for the in-camera trial hearings. Officers from the Tamil Nadu Special Police (TSP) discovered his body hanging from a grill on the ceiling at 5.45 a.m. Mange Ram, Singh's father, has maintained his son's murder idea, claiming that he met Singh three days ago and found him to be in good health. Singh has alleged regular beatings and sexual assault in jail, and his lawyer has requested that his cell be moved. V.K. Anand, Singh's lawyer, has also supported the sexual assault accusation. When the event occurred, there were three other under trial detainees in the cell with Singh, and Tihar sources stated they did not raise an alert. The incident, which appears to be a suicide attempt, has sparked various issues. Singh was five feet and five inches tall, weighed around 60 kilograms, and had suffered significant arm injuries in an accident in 2009. After obtaining the inquiry officer's report and the post mortem report, the actual cause of death will be known.

What is unclear is why the other three detainees were unable to hear any noise when Singh reportedly attempted suicide, or whether there is something else to the narrative. Another issue that casts doubt on the suicide scenario is Ram Singh's right arm, which was partially immobile, and it is impossible for such a person to hang himself with only one arm.

Tihar officials have labelled Ram Singh's death as "an apparent case of suicide," despite the fact that a postmortem test ruled out the possibility of murder. Singh died by hanging, according to a senior AIMS doctor, with no bruises or signs of drunkenness. Singh's organs were all OK, and his garments were discovered to be undamaged. An internal investigation into Singh's murder found that at night, he was isolated from his cellmates by an iron grill door. A postmortem examination found evidence of hanging, including as hypoxia and bluishness in the hand and legs.

However, prison authorities are responsible for ensuring the safety and well-being of inmates, and they can be held accountable if custodial suicides or murders occur due to negligence or failure to fulfill their duties. In the instant case, concerns were raised about the adequacy of supervision and measures to

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21 Nation Crime Records Bureau, Govt. of India, Gender wise unnatural deaths of prisoners in prisons during the year (2021), updated on 31/12/2021
prevent self-harm. The incident prompted scrutiny of the prison authorities' duty of care and whether they took sufficient preventive actions.\textsuperscript{22}

In another case, the custodial death of Rajan Pillai in Tihar Jail in 1995 led to allegations of negligence and lack of medical care by prison authorities. Pillai, an accused in a fraud case, died under mysterious circumstances, and questions were raised about the adequacy of medical facilities within the prison and the responsiveness of the authorities to his deteriorating health.\textsuperscript{23}

While judicial processes and judgements differ, the principles guiding prison administrators' obligation remain founded in their duty to safeguard inmates. Negligence, insufficient preventative measures, and inability to address recognized dangers may result in legal ramifications. The changing legal environment and increased emphasis on human rights emphasize the importance of open investigations and accountability when custodial fatalities occur in Indian jails. Section 30 of the Prisons Act, 1894,\textsuperscript{24} empowers the state government to make rules for the classification, treatment, and discipline of prisoners. Any failure on the part of prison authorities to adhere to these rules could be considered a breach of their responsibilities. The NHRC has issued guidelines on the prevention of custodial deaths and suicides. While these guidelines are not legally binding, they serve as a reference for best practices and expectations. Guideline 8 emphasizes that the prison administration is responsible for the safety of prisoners, including preventing custodial suicides. Failure to take preventive measures may attract legal consequences.\textsuperscript{25}

In the case of Sunil Batra v. Delhi Administration (1978), the Supreme Court held that prisoners are entitled to fundamental rights, and it is the duty of the prison administration to ensure their safety and security. This case highlighted the duty of care owed by prison authorities to inmates and the consequences of negligence.\textsuperscript{26}

It is safe to say that the social dynamic of a prison is an interesting notion. There can be two ways of viewing the dynamics of a prison – the ‘keeper’ and the ‘kept’. The ‘keeper’, that is, the prison staff has a basic role within the fabrics of the social dynamic within the prison, to keep the ‘kept’, that are, the inmates to toe the line and abide by the norms, rules and other guidelines. Beyond this simplistic paradigm, the relationship between the ‘keeper’ and ‘kept’ can be extended to a vast array of social climates.\textsuperscript{27} Apart from being administrators of prison rules and guidelines, the prison administration is also responsible for maintaining the prison environment which is inclusive of adequate living conditions for inmates, proper rehabilitation infrastructure, ensure the availability of medical facilities (hospital) as per section 39 of the Indian Prisons Act, 1894,\textsuperscript{28} ensuring the resolve of any interpersonal conflict among inmates, etc.

The reality is far from the aforesaid idealistic scenario. In reality, the prison staff has been involved in a fair share of corruption and commission of offences against inmates. In the year 2021, 29 prison staff members across India were involved in committing crimes against prisoners. However, only 2 members


\textsuperscript{24} S. 30, Prisons Act, 1894

\textsuperscript{25} Guideline 8, prevention of custodial deaths and suicides.

\textsuperscript{26} Sunil Batra v. Delhi Administration (1978), (1978) 4 SCC 40

\textsuperscript{27} Applied social psychology: understanding and addressing social and practical problems, page -312, Jamie A. Gruman, Frank W. Schneider and Larry M. Coutts – 3rd edition.

\textsuperscript{28} S. 39, Indian Prisons act, 1894
of prison staff were ever arrested and 0 said members faced conviction. Aforesaid crimes involve assault, torture, criminal intimidation and rape.\textsuperscript{29} Admittedly, the percentage or probability of commission of said crimes by prison staff is quite low however, the said cannot be neglected especially when it is evident by the statistics that there were next to no consequence of those arbitrary acts.

It is evident that arbitrary acts by prison staff members is a realistic possibility. As per statistics mentioned above, it seems that the occurrence of these arbitrary acts is quite low however, it should be noted that more often than not crimes and offences within prison walls go unreported because of the limited opportunity of inmates facing said offences, to report the same.

To sum it up, the possibility of suffering and death (unnatural) caused to inmates due to negligence of prison staff, incompetence of the prison system to manage issues arising from overcrowding, etc., is moderate at best. However, ideally it should be nil.

During the year 2019 to 2021, a total of 5059 natural deaths had occurred in prisons across India and most of such deaths had occurred due to illness rather than aging.\textsuperscript{30} In the year 2020, a considerable number of inmates had to be moved to hospitals to get treatment during the Covid-19 pandemic. The number stands at approximately 3,62,923\textsuperscript{31} and to put the figure in context, the total inmate population of the country during that time stood at 4,88,511.\textsuperscript{32} Therefore 74.29\% of the inmates had to treated outside the prison walls as the medical facilities within the prison was not enough. This shows two issues here – firstly, susceptibility of prisoners and prison staff to communicable diseases because of lack of interpersonal space due to overcrowding, and secondly, the lack of medical infrastructure to deal with such major diseases.

D. Healthcare and infrastructure
As per rule 24 of the ‘Nelson Mandela standard minimum rules for the treatment of prisoners’ states that the provision for healthcare is the responsibility of the state and all prisoners shall enjoy the same standard of healthcare infrastructure as any other citizen of this country.\textsuperscript{33} The world health organization defines health as physical, social and mental well-being and not merely the absence of any disease or infirmity. Health has many determinants inclusive of social and physical environment of a particular individual.\textsuperscript{34} The physical, mental and social state of an individual are connected to each other and hence, one deficiency may lead to another. For example, lack of social interaction may lead to mental issues like depression.\textsuperscript{35} Similarly, lack of interpersonal space due to overcrowding in prisons, which is a social factor prima facie, may lead to mental issues and can eventually give rise to physical problems as well.

\textsuperscript{29} Nation Crime Records Bureau, Govt. of India, Crimes committed by prison staff against prisoners during the year (2021), updated on 31/12/2021
\textsuperscript{30} Nation Crime Records Bureau, Govt. of India, Gender wise natural deaths of prisoners in prisons during the year (2021), updated on 31/12/2021
\textsuperscript{31} Goswami, A. K., & Gautam, R. (2022). Medical health condition of prisoners and discrepancy in facilities among the states of Uttar Pradesh, Haryana and Delhi. International Journal of Health Sciences, 6(S6), 8364–8373.
\textsuperscript{32} Nation Crime Records Bureau, Govt. of India, Prison occupancy during the year (2020), updated on 31/12/2021.
E. Healthcare and infrastructure
The environment of the prison also has a big impact on how inmates act. Conditions that are physically unsatisfactory, extremely controlling regimes, or, on the other hand, situations where regulations are applied inconsistently or ignored, or where inmates do not view staff decisions as just or lawful, can all increase tensions and cause stress, which may lead to conflict and assault.

E. a. The Psychological Effects of Imprisonment
Prison life is stressful and fraught with health risk: Overcrowding, family deprivation, fear of the unknown, the emotionally charged environment of mistrust, and isolation are some of the major factors linked to the health of prisoners during their incarceration. According to a synthesis of empirical research, imprisonment is typically associated with elevated stress, anxiety, depression, low self-esteem, and loneliness. 'Deprivation models' and 'importation models' are two of the early primary theories on the psychological effects of imprisonment. According to the former, maladaptation and distress are primarily caused by the condition of being deprived of liberty, autonomy, and security, and are therefore attributed to the "pains of imprisonment". Conversely, more recent models contend that mental illness is brought into the prison setting by an inmate's past.

The drawback of "deprivation models" is that they fail to adequately account for individual variations in how prisoners react to imprisonment, such as their resilience, adaptability, and coping tendencies.

The psychological obstacles that the majority of prisoners face in order to survive the traumatic prison experience were detailed by Haney. These obstacles included emotional distress such as over-control, mistrust, suspicion, alienation, and PTSD symptoms, interpersonal difficulties such as social withdrawal, isolation, and low self-esteem, prison cultural acceptance, and new rules of conduct.36

E. b. Psychopathic personality traits
A group of characteristics known as impulsivity, narcissism, decreased emotional competence, manipulativeness, heartlessness, interpersonal appeal, and irresponsibility are collectively referred to as psychopathy. Recidivism, proactive and/or reactive violence and a broad range of antisocial or criminal behaviours are closely associated with psychopathy.

High levels of sub-clinical narcissism and low levels of neuroticism, which strongly characterize psychopathy, respectively, are characteristics of subjective well-being. Durand recently discovered that psychopathic fearless dominance was positively correlated with higher happiness-related features, but the impulsive anti-social trait of psychopathy was negatively correlated.

E. c. Impact on neurological functioning
According to several studies, antisocial behaviour is linked to impaired emotion regulation. Aggressive behaviour is thought to stem from both over- and under-regulation of emotions. According to Robinson et al., people who over-regulate may have decreased inhibitions against aggression and increased negative affect and physiological arousal, while people who under-regulate may act out in an attempt to stop, heal, or avoid uncomfortable emotional states. It is maladaptive to be unable to control and adjust one's reactions, and this will probably have detrimental short- and long-term effects.

The link between brain function abnormality and aggression may be explained by altered cognitive capacities. Impaired Executive Cognitive Functions (ECF) may compromise the ability to

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interpret social cues during interpersonal interactions, which may lead to misperceptions of threat or hostility. As a result, difficulties arise in generating socially adaptive behaviours and executing responses to avoid aggressive or stressful interactions. Also, compromised cognitive control over behaviour may permit hostility, negative affective states, and other maladaptive responses to dominate.\(^{37}\)

Inactive lifestyle choices, poor eating habits, smoking, and depression may raise a prisoner's risk of dementia. The number of people imprisoned increases with population growth and age, but there are numerous environmental, mental, and physical factors that contribute to the risk of dementia and cognitive decline in prisoners.

The obvious lifestyle choices like smoking, poor diet, inactivity, and a lack of social interaction are among these risks. The high rates of dementia among prisoners may also be attributed to conditions like depression, traumatic brain injury (TBI), and attention deficit hyperactivity disorder (ADHD).

Prisoners, particularly the elderly population, are more likely to develop dementia due to factors such as overcrowding, violence and victimization, social deprivation, inadequate access to adequate nutrition, and a lack of physical and mental activities. The longer they are imprisoned in these hazardous environments, the greater the risk.\(^{38}\)

Therefore, it can be said that, Prisoners who are overcrowded frequently experience elevated stress levels. Prolonged stress can affect the body's cortisol levels, which can result in elevated blood pressure, weakened immunity, and irregular sleep patterns. Tense circumstances among prisoners can increase hostilities, which raises the risk of aggressiveness and violence. This environment can set off the body's fight-or-flight reaction, increasing cortisol and adrenaline levels. Over time, this can have a detrimental effect on physical health. Anxiety, depression, and post-traumatic stress disorder (PTSD) are among the mental health conditions that are made worse by overcrowding. These illnesses may show up physically, affecting one's ability to eat, sleep, and general physical health. For those imprisoned in overcrowded facilities, the combined effects of stress, restricted access to medical care, and elevated risk of illness may have long-term health effects. A compromised immune system, increased vulnerability to chronic illnesses, and a reduced life expectancy are possible outcomes.

Section 31(2) of the Mental Health Act of 2017\(^{39}\) states that all medical officers in prison or jail, to provide basic and emergency mental healthcare. Apart from this section 103(6) of the Mental Health Act of 2017\(^{40}\) makes it mandatory for states within India to establish a mental health establishment in the medical wing of at least one prison in the state. Despite such legislative provisions, mental health within prison has been a serious issue. In the year 2021, total 9,180 inmates were diagnosed with mental health issues or mental illness.\(^{41}\) Overcrowding is perhaps an issue at a macro level about which the prison administrative system cannot really do much. However, prison reforms are indeed within the control of the said system. Recreational activities are important and keep away mental health issues. This can be backed up by the fact that lack of recreational infrastructure lead towards higher mental health issue rates. For example, Uttar Pradesh is the state with the highest number of inmates with mental health


\(^{39}\) S. 31(2), Mental Health Act, 2017

\(^{40}\) S. 103(6), Mental Health Act, 2017

\(^{41}\) Nation Crime Records Bureau, Govt. of India, Gender wise inmates suffering from mental illness during the year (2021), updated on 31/12/2021.
issues (1,792)\textsuperscript{42} and Uttar Pradesh is also the state wherein no recreational activities or infrastructure were provided to the inmates.

\section*{F. Conclusion}

In India, prisons are critical for societal sanctions such as rehabilitation and deterrence. Overcrowding, on the other hand, has resulted in difficulties such as inmate health issues, misbehaviour, and post-release recidivism. Overcrowding raises the risk of psychological stress, mental and physical sickness, and interpersonal communication problems, which can lead to conflict and aggressiveness. The Stockholm Declaration and international agreements on civil and cultural rights emphasise the necessity of providing convicts with a secure environment. Every two days, an unnatural death occurs in a jail, including suicides, murders, accidents, and "death due to negligence by prison staff." Cases such as Ram Singh's and Rajan Pillai's have raised questions regarding the effectiveness of oversight and preventive measures. Prison officials are responsible for guaranteeing inmates' safety and well-being and can be held liable if custodial suicides or murders occur due to negligence or failure to fulfill their duties. With just 2 arrests and 0 convictions in 2021, India's jail system has been implicated in corruption and committing crimes against inmates. The risk of pain and death as a result of carelessness and incompetence is moderate at best. During the 2019-2021 pandemic, 5059 natural fatalities occurred in Indian jails, the majority of which were caused by sickness rather than ageing. Because of insufficient medical facilities, 74.29\% of detainees had to be treated outside the prison gates. Overcrowding, familial deprivation, dread of the unknown, and isolation are key components in prison life, which is stressful and hazardous to one's health. Psychopathy is connected with impulsivity, narcissism, low emotional competence, manipulativeness, heartlessness, interpersonal appeal, and irresponsibility. Aggression and dementia are exacerbated by weak emotion management and cognitive abilities. Overcrowding in prisons increases the risk of dementia, anxiety, depression, and PTSD among inmates, leading to weakened immunity, irregular sleep patterns, and increased vulnerability to chronic illnesses. Despite the Mental Health Act of 2017, prisons still face mental health issues, with overcrowding being a significant issue.

\textsuperscript{42} Nation Crime Records Bureau, Govt. of India, Recreational facilities provided in jails during the year (2021), updated on 31/12/2021.