

## **BEHIND BARS, BEYOND HEALTH: REIMAGINING PRISON HEALTHCARE IN A POST-PANDEMIC INDIA**

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### **1.1 INTRODUCTION**

Prisons are disease-prone areas for outbreaks of disease because of overcrowding, unhygienic conditions, and lack of proper healthcare facilities. The COVID-19 pandemic added to these issues, and prisons became a priority area for public health policy. Prisoners, who were already susceptible to infectious diseases, were at increased risk of infection, while prison officials had to juggle containment efforts with human rights concerns. This Article analyzes the health condition in prisons during the COVID-19 pandemic, including the effects of the virus, mitigation measures, and policy reactions. It investigates existing health conditions in prisons, the efficacy of interventions like lockdowns, testing, and vaccination, and the psychological impacts on prisoners. By mapping systemic healthcare gaps and outlining policy suggestions, this Article hopes to make an input into the wider discussion of prison health reforms post-pandemic.

### **1.2 BACKGROUND**

Even prior to the COVID-19 pandemic, prisons across the globe were already grappling with serious health issues because of unsanitary living conditions, poor medical attention, and rampant communicable diseases. The overcrowded prison settings, poor sanitation, and poor access to healthcare created a vulnerable population of prisoners who were exposed to physical and mental health problems. These systemic issues not only impacted prisoners but also represented a public health concern since infections could easily spread outside prison walls.

Perhaps the most critical issue in prisons is overcrowding. Most prisons work way beyond capacity, and the prisoners are congested in a small, filthy area with improper ventilation. All this helps develop diseases quickly in the prisoners' bodies, ranging from respiratory disease to tuberculosis, and skin problems. Overcrowding also intensifies stress levels, violence, and mental ailments, thus exacerbating the hindrance of rehabilitation.<sup>1</sup> Healthcare in prisons tends to be substandard, with few medical professionals, shortages of basic medicines, and delayed treatment. Preventive medicine actions, including vaccination and routine examinations, are never

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<sup>1</sup> Stéphanie Baggio et al., *Do Overcrowding and Turnover Cause Violence in Prison?*, NATIONAL LIBRARY OF MEDICINE, PMC6992601 (2020). <https://pmc.ncbi.nlm.nih.gov/articles/PMC6992601/>.

given due attention. Most prisoners arrive at the prison with already existing complications like diabetes, hypertension, or drug abuse disorders, which tend to become worse because of neglect and poor treatment.<sup>2</sup> Mental illnesses are also a serious concern in prisons. Imprisonment brings about excessive stress, anxiety, and depression with added factors of isolation, violence, and social disconnection. Most inmates have untreatable psychiatric diseases, and suicide in prisons is much higher compared to the general population. There is also a lack of mental health professionals and rehabilitation programs that further contribute to this crisis.<sup>3</sup>

Furthermore, prisons have traditionally been breeding grounds for infectious diseases like tuberculosis, hepatitis, and HIV/AIDS. The crowded living conditions, poor sanitation, and absence of proper medical screening facilitate frequent outbreaks. Prisoners who become infected with these diseases are usually given inferior treatment, which raises mortality rates and the potential for transmission within and outside prison walls.<sup>4</sup>

### 1.3 THE COVID-19 CRISIS IN INDIAN PRISONS: CHALLENGES AND RESPONSES

The COVID-19 pandemic exposed the severe vulnerabilities of Indian prisons, where overcrowding and inadequate sanitation created an environment conducive to the rapid spread of the virus. Social distancing, a critical preventive measure, was nearly impossible to implement, given that many prisons had far more inmates than their designed capacity. In spite of efforts to decongest prisons via interim bail and emergency parole for non-violent prisoners, the virus kept spreading at a fast rate among both prisoners and prison officials. The absence of access to personal protective gear, ventilation, and sanitation further aggravated the situation, resulting in a sharp increase in infections and death rates. The prison facilities were not well-placed to respond to such a crisis, and this was compounded by a public healthcare system that was overwhelmed and could not serve the general population.<sup>5</sup>

In response to the pandemic, Indian prison authorities put in place various measures to reduce the impact of the virus. These included limiting the movement of prisoners, quarantining infected persons, and carrying out

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<sup>2</sup> Zulficar Gregory Restum, *Public Health Implications of Substandard Correctional Health Care*, NATIONAL LIBRARY OF MEDICINE, PMC1497368 (2005), <https://pmc.ncbi.nlm.nih.gov/articles/PMC1497368/>.

<sup>3</sup> C. Burke-Smith, *Incarceration During the COVID-19 Pandemic: A Potential Mental Health Crisis*, Am. Med. Student Ass'n (n.d.), <https://www.amsa.org/>.

<sup>4</sup> Alex Gatherer, Lars Moller & Paul Hayton, *The World Health Organization European Health in Prisons Project After 10 Years: Persistent Barriers and Achievements*, NATIONAL LIBRARY OF MEDICINE, PMC1449422 (2005), <https://pmc.ncbi.nlm.nih.gov/articles/PMC1449422/>.

<sup>5</sup> Mahaseth, H., Shalika, & Ambasth, A. (2023). The State of Prisons in India During Covid-19: The Impact on Incarcerated Persons. *International Journal of Conflict and Violence*, 17. <https://doi.org/10.11576/ijcv-6653>.

frequent health checks. A few states launched innovative measures, including the production of face masks in prisons and the use of video conferencing for court hearings to reduce external contacts.

Yet, even with these measures, structural problems like overcrowding and weak healthcare infrastructure curtailed the impact of these interventions. Most prisons did not have access to adequate testing kits and vaccination drives were slow in reaching prisoners, resulting in late detection and treatment of COVID-19 cases. Moreover, suspension of in-person family visits, which was done to contain the virus, also further isolated prisoners and increased tensions within prisons, usually resulting in unrest and a rise in disciplinary incidents. The pandemic had a drastic effect on the physical well-being of prisoners, not only by causing COVID-19 infections but also by halting regular medical care. Most prisoners had pre-existing medical conditions like tuberculosis, respiratory disease, and starvation, which increased their susceptibility to serious COVID-19 complications.<sup>6</sup>

Since prison health facilities were already substandard prior to the pandemic, the added burden further reduced the quality of medical care received. There was a remarkable surge in deaths reported as resulting from unspecified illnesses, presumably due to unattended or undiagnosed cases of COVID-19. Inmates had poor access to physicians, delays in getting admitted to the hospital, and shortages of life-saving medicines. Overcrowding and unsanitary conditions further expedited the transmission of other diseases, which made the health situation worse overall. Aside from physical health, the pandemic affected the mental state of prisoners drastically. The extended isolation, infection phobia, and isolation from society triggered increased stress, anxiety, and depression in prisoners.<sup>7</sup>

Most prisoners felt acutely distressed psychologically due to uncertainty surrounding their criminal proceedings, postponed trials, and disruption of rehabilitation courses. Incidents of self-harm and suicide have reportedly increased among prison populations, reflecting the toll on mental health taken by the pandemic. The inability to converse with members of their family personally also worsened feelings of isolation and desperation among vulnerable classes such as juvenile, aged offenders, and females who were predominantly

<sup>6</sup> Ministry of Home Affairs, Government of India, *Management of COVID-19 in Indian Prisons* (July 7, 2020), available at [https://www.mha.gov.in/sites/default/files/2022-12/ManagementofCovid\\_07072020%5B1%5D.pdf](https://www.mha.gov.in/sites/default/files/2022-12/ManagementofCovid_07072020%5B1%5D.pdf).

<sup>7</sup> Kumar, Piyush and Kumar, Piyush and Anupama, Advocate, *The COVID-19 Pandemic Era Impact on the Incidence of the Custodial Death, Due to Illness in 36 States and Union Territories of India - A Comparison Study (2017–2022)* (February 24, 2024). Available at SSRN: <https://ssrn.com/abstract=4737496> or <http://dx.doi.org/10.2139/ssrn.4737496>

single caregivers outside prison. The COVID-19 pandemic put into sharp relief the long-standing inadequacies in India's prison system and underscored the need for immediate reform.<sup>8</sup>

The inability to contain outbreaks effectively highlighted systemic failures like poor healthcare infrastructure, the absence of an effective crisis response plan, and the imperative for alternative models of sentencing to decongest prisons. The pandemic highlighted that prisons cannot be seen as mere punitive centres but as areas that need serious investment in healthcare, hygiene, and mental health care. Upgrading medical facilities in prisons, adopting sustainable decongestion strategies, and providing access to timely medical care are essential measures towards avoiding such public health emergencies in the future.

#### 1.4 POLICY RECOMENDANTIONS AND THE WAY FORWARD

The pandemic of COVID-19 underscored the pressing necessity for prison health reforms in India. Attempts were made to decongest the prisons and create isolation wards, but they fell short due to systemic flaws like overcrowding and a lack of healthcare infrastructure. In the future, reforms should aim to increase medical facilities, sanitation, and guaranteed access to quality healthcare. Improving prison health is crucial to the protection of the right to life under Article 21 of the Constitution, which includes the right to healthcare for everyone, including prisoners. Improvement in prison healthcare involves a multifaceted strategy since Indian prisons are plagued by lack of resources, shortage of medical staff, and ethical issues about the treatment of prisoners.<sup>9</sup>

Policy and legal frameworks should be strengthened to enhance infrastructure and effective delivery of healthcare services. Mental health care also needs to be incorporated as part of comprehensive prison reforms since prisoners are mostly exposed to critical mental health issues due to isolation and unsatisfactory conditions. Judicial oversight and legal aid institutions need to be strengthened to safeguard prisoners' rights and prevent abuse. Prison health is inextricably related to public health since released inmates go back into society with the potential to spread communicable diseases. It is therefore critical to integrate prison health into national health strategies to avert outbreaks and maintain community health. This involves creating linkages between prison health facilities and primary healthcare systems for continuity of care.

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<sup>8</sup> Ministry of Home Affairs, Government of India, *Advisory on Mental Health Issues of Prisoners and Prison Staff During the COVID-19 Pandemic* (June 24, 2021), available at [https://www.mha.gov.in/sites/default/files/2022-09/Advisorymentalhealthissuesprisoners\\_24062021\\_0%5B1%5D.pdf](https://www.mha.gov.in/sites/default/files/2022-09/Advisorymentalhealthissuesprisoners_24062021_0%5B1%5D.pdf).

<sup>9</sup> Supra.

Preparation for future pandemics in prisons needs to focus on decongestion, better ventilation, and better healthcare infrastructure. Adopting technology-enabled solutions like telemedicine services and AI-enabled monitoring can assist in streamlining the delivery of healthcare. Also, instituting effective infection control protocols, routine health screening, and access to emergency medical services are critical measures to prevent future catastrophes. By addressing these structural deficits, prison healthcare systems can be reformed to address both the interests of inmates as well as public health.

## 1.5 CONCLUSION

The COVID-19 pandemic laid left a glaring weaknesses in India's prison healthcare system, highlighting the need for reforms. Temporary solutions like decongestion drives and isolation facilities were attempted, but these did not solve systemic problems like overcrowding, poor medical infrastructure, and neglect of mental health. Strengthening legal and ethical frameworks, enhancing judicial oversight, and mental health support are essential measures to ensure prisoners' basic rights under Article 21 of the Constitution. Moreover, using technology, including telemedicine and AI-based monitoring, can enhance healthcare access and crisis management in prisons. Future pandemic readiness needs to emphasize structural reforms, infection control measures, and long-term policy commitments. By overcoming these challenges, India can create a more humane and resilient prison healthcare system that is consistent with public health and human rights standards.