ABSTRACT

It has been known that psychiatric disorders are highly prevalent among prisoners. Many people with identifiable psychiatric illness do conflict with the law, often by no fault of their own but because of symptoms of their psychiatric illness and end up in jails. Poor communication between the prison, court, and hospital systems hinders the assessment and management of the mentally disordered offender, and medical intervention can actually delay release from custody. In conclusion Prisons are detrimental to mental-health, and the standards of psychiatric care are significantly lower than those for the general public. Certain remedial measures are to be implemented for a better future of prison and community because ultimately these prisoners will be released from prison and become a part of community. Beginning of reforms is the immediate need as a long journey ahead.

INTRODUCTION

Mental Health and Prison

Mental disorders occur at high rates in all countries of the world. An estimated 450 million people worldwide suffer from mental or behavioural disorders (World Health Report, 2001). These disorders are especially prevalent in prison populations (Brinded, 2001; Brugha, 2005; Holley, Arboleda, & Love, 1995). The disproportionately high rate of mental disorders in prisons is related to several factors: the widespread misconception that all people with mental disorders are a danger to the public; the general intolerance of many societies to difficult or disturbing behavior, the failure to promote treatment, care and rehabilitation, and above all, the lack of, or poor access to, mental health services in many countries. Many of these disorders may be present before admission to prison, and may be further exacerbated by
the stress of imprisonment. However, mental disorders may also develop during imprisonment itself as a consequence of prevailing conditions and also possibly due to torture or other human rights violations. Prisons are bad for mental health. There are factors in many prisons that have negative effects on mental health, including: overcrowding, various forms of violence, enforced solitude or conversely, lack of privacy, lack of meaningful activity, isolation from social networks, insecurity about future prospects (work, relationships etc), and inadequate health services, especially mental health services, in prisons. The increased risk of suicide in prisons (often related to depression) is, unfortunately, one common manifestation of the cumulative effects of these factors. Prisons are sometimes used as dumping grounds for people with mental disorders. In some countries, people with severe mental disorders are inappropriately locked up in prisons simply because of the lack of mental health services. People with substance abuse disorders or people who, at least in part due to a mental disorder, have committed minor offences are often sent to prison rather than treated for their disorder. These disorders therefore continue to go unnoticed, undiagnosed and untreated.

It has been known that psychiatric disorders are highly prevalent among prisoners (Coid, 1984). Many people with identifiable psychiatric illness do conflict with the law, often by no fault of their own but because of symptoms of their psychiatric illness and end up in jails. Such symptoms include impaired judgment, lack of impulse control, suspiciousness, disinhibition, paranoia, inability to trust others, delusions and hallucinations. It is quite likely that act of incarceration may well exacerbate underlying psychiatric conditions. The effect of such incarceration may well be so severe as to precipitate mental abnormality in vulnerable individuals (Coid, 1984). Different levels of stress during incarceration give rise to different incidence of psychiatric morbidity among remand prisoners (Anderson et al., 2000).

PRISONS AND PRISONER STATISTICS IN WORLD

More than 10.1 million people are held in penal institutions throughout the world, mostly as pre-trial detainees/remand prisoners or as sentenced prisoners. Almost half of these are in the United States (2.29m), Russia (0.81m) or China (1.65m sentenced prisoners). In addition, more than 650,000 are in ‘detention centres’ in China; if these are included the overall Chinese total is over 2.3 million and the world total more than 10.75 million. The United States has the highest prison population rate in the world, 743 per 100,000 of the national population, followed by Rwanda (c. 595), Russia (568), Georgia (547), U.S. Virgin Is. (539), Seychelles (507), St Kitts & Nevis (495), British Virgin Is. (468), Belize (439), Dominica (431), Bermuda (428), Grenada (423) and Curacao (422). However, more than half the countries and territories (54%) have rates below 150 per 100,000. The world population at mid-2010 was estimated at 6.9 billion (United Nations); if set against the world prison population of 10.1 million this would produce a world prison population rate of 146 per 100,000 (156 per 100,000 if set against a world prison population of 10.75 million).

Prison population rates vary considerably between different regions of the world, and between different parts of the same continent, for example:

1. In Africa the median rate for western African countries is 47.5 whereas for southern African countries it is 219.
2. In the Americas the median rate for South American countries is 175 whereas for Caribbean countries it is 357.5.