



Commonwealth Human Rights Initiative

PRESS STATEMENT

National Consultation: MP Prisons and Correctional Services, and CHRI get together prison administrators from 15 states to share learnings, challenges during pandemic.

New Delhi, June 23, 2020 – Madhya Pradesh Prisons and Correctional Services and Commonwealth Human Rights Initiative (CHRI) on Saturday jointly organised the *National Consultation on Prisons: Ensuring an Effective Response to COVID-19*. The virtual gathering of prison administrators witnessed engaging discussions on learnings involved in implementing precautionary measures in prisons and challenges in tackling the spread of the infection.

Fifteen states participated in the virtual consultation, namely: Andhra Pradesh, Bihar, Chhattisgarh, Chandigarh, Delhi, Gujarat, Haryana, Jharkhand, Madhya Pradesh, Odisha, Punjab, Rajasthan, Tamil Nadu, Uttar Pradesh, West Bengal. Prison officials from across the country shared their experiences of responding to the pandemic from inside the prisons with various stakeholders like state government, district legal services authority, medical professionals etc.

Sanjoy Hazarika, International Director of CHRI, delivered introductory remarks at the start of the national consultation where he reminded all attendees of the unprecedented and difficult times facing all humanity today. “Mutual respect, trust, accountability, and proper dissemination of information can help tide over these challenging circumstances,” he said.

The first session was based on the ‘Healthcare Response’ where Dr Lokendra Dave, an eminent pulmonologist based in Bhopal, and Dr Gagan Shrivastava from Fortis Hospital in Delhi highlighted challenges and solutions to the pandemic in prisons.

Dr Dave proposed that in order to control the infectious spread in prisons: a daily record of prisoner health should be maintained, CBNAAT (Cartridge Based Nucleic Acid Amplification Test) laboratory facilities should be installed within the prison premises to ensure fast testing, pool sampling testing should be applied, a high protein and Vitamin C and D diet should be provided, co-morbidity analysis should be undertaken, among others things like physical distancing, wearing of masks and washing of hands. Dr Shrivastava stressed on the importance of creating awareness amongst the prisoners about the virus, the mental health of prisoners, and the need to ensure communication with family members and lawyers via alternative means.

The second session on ‘Responses and Challenges faced by Prison Authorities’ witnessed sharing of measures undertaken within prisons by Shri Sandeep Goel (Director General of Prisons, Delhi), Dr KLN Rao (Additional Director General of Prisons, Gujarat), Shri Pravin Kumar Sinha (Additional Director General of Prisons, Punjab) and Shri Sanjay Chaudhary (Director General of Prisons, Madhya Pradesh).

Shri Sandeep Goel stated that Tihar Jail had reduced its occupancy rate from 174% to 136%. Quite notably, Punjab prisons, where 45 per cent of the inmates are associated with narcotics and thus live with compromised immunities, have released over 10,000 prisoners and decongested jails, as well as emptied 4 jails to be used as quarantine centres, Sinha said. Although the main tactic used by Punjab prisons has been to “Chase the Virus,” Sinha wondered, if mass testing was the best way forward in the times ahead.



Commonwealth Human Rights Initiative

DGP Madhya Pradesh advised Punjab prison authorities to employ “Statistical Quality Control, and go for selective testing and random sampling, instead of mass testing.” Prisons in Madhya Pradesh, Chaudhary continued, were following strict 24-hour cleaning and hygiene routines, besides following a three tier classification system for the symptoms of COVID-19, (i) Cough, (ii) Cough and fever, (iii) Cough, fever and breathlessness. The inmates who fell under the third category were sent to the isolation centres as suspected cases.

The third and final session ‘Voices from the States’ saw prison authorities from Bihar, Uttar Pradesh, Andhra Pradesh, Haryana, West Bengal, Tamil Nadu, Odisha, Jharkhand share the early preventive steps taken by state governments. Where the Bihar government decided not to release prisoners on bail, the prisons converted 11 sub-jails into ‘entry jails’ for taking in new admissions for a minimum period of 14 days, prisons administrators said. Dr Himanshu of Haryana raised the issue of mental health, and suicidal tendencies in the inmates, and outlined the strategy employed by the Haryana Prisons of gaining their trust during such treacherous times.

Besides sharing these practices and experiences, Dr Rao informed all attendees that inmates in Gujarat prisons have manufactured 2 lakh masks and several hundreds of PPE kits, along with soaps and sanitizers, while Dr Sharad (Inspector General of Prisons, Uttar Pradesh) shared that inmates produced 16 lakh masks, and 2,122 PPE kits in the states. Shri Arindam Sarkar (Director, Regional Institute of Correctional Administration, Dum Dum) also shared about the preparation of masks for staff and prisoners in West Bengal Prisons.

To watch the full recorded virtual national consultation on YouTube, click [here](#).

For more information, please contact:

Sanjoy Hazarika, International Director, CHRI

Email: sanjoyha@gmail.com, sanjoy@humanrightsinitiative.org

Madhurima Dhanuka, Programme Head, Prisons Reform

Email: madhurima@humanrightsinitiative.org

humanrightsinitiative.org | [Facebook](#) | [Twitter](#) | [YouTube](#)