

Periods in Prisons

**Short Report on Menstrual Hygiene Management
in India's Women Prisons**



CHRI
Commonwealth Human Rights Initiative
working for the *practical* realisation of human rights in
the countries of the Commonwealth

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The Commonwealth Human Rights Initiative (CHRI) is an independent, non-government, non-profit organisation with offices in New Delhi, India, London, United Kingdom, and Accra, Ghana.

Although the Commonwealth is an association of 54 countries with shared traditions, institutions and experiences, there was little specific focus on human rights issues when founded. So, in 1987, several Commonwealth professional associations set up CHRI to promote adherence to the Universal Declaration of Human Rights, the Commonwealth Harare Principles and other internationally recognised human rights instruments, as well as domestic instruments supporting human rights.

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KEY TERMS AND ABBREVIATIONS

Menstrual Hygiene Management (MHM) refers to the ability of women and girls to manage their menstrual cycle safely, with dignity. WHO and UNICEF Joint Monitoring Programme for drinking water, sanitation, and hygiene state that MHM means that “Women and adolescent girls are using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose off used menstrual management materials. They understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort or fear.”¹ For the purposes of this report, we stick to the rudimentary definition of MHM, and a larger inclusive framework for work in this space is entrenched in a newer definition of Menstrual Health²

Water, Sanitation, and Hygiene are interlinked public health issues and therefore grouped together as a collective term (**WASH**). Affordable and sustainable access to WASH worldwide is one of the United Nations Sustainable Development Goals. The concept of WASH includes safe water use, education around sanitation and hygiene practices, and access to toilets and other sanitation facilities. Where WASH practices are not taken seriously, diseases can spread easily, leading to deaths of thousands of children and adults every year. WASH is integral to MHM, not only because it prevents or reduces incidence of disease, but upholds human dignity.

Model Prison Manual 2016 (MPM) is a comprehensive set of model rules issued by the Ministry of Home Affairs, Government of India to encourage “basic uniformity in laws, rules and regulations governing the administration of prisons and the management of prisoners all over the country.”³ Although only state prison rules are binding, many states incorporate suggested rules from the MPM into their own policies. The MPM released in 2016 is the one referenced in this report.⁴

Menarche means the onset of menstruation, the time when a girl has her first menstrual period.⁵

Menopause means the permanent cessation of menstruation resulting from loss of ovarian follicular activity.⁶

¹ P. 16, Consultation on *Draft Long List of Goal, Target and Indicator Options for Future Global Monitoring of Water, Sanitation, and Hygiene*: WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation, 2012, available at <https://washdata.org/sites/default/files/documents/reports/2017-06/JMP-2012-post2015-consultation.pdf> (last accessed 5 January 2022).

² Julie Hennegan, Inga T. Winkler, Chris Bobel, Danielle Keiser, Janie Hampton, Gerda Larsson, Venkatraman Chandra-Mouli, Marina Plesons & Thérèse Mahon (2021) Menstrual health: a definition for policy, practice, and research, *Sexual and Reproductive Health Matters*, 29:1, 31-38, available at <https://www.tandfonline.com/doi/full/10.1080/26410397.2021.1911618> (last accessed 25 January 2022).

³ Union Home Minister approves New Prison Manual 2016, available at <https://pib.gov.in/newsite/PrintRelease.aspx?relid=134687> (last accessed 1 October 2021).

⁴ Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 20 February 2022).

⁵ P. 17, *Guidance for monitoring menstrual health and hygiene (version 1)*, UNICEF, 2020, available at <https://washdata.org/sites/default/files/2020-11/UNICEF-2020-guidance-monitoring-MHH-v1.pdf> (last accessed on 27 May 2022)

⁶ Pg. 8, *Research on the Menopause: Report of a WHO Scientific Group*, 1981, available at https://apps.who.int/iris/bitstream/handle/10665/41526/WHO_TRS_670.pdf?sequence=1&isAllowed=y (last accessed on 27 May 2022)

I. INTRODUCTION

This exploratory study is conducted by the Commonwealth Human Rights Initiative (CHRI)⁷, in collaboration with Boondh⁸, to document the menstrual hygiene management (MHM) standards and practices in women prisons in the country. The aim of the study is to apprise the stakeholders (State Governments, heads of the Prison Departments, prison officers and civil society) of the present situation and assist them in ensuring basic minimum standards of MHM in women prisons in the country.

Women prisons are special prisons that exclusively confine female prisoners. These prisons are either designated as sub-divisional, district or central prisons depending on capacity and location. In December 2021, there were 22,918 women prisoners in India, comprising 4.13% of the prison population.⁹ Of these, 16.5% i.e. 3,808 prisoners are confined in 32 women jails, which are established in 15 states.¹⁰ The remaining women prisoners are confined in women enclosures, which are essentially areas demarcated inside male prisons.

The Prison Statistics India, 2021, reported that the majority of females are in the age-group 30-50 years (50.7%) or 18-30 years (29.4%).¹¹ This means that about 80% of women in prisons are those who menstruate and in the active stages of the menstruating life cycle (from menarche to menopause).

Despite the thousands of menstruating inmates in prisons and the classification of menstrual hygiene management as an “integral part” of the Swachh Bharat Mission¹², prisons and prison rules largely lack any discussion of ensuring that these prisoners have access to safe and hygienic menstrual cycles. Although menstruation is physiological, the management of menstrual health and hygiene depend strongly on the social, political, and

⁷ The Commonwealth Human Rights Initiative (CHRI) is an independent, non-profit, non-partisan, international non-governmental organisation working in the area of human rights, focussing on the themes of Access to Information and Access to Justice, which includes Prison Reforms and Police Reforms. Available at <https://www.humanrightsinitiative.org>.

⁸ Boondh is a social enterprise and non-profit that works on Menstrual Literacy, Policy, Advocacy, Programming, Activism and Sustainable Products. Boondh strives to work towards better gender, health and environmental outcomes, at the intersection of science and society, growing into an organization that can combine research and practicum on interdisciplinary aspects of Menstruation. - <http://www.boondh.co/index.php>.

⁹ Among women prisoners, 17,745 were undertrials constituting 77.4% and the remaining (21.8%) include 4,990 convicted women prisoners and small proportions of women detainees' and other women prisoners in the country. Prison Statistics India, 2021, Category-wise Female Inmates in Different Jails as on 31st December, 2021. Available at: <https://ncrb.gov.in/sites/default/files/PSI-2021/TABLE%202.16%20-%202021.pdf> (last accessed on 5 June 2022).

¹⁰ These States/UTs (Number of Jails) are – Rajasthan (7), Tamil Nadu (5), Kerala (3), Andhra Pradesh (2), Bihar (2), Gujarat (2), Delhi (2), Karnataka (1), Maharashtra (1), Mizoram (1), Odisha (1), Telangana (1), Uttar Pradesh (2), Punjab (1) and West Bengal (1) and the rest of 21 States/UTs have no separate Women Jail as on 31st December, 2021. Prison Statistics India, 2021, available at <https://ncrb.gov.in/sites/default/files/PSI-2021/Chapter%201%20-%202021.pdf> (last accessed on 5 June 2022).

¹¹ Prison Statistics of India, 2021, Indian & Foreign Female Inmates by Age group as on 31st December, 2021. Available at: <https://ncrb.gov.in/sites/default/files/PSI-2021/TABLE%202.19%20-%202021.pdf> (last accessed on 5 June 2022).

¹² P. 1, Menstrual Hygiene Management, National Guidelines, 2015, available at https://jalshakti-ddws.gov.in/sites/default/files/Menstrual%20Hygiene%20Management%20-%20Guidelines_0.pdf (last accessed on 2 February 2022).

economic circumstances surrounding the menstruator. In the case of prisons, these circumstances are completely controlled by prison rules and practices.

Although there are many reports and studies on the importance of MHM and Water Sanitation and Hygiene (WASH) standards in schools, the topic is severely under-researched in the context of prisons.¹³ This is significant as menstruating women in prisons face double stigmatization: stigma for being in prison, as well as the stigma surrounding menstruation. Societies themselves often label conversations around menstruation as taboo. In the context of detention, WASH is extremely important; as UN human rights experts have stated, “without it, detention conditions are inhumane, and contrary to the basic human dignity which underpins all human rights.”¹⁴

The All India Prisons Reform Committee (Mulla Committee) also acknowledged the need to outline WASH guidelines for prisons, recognising in 1983 that “bad standards of sanitation and hygiene have become part of prison culture” that needed to be improved by prison personnel using “proper use of available resources,” as WASH “is an important aspect of public health.”¹⁵

Even the National Guidelines on Menstrual Hygiene Management¹⁶ completely leave out MHM in prisons, although they address workplaces, schools, and Anganwadis where women are present. There is an urgent need to examine the reality of menstruating women within prisons and understand the gaps in existing rules, regulations and guidelines to ensure that they have access to safe and hygienic menstrual cycles.

In 2017, a study conducted by WaterAid found that diseases linked to dirty water and the lack of safe toilets are the fifth biggest global killers of women.¹⁷ Without access to clean water and soap, women inmates can expose themselves to dirty menstrual products or adopt harmful practices due to lack of knowledge and taboo surrounding MHM practices. Menstrual cycles already come with both physical and mental considerations; the isolation and stigma within prisons makes menstruating prisoners even more vulnerable.

“It should be the endeavour of administrations to ensure that fundamental rights of inmates are not violated,” wrote the National Human Rights Commission last year in relation to the right to sanitation and health in the context of prisons and prisoners.¹⁸

¹³ Water, Sanitation, and Hygiene and Menstrual Hygiene Management: A Resource Guide, 2015, available at <https://menstrualhygieneday.org/wp-content/uploads/2016/04/WASH-MHM-Resource-Guide-2015.pdf> (last accessed on 28 November 2021).

¹⁴ Ibid.

¹⁵ P. 74, Report of All India Committee on Jail Reforms (Mulla Committee), 1980-83, available at <https://www.mha.gov.in/MHA1/PrisonReforms/report.html> (last accessed 1 October 2021).

¹⁶ P. 1, Menstrual Hygiene Management, National Guidelines, 2015, available at https://jalshakti-ddws.gov.in/sites/default/files/Menstrual%20Hygiene%20Management%20-%20Guidelines_0.pdf (last accessed on 28 November 2022)

¹⁷ Fiona Callister, Dirty water and lack of safe toilets among top five killers of women worldwide, available at <https://www.wateraid.org/media/dirty-water-and-lack-of-safe-toilets-among-top-five-killers-of-women-worldwide> (last accessed 1 October 2021).

¹⁸ National Human Rights Commission, Impact of COVID-19 on Human Rights & Future Response: Advisory on the Rights of the Prisoners, 2020, available at <https://nhrc.nic.in/sites/default/files/Advisory%20on%20the%20Rights%20of%20Prisoners%20and%20Police%20Personnel.pdf> (last accessed 28 November 2021).

Because of the complete dependence of inmates on prison facilities and the prison administration to fulfil their rights, women prisons management officials around the country need to more closely examine their systems and procedures for ensuring that all women inmates can safely manage their menstrual cycles; thereby protecting and fulfilling their right to health, sanitation, and more broadly, life, dignity and health.

For several years, CHRI has worked on ensuring the practical realization of the rights of women prisoners. In its previous visits to women's prisons in Punjab and Karnataka, the need for improved MHM in prisons was highlighted during our interactions with both women prisoners and prison officers. It indicated that MHM is a neglected issue, with neither being aware of the standards for effective MHM. As a result, CHRI and Boondh compiled the observations along with measures to address various issues, into a document titled 'Recommendations on Ensuring Menstrual Hygiene in Prison,' which was published in May 2020.¹⁹ An awareness poster was also created on MHM for display inside women prisons and enclosures.²⁰

After a series of webinars and trainings conducted at various levels, across several states, CHRI realized that there was still a gap in information as to the exact conditions of water, sanitation, and health facilities in women's prisons as they relate to menstrual hygiene management practices. This resulted in the conceptualisation of the present study.

This study, a first of its kind, documents the MHM standards and practices in 11 women prisons in the country. The study seeks to apprise prison departments, state health departments, women and child development department, social welfare departments, state human rights commissions etc. the basic minimum standards of MHM and their roles in ensuring these standards in all women prisons and women prison enclosures across the country.

¹⁹ It looks at various parameters such as access to clean water and basic facilities, quality and quantity of sanitary pads made available to women prisoners, disposal mechanisms, and raising awareness among the prison staff and prisoners on issues of menstrual hygiene. Available at: <https://www.humanrightsinitiative.org/download/1590647964CHRI%20&%20BOONDH%20Recommendations%20on%20Ensuring%20Menstrual%20Hygiene%20in%20Prisons.pdf> (last accessed on 12 March 2022).

²⁰ See Annexure B on page 37. Also available at: <https://www.humanrightsinitiative.org/publication/menstrual-hygiene-you-in-English,Hindi,Punjabi,Marathi,Kannada-and-Tamil>.

II. RESEARCH METHODOLOGY

In order to document the existing standards and practices on MHM a set of questions were prepared and shared through email communication with the superintendents/officers in charge of women prisons across the country. For the purpose of this study, the status of MHM in women prisons is examined to understand whether there are adequate standards and infrastructure to ensure dignified menstrual experience for women in the prisons which are designed and meant to function as per the needs of women prisoners. The questionnaire sent to women prisons were divided into six sections, and covered the following aspects:

1. **Prison Population:** The sanctioned capacity of the prison vis-a-vis the current population.
2. **Testing of water quality:** Whether there is a policy for regular water quality testing in the prisons, how frequently bacteriological and chemical testing is done, and any interventions that had been taken based on the results of water tests. Prisons were also requested to share a copy of the latest testing reports.
3. **Provision of adequate water and infrastructure facilities:** Whether prisons measure water quantity, and how much water is allocated for each prisoner for WASH needs (including hot water). Prisons were also asked about the types of accommodations they make for disabled women prisoners' WASH needs, as well as the funds for the same.
4. **Procurement of menstrual products:** What is the type and quantity of menstrual products provided to prisoners, as well as the budget for the same. Prisons were requested to share any related circular/order/SOP for procurement of menstrual products, incinerators, including their standards of compliance
5. **Menstrual waste management:** How prisons manage disposal of menstrual products, as well as their access to funds for incinerators.
6. **Staff Training:** Whether regular training programmes have been organised to improve knowledge, attitude, and practices of prison staff and prisoners related to MHM, as well as the budget and trainer hiring process for such trainings.

Between June 2021 and September 2021, responses to the questionnaire were received from 11 women prisons in seven states:

1. Special Prison for Women, Kadapa, Andhra Pradesh
2. Special Prison for Women, Rajamundry, Andhra Pradesh
3. Women's Prison, Bhagalpur District, Bhagalpur, Bihar
4. Women Central Prison, Shivamogga, Karnataka
5. Women Prison & Correctional Home, Kannur, Kerala

6. Women Prison & Correctional Home, Thiruvananthapuram, Kerala
7. Nari Bandi Niketan (Female Jail), Sambalpur, Odisha
8. Women Reformatory Jodhpur, Rajasthan
9. Women's Prison, Udaipur, Rajasthan
10. Special Prison for Women, Puzhal, Chennai, Tamil Nadu
11. Special Prison for Women, Tiruchirappalli, Tamil Nadu

This study documents the standards for and conditions of women prisons in the seven states of Andhra Pradesh, Bihar, Karnataka, Kerala, Odisha, Rajasthan, and Tamil Nadu.

LIMITATIONS OF THE STUDY

One of the key limitations of the study is that information on the conditions of WASH and MHM in prisons were collected only from prison administrators. The report, therefore, assumes that the reported conditions by prison administrators match the ground realities for menstruating prisoners in women prisons. This is significant because it assumes a reality based on the responses of the functionary responsible for implementation and does not include any responses from the major stakeholder, the women who menstruate periodically and are directly impacted. Additionally, the report only focuses on women prisons and completely excludes menstruating prisoners who are housed in enclosures in male prisons. Due to the pandemic and restricted access to prisons, a field study to interview women prisoners could not be conducted.

Although the recommendations are broadly written to apply to any women prison and women enclosure, it is possible that the WASH conditions in prisons in other states are completely different. The states with the largest number of female inmates (Uttar Pradesh, Bihar and Madhya Pradesh) and the highest female occupancy rate (Uttarakhand, Bihar and Chhattisgarh)²¹ did not respond to the questionnaire. Lastly, some of the answers to the questionnaires did not provide accurate responses to the question. For example, when asked about policies for staff and prisoner training in MHM, some prisons described the medical teams that come to the prison. This indicates a lack in understanding around issues of WASH and MHM within the prison and the need for awareness-building and training.

²¹ Executive Summary, Prison Statistics India, 2021. Available at: https://ncrb.gov.in/sites/default/files/PSI-2021/Executive_ncrb_Summary-2021.pdf (last accessed on 5 June 2021).

III.

RIGHT TO HEALTH & HYGIENE: STANDARDS ON MENSTRUAL HEALTH MANAGEMENT IN PRISONS

Sustainable Development Goals (SDGs), 3.7 speaks of ‘universal access to sexual and reproductive health-care services’ and SDG 5.6 seeks to ‘ensure universal access to sexual and reproductive health’. Further, SDG 6.2 acknowledges the need for access to adequate and equitable sanitation and hygiene for all, and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situation’, which would necessarily include safe and dignified menstruation for all. Therefore, for the purpose of ensuring the fulfilment of girls’ and women’s rights, menstrual hygiene and health can be construed as one of the objectives included in the SDGs.

In the context of prisons, several international human rights-related instruments emphasise upon personal hygiene and health of women and girls in detention. The United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders, otherwise known as the **Bangkok Rules 2010**, lay out the “global aspirations” for standard minimum rules for treatment of women prisoners.²² The rules give guidance to prison staff and policymakers regarding issues applicable to “women prisoners, their children and their communities.”²³

Rule 5 of the Bangkok Rules emphasizes access to a regular supply of water as well as free sanitary towels.²⁴ The rule also broadly requires prisons to have the “facilities and materials required to meet women’s specific hygiene needs,” in particular those who are menstruating.²⁵ The inclusion of this rule in the specific requirements flagged by the United Nations to address the situation of women prisoners shows the importance of infrastructure and procedures that ensure that women prisoners have access to menstrual hygiene management.

The United Nations Standard Minimum Rules for the Treatment of Prisoners, popularly known as The Mandela Rules, 2015, offer guidance on fulfilling States’ “obligation to treat all prisoners with respect for their inherent dignity and value as human beings.”²⁶ Rule 18 on personal hygiene requires that prisoners “be provided with water and with such

²² Paragraph 11, United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules), 2010. Available at: <https://www.ohchr.org/en/instruments-mechanisms/instruments/united-nations-rules-treatment-women-prisoners-and-non-custodial> (last accessed on 28 November 2021).

²³ Ibid.

²⁴ Ibid., Rule 5.

²⁵ Ibid.

²⁶ Andrew Gilmour, The Nelson Mandela Rules: Protecting the Rights of Persons Deprived of Liberty, available at <https://www.un.org/en/un-chronicle/nelson-mandela-rules-protecting-rights-persons-deprived-liberty> (last accessed 29 September 2021).

toilet articles as are necessary for health and cleanliness.”²⁷ Related to clothing and bedding, rule 19 also requires that “underclothing shall be changed and washed as often as necessary for the maintenance of hygiene.”²⁸ Toilets are to be “adequate” for prisoners to use “when necessary and in a clean and decent manner.”²⁹ Similarly, prisoners should be provided with “adequate bathing and shower installations...at a temperature suitable to the climate, as frequently as necessary for general hygiene.”³⁰ These rules are to apply to “all prisoners without exception.” And therefore must be understood as covering the particular entitlements and requirements of menstruators also.³¹

The Mandela Rules also remind authorities that procedures should be in place to ensure continued access to water and hygiene. Rule 35 requires that the “physician or competent public health body shall regularly inspect and advise the prison director on...the hygiene and cleanliness of the institution and the prisoners; the sanitation, temperature, lighting and ventilation of the prison; the suitability and cleanliness of the prisoners’ clothing and bedding.”³² This broad mandate requires regular inspection of water and sanitary articles, which are essential for menstrual hygiene management.

Additionally, access to WASH, is a fundamental right recognized by the United Nations General Assembly.³³ It is reported that millions of people die each year due to inadequate access to WASH.³⁴

The most comprehensive set of **WASH guidelines** in prisons was written by the International Committee of the Red Cross (ICRC) in 2013. The manual and supplementary guidelines outline the precise requirements for prisons according to the Mandela Rules and highlight the “utmost importance” of access to WASH “for ensuring that the detainees remain in good health.”³⁵ The guidelines cover access to adequate water for “physiological needs and to maintain a minimum level of personal hygiene,”³⁶ access to soap and disinfected water,³⁷ and methods of waste/refuse disposal.³⁸ Specifically for women prisoners, the guidelines underline “ready and safe access to toilets 24 hours a day” and “safe daily access to shower/bathing facilities” as well as “suitable sanitary products” for women and girls who are menstruating.³⁹

²⁷ Rule 18(1), United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules), 2015, available at <https://undocs.org/A/RES/70/175> (last accessed 29 September 2021).

²⁸ *Ibid.*, Rule 19(2).

²⁹ *Ibid.*, Rule 15.

³⁰ *Ibid.*, Rule 16.

³¹ *Ibid.*, Rule 42.

³² *Ibid.*, Rule 35(1).

³³ UN General Assembly Resolution 64/292: The human right to water and sanitation, 2010, available at <https://documents-dds-ny.un.org/doc/UNDOC/GEN/N09/479/35/PDF/N0947935.pdf?OpenElement> (last visited 1 October 2021).

³⁴ Prisoner access to sanitation a human right, say UN experts on World Toilet Day, 2009, available at <https://news.un.org/en/story/2009/11/321952-prisoner-access-sanitation-human-right-say-un-experts-world-toilet-day> (last accessed 29 October 2021).

³⁵ ICRC, Water, Sanitation, Hygiene and Habitat in Prisons, 2020, available at <https://www.icrc.org/en/publication/0823-water-sanitation-hygiene-and-habitat-prisons> (last visited 1 October 2021).

³⁶ *Ibid.*, p. 37.

³⁷ *Ibid.*, p. 39-40.

³⁸ *Ibid.*, p. 77.

³⁹ *Ibid.*, p. 61.

In India, the **National Human Rights Commission** (NHRC) has also commented on the importance of WASH in prisons, stating that there is an “urgent need to upgrade sanitary, hygiene and drinking water amenities in prisons across India.”⁴⁰ In 2014, the NHRC emphasized the need for women’s prisons and stated that such prisons “shall cater to gender specific needs, especially needs relating to health, hygiene, and sanitation.”⁴¹ The Commission recently emphasized in its “Human Rights Advisory on Rights of Women in Context of Covid-19” that conditions of prison facilities for women, especially washrooms, should be improved.⁴²

Additionally, the 2016 Model Prison Manual (MPM) prepared by the Bureau of Police Research & Development, Ministry of Home Affairs, Government of India, outlines a set of model rules for states to adopt in their own prison acts and manuals.⁴³ It sets out standards related to water, sanitation, and menstrual hygiene. Specifically, the MPM outlines that “sufficient water...be made available for the use of women prisoners...and those prisoners, in particular, who are...menstruating.” It provides that women prisoners shall be required to keep their persons clean, and to this end they shall be provided with toilet articles, including sanitary towels, necessary for maintaining health and cleanliness.⁴⁴ the MPM also outlines standards relating to water access and quality, toilet and bathing facilities, clothing and bedding, and inspections. These are also relevant to ensuring access to menstrual hygiene management.

⁴⁰ State of Hygiene in Indian Prisons, 2013, available at <https://www.indianbarassociation.org/wp-content/uploads/2013/02/STATE-OF-HYGIENE-IN-INDIAN-PRISONS.pdf> (last accessed 25 October 2021).

⁴¹ National Human Rights Commission, National Seminar on Prison Reforms: Recommendations, 2014, available at https://nhrc.nic.in/sites/default/files/recomm_of_NS_on_Prison_Reforms_2014_1.pdf (last accessed 28 November 2021).

⁴² National Human Rights Commission, Human Rights Advisory on Rights of Women in the Context of COVID-19, available at https://nhrc.nic.in/sites/default/files/Advisory%20on%20Rights%20of%20Women_0.pdf (last accessed 28 November 2021).

⁴³ 'Prisons' is a State subject under State List of the Seventh Schedule to the Constitution of India. The management and administration of Prisons falls exclusively in the domain of the State Governments, and is governed by the Prisons Act, 1894 and the Prison Manuals of the respective State Governments.

⁴⁴ Rule 26.85, Model Prison Manual, 2016, available at: <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

IV. STANDARDS & CURRENT REALITIES

This section provides an analysis of the responses received from eleven women prisons, and is divided into six themes – (a) prison capacity and infrastructure; (b) access to water; (c) water quality; (d) procurement and quality of menstrual products; (e) menstrual waste management; and (f) sensitisation of staff and inmates. These responses are analysed in the light of the standards as laid out in the state prison rules, Model Prison Manual, 2016 (MPM) and other national and international documents.

A. PRISON CAPACITY AND INFRASTRUCTURE

Sanitary facilities that are in good condition, clean, sufficient in number and easy to access are essential to ensure the hygiene and dignity of people in detention. Situations of overpopulation present a strain on the capacity of the sanitary facilities and pose serious risks in terms of hygiene, the prevention of disease, and respect and dignity for the privacy of prisoners.⁴⁵ Large prison populations and overcrowding affects the rights of menstruating prisoners, particularly with regard to implementation of WASH standards.

STANDARDS

One of the goals of the MPM is to ensure that “[l]iving conditions in every prison and allied institutions meant for the custody, care, treatment and rehabilitation of offenders shall be compatible with human dignity in all aspects.”⁴⁶ The MPM states that the right to fulfilment of basic minimum needs includes “access to clean and hygienic conditions of living accommodation, sanitation and personal hygiene, adequate clothing, bedding and other equipment.”⁴⁷ For many years, the higher judiciary and NHRC⁴⁸ has called on all States to address the issue of overcrowding.

In Rajasthan, the State Prison Rules require that the medical officer conduct daily checks and ensure that “adequate precautions are taken against overcrowding in wards, cells

⁴⁵ Association for Prevention of Torture, Sanitary facilities and personal hygiene, available at <https://www.apt.ch/en/knowledge-hub/detention-focus-database/material-conditions-detention/sanitary-facilities-and> (last accessed 1 October 2021).

⁴⁶ Ibid., p. VII.

⁴⁷ Rights of Prisoners, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 1 October 2021).

⁴⁸ Session Wise Recommendations Emnated during the NHRC-SHRC Meeting held on 20th February, 2020, available at https://nhrc.nic.in/sites/default/files/NHRC-SHRC%20meeting%20on_Recommendations_20022020.pdf (last accessed 25 November 2021).

and other compartments.”⁴⁹ Karnataka and Tamil Nadu also assign the duty to prevent overcrowding to the Superintendent.⁵⁰

Odisha requires prisons to submit a form twice a month to the Inspector General showing the number of prisoners in each ward and measures taken to prevent overcrowding.⁵¹ Both Odisha and Tamil Nadu treat overcrowding as an emergency situation.⁵²

KEY FINDINGS

According to the questionnaire responses, the prisons in 8⁵³ of the 11 prisons had occupancy rates of less than 75%. Bhagalpur however had an occupancy of approximately 90%, though it did not report on the number of children confined in the prison. Udaipur was at 93% occupancy, with 62 prisoners and 9 children in a prison with a capacity of 76. Kannur was functioning at 100% occupancy, with 23 prisoners and 1 child and a prisoner capacity of 24.

At present, except for Kannur, none of the women prisons have any concerns of exceeding the sanctioned capacity of the prison. This is the ideal situation for the prison departments. In reference to menstruating prisoners, prison department should ensure that regular reviews are conducted to ensure that adequate infrastructure and sanitary facilities are available for prisoners in women prisons. The Model Prison Manual, 2016, recommends that the ratio of toilet will be one unit per 10 prisoners.⁵⁴ The ratio of the toilet which can be used during day time will be one unit per six prisoners. In regard to bathing facilities, it recommends that every prison will provide covered cubicles for bathing, at the rate of one for every 10 prisoner, with proper arrangements to ensure privacy.⁵⁵ The state prison departments must ensure the same standards.

B. ACCESS TO WATER

Adequate access to water is vital for hygienic management of menstruation and is required at different stages and in different amounts for different prisoners. Prisoners need access to water to regularly clean themselves and their clothing. The need for water

⁴⁹ Section XVIII Rule 324, The Rajasthan Prison Rules, 1951, available at https://upload.indiacode.nic.in/showfile?actid=AC_RJ_83_1119_00036_00036_1561977215959&type=rule&filename=rajasthan_jail_manual.pdf (last accessed 25 November 2021).

⁵⁰ Chapter III Rule 45, The Karnataka Prison Rules, 1974, available at <https://prisons.karnataka.gov.in/storage/pdf-files/Karnataka%20Prisons%20Rules%201974.pdf> (last accessed 25 November 2021). Chapter XXXIV Rule 746, The Tamil Nadu Prison Rules, 1983, available at http://prisons.tn.gov.in/TAMIL%20NADU%20PRISON%20MANUAL_updated.pdf (last accessed 28 November 2021).

⁵¹ Chapter XXXVII Rule 949(9), Odisha Model Jail Manual, 2020, available at <https://prisons.odisha.gov.in/wp-content/uploads/2020/10/31958-jail-manual-677240-GKclAxfK.pdf> (last accessed 25 November 2021).

⁵² Chapter XXXIX Rule 1044(I), Odisha Model Jail Manual, 2020, available at <https://prisons.odisha.gov.in/wp-content/uploads/2020/10/31958-jail-manual-677240-GKclAxfK.pdf> (last accessed 25 November 2021); Rule 638(XII), The Tamil Nadu Prison Rules, 1983, available at http://prisons.tn.gov.in/TAMIL%20NADU%20PRISON%20MANUAL_updated.pdf (last accessed 28 November 2021).

⁵³ Tiruchirappalli, Chennai, Jodhpur, Shivamogga, Sambalpur, Thiruvananthapuram, Kadappa, and Rajamundry However, Tiruchirappalli, Chennai, Thiruvananthapuram, and Rajamundry did not report how many children live inside the prison.

⁵⁴ Rule 2.10.2, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 November 2021).

⁵⁵ Rule 2.11.1, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 November 2021).

is particularly urgent for menstruating women for personal washing and changing, washing off menstrual discharge, and also to wash stained clothing and bedding. Prisoners also need to be able to regularly wash their hands after changing their sanitary products. Access to water requires a significant amount of infrastructure and investment so that prisoners' right to water is fulfilled.⁵⁶

A 2018 report on Women in Prisons by the Ministry of Women and Child Development found that despite prison manuals prescribing at least 135 L of water per inmate per day and access to bath or showers as frequently as necessary for women prisoners, "in reality, there is a lack of sufficient water, which exacerbates the low levels of sanitation and hygiene."⁵⁷

STANDARDS

The amount of water needed can depend on specific hygiene needs of the inmate, especially women, children and disabled people. Their specific needs "must be taken into consideration and the necessary accommodation must be provided."⁵⁸

As early as 1980, the Mulla Committee recommended that each prison should have an adequate amount of water and infrastructure to store at least one week's worth of water.⁵⁹ Building on this, the MPM asks prison administrators to take "into consideration that the daily requirement of water of an individual is about 135 litres" when making plans for water supply and infrastructure, suggesting that arrangements be made for rainwater harvesting and water recycling due to their cost effectiveness along with an independent stand by in case of emergency,⁶⁰ a recommendation that Odisha reproduced in its state prison manual.⁶¹ Rajasthan's prison manual requires that water be made available for bathing thrice a day without specifying any quantity.⁶²

Several States require that where there are wells for storing water in the prison, the water level be regularly measured.⁶³ This requirement has also been mentioned in the MPM which suggests that the depth be tested once a week.⁶⁴

⁵⁶ National Human Rights Commission, Minutes of the Meeting on Right to Water held on 27th July, 2021, available at <https://nhrc.nic.in/sites/default/files/Minutes%20of%20the%20Meeting%20on%20Right%20to%20Water2021.pdf> (last accessed 25 November 2021).

⁵⁷ Section 4.3.2, Ministry of Women and Child Development, Women in Prisons Report, 2018, available at <https://wcd.nic.in/sites/default/files/Prison%20Report%20Compiled.pdf> (last accessed 25 November 2021).

⁵⁸ Association for Prevention of Torture, Sanitary facilities and personal hygiene, available at <https://www.ap.torture.ch/en/knowledge-hub/detention-focus-database/material-conditions-detention/sanitary-facilities-and> (last accessed 1 October 2021).

⁵⁹ Recommendations 6.17.18 and 6.12.7, Report of All India Committee on Jail Reforms (Mulla Committee), 1980-83, available at <https://www.mha.gov.in/MHA1/PrisonReforms/report.html> (last accessed 1 October 2021).

⁶⁰ Rule 2.14, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

⁶¹ Chapter XXXVII Rule 953, Odisha Model Jail Manual, 2020, available at <https://prisons.odisha.gov.in/wp-content/uploads/2020/10/31958-jail-manual-677240-GKclAxfK.pdf> (last accessed 25 November 2021).

⁶² Section IV Rule 52, The Rajasthan Prison Rules, 1951, available at https://upload.indiacode.nic.in/showfile?actid=AC_RJ_83_1119_00036_00036_1561977215959&type=rule&filename=rajasthan_jail_manual.pdf (last accessed 25 November 2021).

⁶³ Rule 898, Kerala Prison Manual, 1979, available at <https://keralaprisons.gov.in/act-and-rules.html>; Rule 679, Andhra Pradesh Prison Rules, 1979.

⁶⁴ Rule 6.87, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

Unfortunately, neither the MPM nor the State-specific Prison Manuals require prisoners' access to hot water for bathing or pain relief while menstruating, although the United Nations Office for Project Services recommends that both hot and cold water should be available for use by prisoners.⁶⁵

An important aspect of analysing water quantity and infrastructure is understanding whether water is accessible to all, especially for disabled women. Although the MPM as well as the state manuals are silent on this issue, the State Commission for Women in the government of Odisha stated that in order to comply with non-discrimination principles, prisons facilities needed to be upgraded to take care of the needs of disabled women.⁶⁶ All prison administrators should recognize that “vulnerable prisoners with disabilities may not be able to use regular toilets and showers” and should make necessary accommodations and improved access to water, where necessary.⁶⁷

KEY FINDINGS

Based on the responses received, the amount of water allocated for each prisoner is reportedly “sufficient” in most prisons.⁶⁸ The prisons in Rajasthan, Andhra Pradesh, Kerala, Odisha, and Karnataka reported that each prisoner is given as much water as they need. The prison in Chennai stated that there are “no limits” to the amount of water each female prisoner can use, and both Kadapa and Rajamundry specified that they do not measure use per prisoner as they have “running water”, which probably means that they have a continuous supply of water.

In Sambalpur prison, government water supply is received daily thrice from the public health department. There are 15 water ‘Sintex’ tanks of 2000 litres available for daily use of the female prisoners. Additionally, one Reinforced Cement Concrete (RCC) water sump of 25000 litre capacity is also available inside this jail to ensure 24 hours non-stop water supply to the inmates. According to the prison authorities, there is no scarcity of water and adequate water is available for women prisoners.

Only Tiruchirappalli and Udaipur prisons specified the quantity of water available, which is 60L and 100L per prisoner per day, respectively. Both these prisons fail to meet the mandated quantity of 135 litres, with Tiruchirappalli only meeting about 44% of the required quantity per inmate per day.

No prison rules contain provisions for providing hot water to women prisoners to manage menstruation. It is provided only when it is recommended by the medical officer

⁶⁵ P. 96, United Nations Office for Project Services (UNOPS), Technical Guidance for Prison Planning, 2016, available at <https://bip.brpo.gov.pl/sites/default/files/Planowanie%20i%20budowa%20wi%C4%99zie%C5%84%20%28UNOPS%2C%202016%29.pdf> (last accessed 27 September 2021)..

⁶⁶ Women in prisons – an exploratory study in Odisha State Commission for Women Govt of Odisha, 2014-2015, available at https://wcd.odisha.gov.in/sites/default/files/2021-06/doc20170601_162634.pdf (last accessed 28 November 2021).

⁶⁷ Accommodations for vulnerable prisoners are required under the Mandela Rules 2(2) and 5(2), the implementation of which is outlined by UNOPS. P. 94, United Nations Office for Project Services (UNOPS), Technical Guidance for Prison Planning, 2016, available at <https://bip.brpo.gov.pl/sites/default/files/Planowanie%20i%20budowa%20wi%C4%99zie%C5%84%20%28UNOPS%2C%202016%29.pdf> (last accessed 27 September 2021).

⁶⁸ Bhagalpur prison did not respond to this question on the questionnaire.

on the grounds of health issues or if requested by the woman prisoner. In Jodhpur (Rajasthan), though a solar plant is set up, hot water can be provided only on the advice of the medical officer. Efforts have been made in two prisons to provide hot water to women. Sambalpur prison (Odisha) responded that one water geyser (15 Ltr Capacity) has been installed and in Bhagalpur (Bihar), the prison has an electric induction stove for the purpose.

While these efforts are encouraging, it must be highlighted that one small geyser may not be adequate for 20 women inmates, especially during winters in Sambalpur. The electric induction stove in Bhagalpur may be time-consuming and is also not a very sustainable option in the long run. Therefore, some other means for ensuring hot water much be explored.

C. WATER QUALITY

A key factor in safe menstrual hygiene is access to clean water. Clean, safe water has been recognized as a “basic human right” and a “precondition for health and development.”⁶⁹ Menstruating women need access to safe water for staying hydrated, bathing, toilet use, and washing sanitary cloths. The WHO has stated that faecal contamination of water is “the principal risk to human health” in most communities.⁷⁰ Chemical contamination, too, can result in “a significant number of serious problems.”⁷¹ As menstruating women use a greater amount of water, they are particularly vulnerable to diseases coming from contaminated water.

STANDARDS

The National Human Rights Commission has recommended that in general, water should be checked for both chemical and microbiological contamination.⁷² The Odisha jail manual 2020 requires submission of water samples from each prison to the State Water Analysing Authority twice a year for both chemical and bacteriological examination,⁷³ which is the suggested requirement in the MPM as well.⁷⁴ Tamil Nadu follows the same requirement.⁷⁵

In most states the medical officer is required to regularly check that the prison is hygienic,⁷⁶ with Rajasthan’s prison manual specifying the office to check that “the water

⁶⁹ P. 1, UNICEF Handbook on Water Quality, 2008, available at https://web.archive.org/web/20170716141213/https://www.unicef.org/wash/files/WQ_Handbook_final_signed_16_April_2008.pdf (last accessed 27 November 2021).

⁷⁰ P. 51, World Health Organization, Guidelines for Drinking-Water Quality, available at <https://www.who.int/publications/i/item/9789241549950> (last accessed 27 November 2021).

⁷¹ *Ibid.*, p. 69.

⁷² *Supra* note 56.

⁷³ Chapter XXXVII Rule 972, Odisha Model Jail Manual, 2020, available at <https://prisons.odisha.gov.in/wp-content/uploads/2020/10/31958-jail-manual-677240-GKclAxfK.pdf> (last accessed 25 November 2021).

⁷⁴ Rule 6.93, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

⁷⁵ Chapter XXXIV Rule 768, The Tamil Nadu Prison Rules, 1983, available at http://prisons.tn.gov.in/TAMIL%20NADU%20PRISON%20MANUAL_updated.pdf (last accessed 28 November 2021).

⁷⁶ Rule 64, Andhra Pradesh Prison Rules, 1979; Rule 76, The Karnataka Prison Rules, 1974, available at <https://prisons.karnataka.gov.in/storage/pdf-files/Karnataka%20Prisons%20Rules%201974.pdf> (last accessed 25 November 2021).

supply is pure and unpolluted and is not liable to pollution from any source.”⁷⁷ If there is doubt as to its purity, “samples shall be sent to the Chemical Examiner” and where there is an unfavourable report it is to be submitted to the Inspector General.⁷⁸

KEY FINDINGS

With the exception of Rajamundry, all of the prisons included in this study conduct bacteriological water testing twice a year, as mandated in their state prison rules. Rajamundry reported that they get water from the municipal RO plant, so they do not need to test it separately. Tiruchirappalli, Chennai, Bhagalpur, and Jodhpur reported that they make interventions based on the results of the test and the suggestions of the lab, but all others were unsure what interventions exactly needed to be taken, if any.

Chemical testing is conducted once a year in Bhagalpur and twice a year in Jodhpur, Tiruchirappalli, and Kadappa. Chennai, Trivandrum and Kannur did not respond to the question. Other prisons either reported that they do not conduct chemical testing or did not know when the last chemical testing was done.

Tiruchirappalli prison reported checking the chlorine content of water and chlorinating the water daily, and Bhagalpur reported monthly chlorification. Kannur reported that Kerala Water Authority provides them with chlorinated water. Sambalpur responded that the public health department which supply water to the prison conducts testing. At the end of the prison, 'sintex' tanks and water sump are cleaned at regular intervals with bleaching powder and halogen tablets. This is despite the clear mandate of submitting water samples to the State Water Analysing Authority twice a year for both chemical and bacteriological examination.

D. PROCUREMENT AND QUALITY OF MENSTRUAL PRODUCTS

The right of prisoners to basic minimum needs has been recognized as included access to sanitation and personal hygiene as well as “adequate clothing, bedding, and other equipment.”⁷⁹ It has been over 40 years since the Mulla Committee report had recommended to provide sterilized sanitary pads to women.⁸⁰ However, the Ministry of Women and Child Development expressed serious concern about the “insufficient

⁷⁷ Section XIII Rule 324, The Rajasthan Prison Rules, 1951, available at https://upload.indiacode.nic.in/showfile?actid=AC_RJ_83_1119_00036_00036_1561977215959&type=rule&filename=rajasthan_jail_manual.pdf (last accessed 28 November 2021).

⁷⁸ *Ibid.*, Section IV Rule 46.

⁷⁹ Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

⁸⁰ Recommendation 6.17.5, Report of All India Committee on Jail Reforms (Mulla Committee), 1980-83, available at <https://www.mha.gov.in/MHA1/PrisonReforms/report.html> (last accessed 1 October 2021): “Sterilized sanitary pads should be issued to women prisoners as per their requirement;” Recommendation 14.11.23: “Clothing and linen provided to women should include...sanitary towels.”

provision of water and menstrual hygiene products” in its report on women in prisons in India.⁸¹

STANDARDS

Within India, the MPM does not specify the number of sanitary pads that should be made available but requires that sanitary pads should be issued to women prisoners as per their requirements.”⁸² Kerala’s prison manual follows this exact recommendation.⁸³ Andhra Pradesh prescribes eight sanitary towels be given per menstrual cycle,⁸⁴ and Tamil Nadu requires six.⁸⁵ Karnataka’s 1973 Prisons Rules refer to female toilet articles, but requires that they are acquired at their own cost.⁸⁶ Odisha’s jail manual has included one packet of sanitary napkins per month be given to women prisoners as part of their sanitary items as well as extra 30 gms of washing powder for menstruation,⁸⁷ and also specifies that sterilized pads be issued to women “as per their requirements.”⁸⁸ The State even recognizes the need to supply female inmates in after-care and rehabilitation homes with sanitary napkins for their entire period of stay.⁸⁹ Bihar Prison Manual, 2012, does not contain any provision in regard to sanitary products and its availability for women prisoners.⁹⁰ However, by an Government Order (GO) dated 05 August, 2016, the prison department directed that women prisoners be provided one packet of sanitary pad every month. No details regarding the quantity or quality or sizes or absorbency of sanitary pads was mentioned in the GO.⁹¹

Internationally, the widely recognized UN Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (Bangkok Rules 2010) specify that sanitary towels should be provided free of charge.⁹² Although these standards are nonbinding, many countries have taken steps to implement them into their criminal justice systems.⁹³

⁸¹ Key Findings, Ministry of Women and Child Development, Women in Prisons Report, 2018, available at <https://wcd.nic.in/sites/default/files/Prison%20Report%20Compiled.pdf> (last accessed 1 October 2021).

⁸² Rule 26.67, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

⁸³ Rule 479, Kerala Prison Manual, 1979, available at <https://keralaprison.gov.in/act-and-rules.html> (last accessed 25 November 2021).

⁸⁴ Rule 415, Andhra Pradesh Prison Rules, 1979.

⁸⁵ Chapter XXIII Rule 411, The Tamil Nadu Prison Rules, 1983, available at http://prisons.tn.gov.in/TAMIL%20NADU%20PRISON%20MANUAL_updated.pdf (last accessed 28 November 2021).

⁸⁶ Chapter XI Rule 80, The Karnataka Prison Rules, 1974, available at <https://prisons.karnataka.gov.in/storage/pdf-files/Karnataka%20Prisons%20Rules%201974.pdf> (last accessed 25 November 2021).

⁸⁷ Chapter XXXVII Rule 994, Odisha Model Jail Manual, 2020, available at <https://prisons.odisha.gov.in/wp-content/uploads/2020/10/31958-jail-manual-677240-GKclAxfK.pdf> (last accessed 25 November 2021).

⁸⁸ *Ibid.*, Chapter IX Rule 350.

⁸⁹ *Ibid.*, Chapter XXXIV Rule 877(1)(r).

⁹⁰ Chapter 20, ‘Female Prisoners and Children’ of the Bihar Prison Manual 2012, available at https://home.bihar.gov.in/cms/biharprisonmanual/Bihar_Prison_Mannual2012/Bihar%20jail%20manual%20English/20.pdf (last accessed on 28 May 2022).

⁹¹ GO No, 1883, dated 05.08.16, Home Department, Government of Bihar.

⁹² Rule 5, United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules), 2010, available at <https://www.ohchr.org/en/instruments-mechanisms/instruments/united-nations-rules-treatment-women-prisoners-and-non-custodial> (last accessed on 28 November 2021).

⁹³ Lauren Shaw, Bloody Hell: How Insufficient Access to Menstrual Hygiene Products Creates Inhumane Conditions For Incarcerated Women, 2019, available at <https://scholarship.law.tamu.edu/cgi/viewcontent.cgi?article=1170&context=lawreview> (last accessed 1 October 2021).

KEY FINDINGS

All the eleven prisons reported that they supply free sanitary pads to their women prisoners. The number of sanitary pads provided, however, varies from prison to prison. Bhagalpur provides “one packet,” Udaipur provides 25 pads “or as per requirement,” Sambalpur provides 10 napkins (1 packet), and Kadapa provides at least 8 and Kannur gives 20 pads with the possibility to get additional when required in both. While the initial number of pads that would be provided is fixed in Kadapa (Andhra Pradesh) and Kannur (Kerala), these are the only two prisons which allows for additional pads as per the requirement of women prisoners. Therefore, except for these two prisons, no other prison complies with the standard as laid down in the Model Prison Manual, 2016.

In Tamil Nadu, there is no separate budget for menstrual products for each prison; instead, the government supplies sanitary napkins that are to be given to prisoners free of cost. Tiruchirappalli mentioned that cloth sanitary pads are provided free of cost by the Deputy Director, Health Services and Preventive Medicine. In Chennai, they did not inform about the type of menstrual product but provided that they were issued by the Tamil Nadu Medical Service Corporation Ltd.

Bhagalpur, Jodhpur, Shivamogga and Sambalpur reported having a specifically allocated budget for procurement of menstrual products. Thiruvananthapuram and Udaipur have arrangements with NGOs who supply these products, and Rajamundry purchases the products under the “Miscellaneous and Medicines” part of their budget. Kadapa and Kannur did not give clear answers as to how they procure menstrual products to give their inmates.

Except for the sanitary pads, there is no mention of provision of any other menstrual product by any prison. There is no one menstrual material or product that suits every girl and woman in all settings. There is need to increase efforts to increase availability and choice of menstrual hygiene materials, considering affordability, sustainability, disposal, and local market considerations.⁹⁴

E. MENSTRUAL WASTE MANAGEMENT

The disposal of menstrual hygiene materials is often overlooked, to the detriment of both women and the facilities. Where there are not alternative disposal options, women often dispose of used menstrual materials in toilets. This may choke up toilets, for example, or clog vacuum hoses during desludging of septic tanks.⁹⁵ Therefore, there is a need to have a regular, sustainable and safe disposal plan for menstrual waste.

STANDARDS

⁹⁴ Pg 11, UNICEF’s Guide to menstrual hygiene materials, available at <https://www.unicef.org/media/91346/file/UNICEF-Guide-menstrual-hygiene-materials-2019.pdf> (last accessed on 28 May 2022).

⁹⁵ Guidance on Menstrual Health and Hygiene, UNICEF. Available at <https://www.unicef.org/documents/guidance-menstrual-health-and-hygiene> (last accessed 28 May 2022).

There is a clear dearth of standards on disposal of menstrual products within prisons. However, the general 2016 Solid Waste Management Rules apply to prisons, which require that sanitary pads be wrapped “in the pouches provided by the manufacturers or brand owners of these products or in a suitable wrapping material as instructed by the local authorities and shall place the same in the bin meant for dry waste or non- bio-degradable waste.”⁹⁶

The National Guidelines on MHM issued by the Ministry of Drinking Water and Sanitation in 2015 outline suggested methods of menstrual waste disposal, albeit in the context of schools:⁹⁷

Table 4.2: Recommended options for disposal of different materials

Material	Disposal into pit latrine	Deep burial	Composting	Pit burning	Incinerator
Used tissues, paper, cloth, cotton	✓	✓	✓	Less recommended	✓
Cotton napkins (reusable or commercial)	Less recommended	✓	✓	Less recommended	✓
Commercial napkins with plastic and liners	Not recommended	✓	Not Possible	Not recommended	Only recommended with good incinerator

International guidelines on implementation of the Mandela and Bangkok rules state that women’s prisons should have “suitable receptacles...for the disposable of female sanitary products to maintain an acceptable standard of hygiene.”⁹⁸

Recently, the National Commission for Women inspected several prisons around the country and recommended that proper facilities for disposal be installed in several prisons, specifically solar incinerators placed in female barracks.⁹⁹ State prison manuals are yet to adopt this recommendation.

KEY FINDINGS

In Tiruchirappalli, the prison follows the bio-medical waste management rules and provides separate dustbins with lids and safe biomedical bags in all blocks and in the staff room. The bags are then sent to the relevant environmental waste department. In Chennai, incinerators are available, which were purchased in 2020. Udaipur, Bhagalpur, Thiruvananthapuram, Kannur, Shivamogga, and Sambalpur also have incinerators installed. NGOs sponsored the incinerators in Udaipur, Shivamogga, and Sambalpur. In Kadapa, pads are wrapped in paper and collected in dustbins, and in Rajamundry,

⁹⁶ Clause 4 Duties of waste generators, Solid Waste Management Rules, 2016, available at <http://moef.gov.in/wp-content/uploads/2017/08/SWM-2016-English.pdf> (last accessed 28 May 2022).

⁹⁷ P. 19, Menstrual Hygiene Management, National Guidelines, 2015, available at https://jalshakti-ddws.gov.in/sites/default/files/Menstrual%20Hygiene%20Management%20-%20Guidelines_0.pdf (last accessed 1 October 2021).

⁹⁸ P. 97, United Nations Office for Project Services (UNOPS), Technical Guidance for Prison Planning, 2016, available at <https://bip.brpo.gov.pl/sites/default/files/Planowanie%20i%20budowa%20wi%C4%99zie%C5%84%20%28UNOPS%2C%202016%29.pdf> (last accessed 1 October 2021).

⁹⁹ Report on Improving the Condition of Women Inmates In Prisons http://ncw.nic.in/sites/default/files/JAIL%20REPORT_NCW_English_0.pdf (last accessed 28 November 2021).

separate dustbins are used so that menstrual products can be collected and burned outside the prison later.

F. SENSITISATION OF STAFF AND INMATES

Improving the knowledge, attitudes, and practices of both prison staff and prisoners through trainings and awareness building is necessary to ensure there is a culture of openness and safe practice when it comes to menstrual hygiene within the prison.

STANDARDS

While many of the state prison manuals require gender sensitisation training for staff, Odisha goes further to require that all staff working with women prisoners undergo “training relating to the gender-specific needs,”¹⁰⁰ modelled after the MPM.¹⁰¹

Kerala’s manual, too, is very detailed when it comes to the training required with regard to gender sensitisation, aimed at “broadening of their cultural and professional interests [and] . . . improving their performance of administrative duties.”¹⁰² The published training manual for the state requires 18 hours of training on sensitisation, with 1.5 hours allotted to “gender sensitivity and prison management” towards the goal of creating “women friendly prisons.”¹⁰³ Beyond sensitisation, Kerala also specifically addresses the need for jail warders to be trained in first aid, sanitation, and hygiene.¹⁰⁴ There is no specific provision on sensitisation related to menstrual aspects.

Karnataka, Rajasthan, and Tamil Nadu do not mention any such training or sensitisation; however, Karnataka has indicated that reforms in prisons should “take care of needs and problems of women prisoners.”¹⁰⁵

The Ministry of Women and Child Development also recommends that prison administrators undergo sensitivity training, especially with regards to needs of particularly vulnerable women.¹⁰⁶ Odisha’s State Commission also flagged the need for training female jail staff on “health and hygiene, specifically on reproductive health.”¹⁰⁷

Although none of the State Prison Manuals address the need to sensitise inmates, the Odisha State Commission for Women has recommended that prisons engage in capacity

¹⁰⁰ Chapter IX Rule 326, Odisha Model Jail Manual, 2020, available at <https://prisons.odisha.gov.in/wp-content/uploads/2020/10/31958-jail-manual-677240-GKclAxfK.pdf> (last accessed 25 November 2021).

¹⁰¹ Rule 26.12, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

¹⁰² Chapter VI Rule 35, Kerala Prison Manual, 1979, available at <https://keralaprisons.gov.in/act-and-rules.html> (last accessed 1 October 2021).

¹⁰³ Kerala Prisons Training Manual of Basic Course for Prison Officers, 2017, available at https://keralaprisons.gov.in/userfiles/act-and-rules/training_manual_prison_officers.pdf.

¹⁰⁴ Chapter VI Rule 37, Kerala Prison Manual, 1979, available at <https://keralaprisons.gov.in/act-and-rules.html> (last accessed 25 November 2021).

¹⁰⁵ Clause 5.2.4.3.10, Karnataka State Policy for the Empowerment of Women (Draft), 2018, available at http://ksdl.karnataka.gov.in/spb/Reports/state%20policy%20for%20empowerment%20of%20women_%20draft.pdf (last accessed 28 November 2021).

¹⁰⁶ Recommendation 6.4, Ministry of Women and Child Development, Women in Prisons Report, 2018, available at <https://wcd.nic.in/sites/default/files/Prison%20Report%20Compiled.pdf> (last accessed 28 November 2021).

¹⁰⁷ Women in prisons – an exploratory study in Odisha State Commission for Women Govt of Odisha, 2014-15, available at https://wcd.odisha.gov.in/sites/default/files/2021-06/doc20170601_162634.pdf (last accessed 28 November 2021).

building through awareness workshops on sanitation and reproductive hygiene for prisoners.¹⁰⁸ The MPM also recommends sanitation, hygiene, and health education for both inmates and personnel.¹⁰⁹

With regard to the budget for such training, Kerala is the only state to specifically provide that visiting lecturers be brought in and paid an honorarium for trainings.¹¹⁰ Odisha's State Commission recommends that the budget include a provision for weekly visit of a lady doctor.¹¹¹

KEY FINDINGS

In Tamil Nadu, both Tiruchirappalli and Chennai prisons have sensitisation raising programmes for staff and prisoners on menstrual hygiene management. Tiruchirappalli conducts monthly awareness camps on the use of sanitary pads and cloths as well as personal hygiene, use of water and disposal of pads during menstruation. Chennai conducts trainings for staff who are then expected to educate prisoners, even going as far as including management of mental health during their menstrual cycles.

Prisons in Kadapa, Shivamogga, and Jodhpur also conduct awareness programs on menstrual hygiene to both prisoners and staff. Thiruvananthapuram has awareness classes sponsored by an NGO for staff.

In Bhagalpur, Rajamundry, Sambalpur, and Udaipur, there are no specific programs for menstrual health management, either for prisoners or for staff. Several of these prisons indicated that the female doctor's visit was sufficient for awareness building on MHM, indicating a general lack of awareness about the issues linked to MHM and the need for both staff and prisoners to understand those issues, not only medical staff. Unfortunately, none of the prisons have a specific process in place to hire experts to conduct such trainings. In Tiruchirappalli, the prison staff report dissuading usage of cloth during interactions with prisoners.

¹⁰⁸ Ibid.

¹⁰⁹ Rule 4.07.4, Model Prison Manual, 2016, available at <https://www.mha.gov.in/sites/default/files/PrisonManual2016.pdf> (last accessed 25 October 2021).

¹¹⁰ Chapter VI Rule 36.6, Kerala Prison Manual, 1979, available at <https://keralaprisons.gov.in/act-and-rules.html> (last accessed 28 November 2021).

¹¹¹ Women in prisons – an exploratory study in Odisha State Commission for Women Govt of Odisha, 2014-15, available at https://wcd.odisha.gov.in/sites/default/files/2021-06/doc20170601_162634.pdf (last accessed 28 November 2021).

V.

THE RECOMMENDATIONS

The findings indicate that there are a number of policy and implementation gaps in ensuring hygiene and dignity of women prisoners duration menstruation. Policy gaps include lack of provisions in regard to quantity and quality of menstrual products, options for an informed choice of menstrual product in state prison rules vis-à-vis the national and international standards. Implementation gaps include lack of uniformity in implementation of rules among prisons within a state, infrastructural challenges and lack of training initiatives, among others.. While there is a dearth of standards in this sphere in the context of prisons, there is an imminent need for prison administrators to nuance their knowledge on MHM. Proactive efforts need to be made to ensure appropriate measures are made available in prisons to enable menstruating women and transgenders to effectively manage their periods in prison.

In the context of COVID-19, the National Human Rights Commission has called on prisons to ensure proper infrastructure facilities with regard to sanitation, including regular inspection of health and hygiene and creating more spaces for bathing and more mobile toilets.¹¹² Proactive measures to prevent overcrowding and regularly check on the access to sanitary facilities will ensure that menstruating inmates can handle their menstruation safely and with dignity. This section puts forth recommendations with the aim to assist the prison authorities in ensuring menstrual health and hygiene effectively in prisons.

The following set of recommendations are based on the findings of the study as well as the suggestions that emerged during CHRI team's visit to some women prisons and enclosures in Karnataka and Punjab and their interaction with women prisoners in the last few years.

A. PRISON CAPACITY AND INFRASTRUCTURE

1. **Undertake measures to ensure the right to privacy and dignity:** Prisoners should be able to use toilets for ablutions/ bathing/ changing menstrual products with dignity. Each prison must review the current infrastructure, and take remedial action where necessary. For instance, where the toilets within barracks are visible from the outside, the walls of toilets can be raised or doors/partitions can be installed, to ensure segregated enclosures.

¹¹² National Human Rights Commission, Impact of COVID-19 on Human Rights & Future Response: Advisory on the Rights of the Prisoners, 2020, available at <https://nhrc.nic.in/sites/default/files/Advisory%20on%20the%20Rights%20of%20Prisoners%20and%20Police%20Personnel.pdf> (last accessed 28 November 2021).

2. **Review calculations related to sanctioned capacity with WASH standards in mind.** The ICRC has explained that where several people are sharing a space, increased needs in terms of personal hygiene need to be taken into account.¹¹³ Therefore, in calculating and outlining standards for the sanctioned capacity of the prison, access to sanitary facilities must also be taken into account.¹¹⁴ Prison need to take account for children who live with their mothers in determining sanctioned capacity, seeing as children use sanitary facilities and have their own WASH needs.
3. **Outline rules on the ratio of inmates to toilets and washing areas,** similar to Karnataka and Odisha's and Model Prison Manual's standards. The ratio should include children who stay with women prisoners and use the washing and toilet facilities. Especially where toilets are not inside dormitories, prison authorities should ensure that each prisoner has easy access to a toilet as and when they need it. For example, even in a prison with a low occupancy rate, the number of toilets and showers available to a ward should be sufficient for the number of prisoners living in that ward, in line with international standards that require "continuous access to toilet facilities" and more toilets/bathing/shower facilities to "accommodate the specific health and hygiene needs of women."¹¹⁵ A higher number of toilets per group of prisoners should be considered to take into account possible delayed maintenance of toilets, which are especially vulnerable to breaking down due to high use.¹¹⁶
4. **Superintendents should regularly check if toilets and taps are functioning:** These are key tools for MHM that women need access to, therefore where they are not working, there should be a system in place to immediately rectify the situation or provide inmates with an alternative toilet.
5. **Ensure that there are an adequate number of hand-washing facilities** at each place where there are toilets or toilets,¹¹⁷ and that those facilities are equipped with soap.
6. **Ensure that a dustbin with a lid is provided in all barracks** for disposal of sanitary pads during lock up hours and night.
7. **Ensure provision for clothes lines for drying used and washed underwear/reusable menstrual cloth** and other absorbents in sunlight. The area should be close to the wash areas yet secluded from line of sight of visitors/others as far as possible, keeping in mind possible fear/shame attributed to drying undergarments.

¹¹³ P. 18, ICRC, Water, Sanitation, Hygiene and Habitat in Prisons, 2020, available at <https://www.icrc.org/en/publication/0823-water-sanitation-hygiene-and-habitat-prisons> (last visited 1 October 2021).

¹¹⁴ Ibid., p. 20.

¹¹⁵ P. 97, United Nations Office for Project Services (UNOPS), Technical Guidance for Prison Planning, 2016, available at <https://bip.brpo.gov.pl/sites/default/files/Planowanie%20i%20budowa%20wi%C4%99zie%C5%84%20%28UNOPS%2C%202016%29.pdf> (last accessed 27 September 2021).

¹¹⁶ UNOPS recommends that designs of prisons include a higher than required number of toilets before building for this reason. As these prisons already exist, limiting the occupancy rate based on the number of toilets available can achieve the same goal. Ibid., p. 49.

¹¹⁷ Ibid., p. 98.

8. **Implement an anonymous complaint mechanism** for women inmates to be able to report when toilets or spaces are overcrowded.
9. Water storage capacity is also an infrastructure issue.

B. ACCESS TO WATER

1. **Regularly assess the amount of water available to prisoners:** Where there are no water meters or storage tanks, the ICRC recommends that water consumption by detainees is measured at different times of the day by measuring “the average rate of flow” from the various taps, such as distribution points, showers, and toilets, for one hour and dividing by the number of detainees drawing water. Installation and daily filling of storage tanks should be required in all prisons. This type of regular method will ensure that prisoners always have access to adequate water.
2. **All prisons should increase per inmate per day amount of water** to at least 135 Litres.
3. **Provide additional water and time for bathing for menstruating women.** As recommended by WaterAid, all women’s prisons should be ready to provide this additional resource, keeping in mind the number of menstruating prisoners and their monthly needs.¹¹⁸
4. **Ensure availability of hot water to prisoners** through electric water heaters whenever requested. Where electricity issues are common, solar collectors can be installed, which require little maintenance. These passive solar collectors are recommended by the ICRC in its guidelines on adhering to the Mandela Rules’ requirements surrounding water and equipment needed for personal hygiene.¹¹⁹ Prisoners should not have to get doctor’s approval to have access to hot water during menstruation.
5. **Address the need for accommodations for disabled prisoners:** In the UK, Gender Specific Standards issued by the government include a provision that vulnerable women and those with specific needs should be provided with

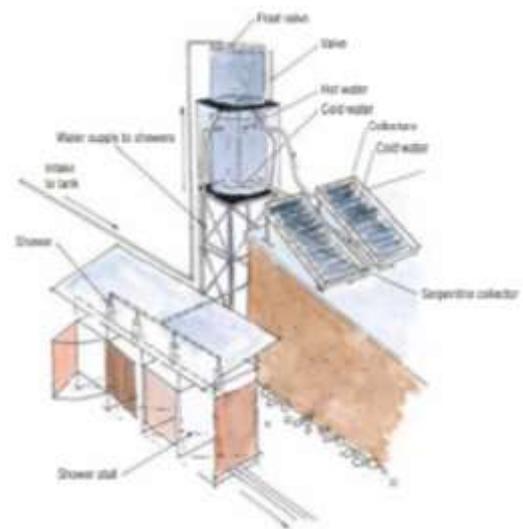


Figure 1: ICRC’s suggested installation of passive solar collectors for hot water production

¹¹⁸ P. 159, Sarah House, Therese Mahon, and Sue Cavill, *Menstrual Hygiene Matters: A resource for improving menstrual hygiene around the world*, 2012, available at <https://washmatters.wateraid.org/sites/g/files/jkxooof256/files/Menstrual%20hygiene%20matters%20low%20resolution.pdf> (last accessed 1 October 2021).

¹¹⁹ P. 37, ICRC, *Water, Sanitation, Hygiene and Habitat in Prisons*, 2020, available at <https://www.icrc.org/en/publication/0823-water-sanitation-hygiene-and-habitat-prisons> (last visited 1 October 2021).

reasonable adjustments, even within the first 24 hours of their arrival.¹²⁰ The Inspectorate of Prisons elaborates that there should be dedicated cells for women with disabilities with ongoing adaptations based on the occupant.¹²¹ Prison rules in India should include such provisions and ensure that where needed, extra water and/or hot water is available for disabled prisoners, as well as physical accommodations within washrooms to make them accessible.

C. WATER QUALITY

1. **Mandatory bacteriological and chemical testing of water at least twice a year and regular reporting from the prison on the findings** of the test and any interventions required or taken.
2. **Prison administration should train staff on how to collect water samples for testing:** Water testing is not useful if the samples are not collected and stored properly. Water samples for bacteriological testing should be collected in glass or polyethylene bottles a secure box insulated by an ice pack or freezing mixture and should be sent immediately after collection for analysis.¹²²
3. **Conduct regular chlorine and pH tests:** Even where water is regularly tested and disinfected, prison staff should be trained to conduct regular testing of the chlorine and pH level to ensure prisoner safety, as is being done in Tiruchirappalli.
4. **Educate prison staff on the importance of both microbiological and chemical testing,** and the risks of contamination to increase follow-up once tests are given. Staff should be trained on reporting when the tests were conducted and the results, as well as writing regular entries commenting on the physical appearance of the water, such as the requirement of the medical officer in Rajasthan’s prison rules.

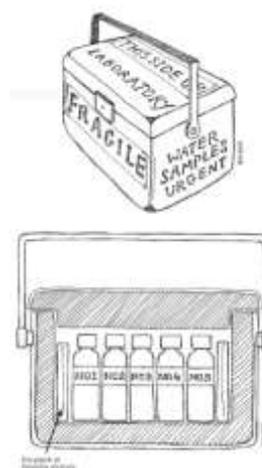


Figure 2: The recommended transport box for water samples being sent for bacteriological testing by the WHO

D. PROCUREMENT AND QUALITY OF MENSTRUAL PRODUCTS

1. **Ensure that prisons have adequate sanitary pads to provide to inmates free of cost without limit.** Every state must have a mandatory provision for menstrual products to be provided free of cost and as per the requirement with no maximum limit as also recommended by the Ministry of Women and Child Development. There should also be a clear process within prisons on how to request extra

¹²⁰ Standard 1.2, Gender Specific Standards to Improve Health and Wellbeing for Women in Prison in England, available at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/687146/Gender_specific_standards_for_women_in_prison_to_improve_health_and_wellbeing.pdf (last accessed 25 November 2021).

¹²¹ Section 2 Indicator 18, UK Inspectorate of Prisons Expectations: Criteria for Assessing the Treatment and Conditions for Women in Prison, available at https://www.justiceinspectors.gov.uk/hmiprison/wp-content/uploads/sites/4/2014/02/final-womens-expectation_web-09-14-2.pdf (last accessed 25 November 2021).

¹²² P. 56, World Health Organization, Guidelines for Drinking-Water Quality, available at <https://www.who.int/publications/i/item/9789241549950> (last accessed 27 November 2021).

sanitary pads, and prisons should frequently ensure that they are communicating with the prisoners to see if the pads supplied are adequate and of good quality. Every menstruator should have access to at least 4-6 pads per day of their cycle (varying cycle lengths), making it a healthy practice to change pad/cloth once in 4-6 hours. The same applies to quantum of supply of cloth pieces, 4-6 cloth pieces of a minimum 40 cm X 25 cm of absorbent flannel/jersey cloth preferably sourced in rolls/bales. This should particularly account for the access to washing/drying facilities apart from humidity/rain conditions to enable proper sun-drying of the cloth used as a menstrual discharge absorbent.

2. **Stock various types and sizes of menstrual products.** As women experience menstruation differently, wherever possible there should be a choice of products to use, such as sanitary pads, menstrual cups, and tampons. If women choose to use cloths, they should be provided with adequate soap for washing the cloth and instructed on how to properly disinfect the cloth between uses and a well sun lit and ventilated space for drying that should be available irrespective under the ambit of WASH facilities. Prisons must endeavour to make sanitary products accessible to all women, regardless of their preferred product. This can be better facilitated by an increased budget for sanitary products at the state level.
3. **Prison administrators should routinely ask prisoners about their need for menstrual products:** Like in the United Kingdom, prisons in India should require officers to specifically ask if the inmate requires any menstrual product as soon as they come in and inform them that they are entitled to provision of these items and to speak about it in private if they wish.¹²³
4. **Establish partnerships with NGOs who provide menstrual products** if prisons do not have adequate budget allocation for this purpose. NGOs can also help to provide different types of sustainable menstrual products, such as menstrual cups.
5. **Make proper pain relievers available for women facing painful menstruation.**¹²⁴ For some women, hot water may not be enough to deal with menstrual pain. Premenstrual Syndrome (PMS) symptoms like cramps, bloating, and headaches are experienced by nearly 90% of people who menstruate.¹²⁵ Even if the doctor is not available on a certain day, prison staff should be trained to help prisoners manage their physical pain.
6. **Ensure additional provisions for better menstrual experiences,** like access to hot water bags, dark color of uniforms for convicted women, provision/access to underwear/panties, hair removal methods, are all choice enabling for prisoners.

E. MENSTRUAL WASTE MANAGEMENT

1. **Encourage and provide prisoners with menstrual products that create less waste,** such as cotton or sanitary pads, tampons, cloth pads and menstrual cups

¹²³ UK Police and Criminal Evidence Act 1984 (PACE) Codes of Practice C (2019) Rule 3.2 and 3.5.

¹²⁴ Section 5.9.4, Ministry of Women and Child Development, Women in Prisons Report, 2018, available at <https://wcd.nic.in/sites/default/files/Prison%20Report%20Compiled.pdf> (last accessed 2 December 2021).

¹²⁵ Premenstrual Syndrome (PMS), available at <https://www.womenshealth.gov/menstrual-cycle/premenstrual-syndrome> (last accessed 1 October 2021).

(including reusable types). Biodegradable menstrual products that can have its plastic layer separated can be composted through deep burial pits. The prisons that received incinerators from NGO partners can try to extend those relationships to procure reusable or biodegradable products and train prisoners on how to use them.

2. **Place washable disposal bins within each toilet cubicle or very close to it.** The National Guidelines on MHM recommend that schools provide bins with close-fitting lids, and that there be an emptying schedule and a point person on staff; the same should be done within prisons.¹²⁶ This should also be factored in for women's enclosures in larger prisons, especially during lock up timings.
3. **Ensure that all menstrual pads and cloth are disposed of in compliance with the standards.** On the basis of the capacity of the women's enclosures/women's prisons, prison administration can choose to procure decentralised incinerators of small or medium scale, compliant with CPCB, SPCB and WHO standards. In both cases it is necessary to ensure Operations and Maintenance, with training for and with intimates on usage and sustainability, along with regular budgets available for the same including electricity. Larger prisons, however, should be wary of the volume and composition of waste being incinerated so that toxic compounds and hazardous gases are not released into the air.¹²⁷ Even small incinerators can be dangerous if the burning temperature is not high enough, which is over 800 degree Celsius as per the WHO standards.¹²⁸ Therefore, prisons should ensure that their incinerators are approved by the Central Pollution Control Board and the State Pollution Control Board.¹²⁹

In case the purchase and maintenance of incinerator is not viable, the prison must enquire about the centralised incinerator facilities and develop a Standard Operating Procedure (SOP) for segregation, transportation and handling of menstrual waste from prisons to the facility.

F. SENSITISATION OF STAFF AND INMATES

1. **Conduct regular, compulsory MHM Training for Staff.** All prisons should require staff to complete menstrual hygiene management training regularly in order to be able to recognize symptoms of mental distress in menstruating prisoners. This would enable administrators to respond to needs in an appropriate manner, such as referring them to specialised support.
2. **Brief prisoners on the MHM processes within the prison during admission,** such as availability of menstrual products, disposal, access to hot water, etc.

¹²⁶ P. 18, Menstrual Hygiene Management, National Guidelines, 2015, available at https://jalshakti-ddws.gov.in/sites/default/files/Menstrual%20Hygiene%20Management%20-%20Guidelines_0.pdf (last accessed 2 December 2021).

¹²⁷ P. 4, Menstrual Waste Management, available at <https://www.wateraidindia.in/sites/g/files/jkxooof336/files/menstrual-waste-management.pdf> (last accessed 2 December 2021).

¹²⁸ For information on the WHO best practices for incinerations, kindly refer to <https://apps.who.int/iris/bitstream/handle/10665/328146/9789241516228-eng.pdf> (last accessed on 2 December 2021).

¹²⁹ Breaking The Silence On The Incineration Of Menstrual Waste, available at <https://ecofemme.org/breaking-the-silence-on-the-incineration-of-menstrual-waste/> (last accessed 27 September 2021).

Medical staff should note any special amenities/accommodations that a prisoner will need during menstruation time and ensure that relevant prison staff are aware of them.

3. **Conduct awareness camps and activities on good menstrual hygiene practices every six months.** These camps can include movie screenings and discussions on menstruation taboo and practices. During the camps, feedback can be sought from women on whether the prison facilities are adequate for safe and dignified menstruation. Budgets should set aside separate funds for these regular sessions. These camps can be conducted in collaboration with the district legal services authorities and the health department.
4. **Information, Education and Communication (IEC) Material related to various aspects of menstruation can be displayed in strategic places** in local languages. The materials should include relevant information on the prison's processes regarding MHM and WASH. See Annexure B for a poster on menstrual hygiene management in prisons prepared by CHRI.
5. **NHRC's Proforma for Health Screening of Prisoners to be amended to include gender/menstruation specific questions** such as: a. Period regularity b. Hormonal disorders related to menstrual health c. Menstrual disorders d. Anaemia e. Preference of menstrual product 4. During regular check-ups of women prisoners, the Medical Officer should specifically include checks and redressal/treatment related to the following: a. Anaemia b. Sexual Tract Infections (STIs) or Reproductive Tract Infections (RTIs) c. Yeast/Bacterial Infections d. Chronic Menstrual Disorders: Dysmenorrhea, Amenorrhea, Endometriosis, Pre Menstrual Dysphoric Disorder (PMDD), Pre Menstrual Syndrome (PMS), Polycystic Ovarian Syndrome (PCOS), etc e. Specific Needs of Disabled Menstruating Populations, more particularly with accessing products, seeking information (tactile/visual/audio-visual).

List of Questions on Menstrual Hygiene

1. Prison Population

- i. What is the sanctioned capacity of the prison?
- ii. What is the current population?

2. Testing of water quality

- i. Is there a policy for regular water quality testing in prisons? If so, kindly share the relevant provisions of the state prison rules or a copy of the circular/order, if issued by the state prison department or the state government.
- ii.
 - a) How frequently is bacteriological testing of water done?
 - b) Please share the copy of the last report of bacteriological testing of water.
 - c) What interventions were taken based on the tests?
- iii.
 - a) How frequently is chemical testing of water done?
 - b) When was the last test done? Kindly share a copy of the same.
 - c) What interventions were taken based on tests?

3. Provision of adequate water and infrastructural facilities

- i. Do the prisons have means/method to measure water quantity access within prisons? If so, could you share more details on the same.
- ii. Is there a mandate to provide hot water for prisoners, especially women prisoners, during winter or to manage period pain? If so, please share the guideline/circular/notification regarding the same.
- iii. How much water is mandated to be available per prisoner for WASH¹³⁰ Needs? i.e. bathing, cleaning, washing, toilets, etc.
- iv. Do you have any policy in place to support WASH needs of disabled women prisoners? Do share details regarding accessibility tools made available for different types of disabilities?
- v. Is there a specific fund allocated to the provision of accessibility tools for disabled women prisoners? If so, please share details regarding the same. If no such funds are allocated, please provide reasons for the same.

4. Procurement of menstrual products

- i. What is the allocated budget for prisons to procure menstrual products like disposable pads/cloth/reusable pads/menstrual cups for menstruating prisoners?

¹³⁰ WASH is an acronym that stands for "water, sanitation and hygiene". Universal, affordable and sustainable access to WASH is a key public health issue within international development and is the focus of the first two targets of Sustainable Development Goal 6.

Kindly share details of expenditure on menstrual products for the last three financial years.

- ii. Whether women prisoners are given sanitary pads/other menstrual products (cloth/reusable pads/menstrual cups) free of cost?
 - a) If yes, kindly provide the relevant provision of the state prison rules or copy of the circular/order where it is prescribed.
 - b) If no, give details of the number of sanitary pads/ menstrual products provided and the charges for the same.
- iii. Do you have a circular/order/Standard Operating Procedure, outlining standards for procurement of these menstrual products? If so, please share a copy of the same.

5. Menstrual Waste Management

- i. Is there a policy/method for disposal for safe disposal of menstrual disposable menstrual products like sanitary pads? Kindly share the relevant circular/order, if any, on how prisons are directed to manage menstrual waste?
- ii. Are there funds allocated for incinerators?
- iii. Is there a Standard Operating Procedure for procuring compliant incinerators? If so, please share a copy of the same.

6. Staff Training

- i. What are the policies/measures in place to improve knowledge, attitudes, practices of prison staff and prisoners related to menstrual health?
- ii. What is the allocated budget for training of staff on issues of Menstrual Health and Hygiene?
- iii. Is there a process in place to hire experts/doctors, etc?

ANNEXURE B

POSTER FOR DISPLAY INSIDE PRISONS

MENSTRUAL HYGIENE & You

Did you know that access to safe and dignified means for ensuring menstrual hygiene is a fundamental need of women and girls everywhere? As a society, we have very little conversation on this topic and many aspects relating to the menstruating women are shrouded in myths. Even in prison, you should be able to manage your menstruation hygienically, safely, in privacy and with dignity. So, let's start the conversation about menstrual hygiene and you!

What facilities are prison authorities required to provide you to ensure menstrual hygiene?

To facilitate menstrual hygiene, the prison administration is to ensure adequate supply of water, clean toilets and waste disposal mechanisms inside women's enclosures. They should also conduct awareness programmes and provide information regarding good menstrual hygiene practices.



Who will provide you sanitary pads?

The Model Prison Manual 2016 requires prison administration to provide sterilised sanitary pads to women inmates according to their requirements. Sanitary pads should be provided regularly and be of good quality products. Otherwise, it may be available in the prison canteens, or be provided by family members during visits.



How can you maintain personal hygiene during your periods when in prison?

Although the menstrual fluid is not impure, once it collects on a pad/cloth it becomes a fertile ground for bacterial infection. Therefore, it is a good practice to change the pad/cloth every 4-6 hours. It is a good practice to clean the cloth and undergarments used during period thoroughly and dry them under the sun. You should take regular baths during the duration of your menstrual cycle.



How should you dispose the used sanitary pads?

One should wrap the used sanitary pad in paper and keep it separate than other garbage. These should be disposed of separately. You may ask prison authorities to allocate a separate bin for disposal of pads. Where available, pads can be disposed in an incinerator/ machine installed for the purpose.



If there are issues with maintaining menstrual hygiene, where can you complain?

Complaints can be made to the officer-in-charge of prisons or the secretary, district legal services authorities or the members of the Board of Visitors which include the District & Sessions Judge, District Magistrate and other official and non-official visitors.



If there are issues during menstruation, who can you consult?

If you experience issues such as

- periods accompanied by really painful cramps
- irregular periods
- sudden weight gain,
- skin changes,
- excessive bleeding,
- intolerance to heat/cold



during menstruation, or before or after your menstrual cycle please consult the medical officer immediately.



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