



# Managing Mental Health Issues in Prisoners: NIMHANS Guidelines

## Why in News

Acting **on the request of the Ministry of Home Affairs, NIMHANS, an Institute of National Importance**, issued a **set of guidelines on the management of mental health issues** of the prisoners and prison staff.

## Key Points

### ▪ NIMHANS Guidelines:

#### ◦ Gatekeeper Model for Identification of Mental Illness:

- In this model, **selected inmates, trained to identify prisoners at risk of suicide**, would refer them to treatment or supportive services.
- It is a step to **prevent suicides triggered by mental health issues** in prisons across the country.
- There is prevalence of **mental illness and substance use disorder** in about **80% of the prison population**.

#### ◦ For Mental Health Treatment:

- **Prisoners with mental disorders** had to be **regularly assessed** for severity of suicidal risk and also put on regular and supervised medication.
- To address the **prisoner's mental health needs**, the **correctional facility should have links to** community-based initiatives like the **District Mental Health Programme**.

#### ◦ Buddy System for Social Intervention:

- It is a type of social support through trained prisoners called **“buddies” or “listeners”**.
- It was found to have a good impact on the **well-being of suicidal prisoners**. Periodic telephone conversations with friends and family would also foster support.

- **e-Mulakat** is an **online platform enabling relatives/friends/advocates of prisoners to book prior appointments** for interviewing prisoners through the National Prisons Information Portal.

### ▪ Need:

- Indian prisons face **three long-standing structural constraints**: Overcrowding, Understaffing and underfunding and violent clashes.
- The **Prison Statistics India 2016**, published by the **[National Crime Records Bureau \(NCRB\)](#)** in 2019 highlights the plight of prisoners in India.

- **Under-trial Population**: India's under-trial population remains among the highest in the world. At the end of 2016, there were 4,33,033 people in prison, of whom

68% were undertrials.

- The high proportion of undertrials in the overall prison population **may be the result of unnecessary arrests and ineffective legal aid** during remand hearings.
- [Covid-19](#) also led to suspension of trials and delay in court hearings.
- **People Held Under Preventive Detention:** There is a rise in the number of people held under administrative (or 'prevention') detention laws in Jammu and Kashmir.
  - A 300% increase, with 431 detainees in 2016, compared to 90 in 2015.
  - Administrative, or 'preventive', detention is used by authorities to detain persons without charge or trial and circumvent regular criminal justice procedures.
- **Unawareness about Section 436A of C.R.P.C.:** There is a gap between the number of prisoners eligible to be released and actually released, under Section 436A of the Code of Criminal Procedure.
  - **Section 436A of C.R.P.C** allows undertrials **to be released on a personal bond if they have undergone half of the maximum term** of imprisonment they would have faced if convicted.
- **Unnatural Deaths in Prison:** The number of "unnatural" deaths in prisons has doubled between 2015 and 2016, from 115 to 231.
  - The rate of suicide among prisoners also increased by 28%, from 77 suicides in 2015 to 102 in 2016.
  - The [National Human Rights Commission \(NHRC\)](#) in 2014 had stated that on average, a person is one-and-a-half times more likely to commit suicide in prison than outside. This is a possible indicator of the magnitude of mental health concerns within Indian prisons.
- **Lack of Mental Health Professionals:** There was only one mental health professional for every 21,650 prisoners in 2016, with only six States and one Union Territory having psychologists /psychiatrists.
  - Also, the NCRB had said that about 6,013 individuals with mental illness were in jail in 2016.
  - As per the Prison Act, 1894 and Prisoner Act, 1900, there should be a welfare officer and a law officer in each jail but recruitment of these officers is still pending. This state explains the low political and budgetary priority which prisons have received during the preceding century.

## Way Forward

- **Preventing suicide in prison or police lock-ups** is not primarily a **medical matter** but needs **cooperation and coordination from various agencies**.
- There is a necessity for all policing staff to take suicidal behavior as a serious but preventable disorder in a custodial setting as in any other circumstances.
- **Screening the individuals before putting them behind bars, identifying the important risk factors** such as drug and alcohol abuse or mental illness and seeking appropriate medical aid in this regard may reduce the number of such incidents in substantial ways.
- Similarly, the **prison or police lock-up environment** itself may increase suicide risk. Therefore, gradual change in environment may help the individual to adapt with the condition and learn to cope with the problems.

[Source: TH](#)

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