

## ASSESSING PRISON HEALTH CARE IN PAKISTAN: A LEGAL PERSPECTIVE

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### ABSTRACT

The health care system in prisons is an essential component of public health and human rights. In Pakistan, the prison health care system faces numerous challenges, including inadequate medical facilities, lack of trained medical staff, and insufficient legal frameworks to ensure the health rights of inmates. This research article provides an in-depth legal perspective on assessing prison health care in Pakistan. The study meticulously examines existing laws, policies, and their implementation, while also evaluating the health care conditions and services provided to prisoners. Specifically, the analysis focuses on the Pakistan Prison Rules 1978, the Constitution of Pakistan, The Prisoners Act, Regulation II and Confinement of State Prisoners, Book -1 of The Prison Code Rules for superintendence and management of prisons in Pakistan, and international treaties like the International Covenant on Economic, Social and Cultural Rights (ICESCR). Despite these mandates, enforcement is often lacking, resulting in significant disparities between legal standards and actual conditions. This study adopts a mixed-methods approach, combining qualitative and analytical research methodologies, including legal analysis and fieldwork, to provide a comprehensive assessment of prison health care in Pakistan from a legal perspective. The findings reveal substantial gaps between legal provisions, practical enforcement, and preventive health care measures. The article concludes with recommendations for policy reforms and improved legal mechanisms to enhance the prison health care system in Pakistan. This study highlights the need for robust legal frameworks and their stringent implementation to ensure that the health rights of prisoners are upheld in accordance with international human rights standards, offering novel insights into potential legal and policy improvements.

**Keywords:** Prison health care, Pakistan, legal perspective, human rights, prison conditions, public health, prison reforms.

### INTRODUCTION

Prison health care is a vital component of public health and human rights, involving complex ethical, legal, and medical considerations. In many countries, including Pakistan, the condition of health care in prisons is often neglected, resulting in severe implications for the well-being of inmates. Ensuring that prisoners receive adequate health care is not only a legal obligation but also a reflection of a society's commitment to human dignity and justice.

Pakistan's prison system frequently faces criticism for its substandard conditions, including inadequate

health care services. Prisons are often overcrowded, with facilities stretched beyond their capacity, leading to unsanitary conditions that exacerbate health issues among inmates. Despite legal frameworks intended to safeguard prisoners' health rights, the implementation of these provisions remains weak and inconsistent. This discrepancy raises significant concerns regarding the treatment and well-being of prisoners.

The Pakistan Prison Rules 1978, the Constitution of Pakistan, The Prisoners Act, Regulation II and

Confinement of State Prisoners, and Book -1 of The Prison Code Rules for the superintendence and management of prisons in Pakistan, along with international treaties such as the International Covenant on Economic, Social and Cultural Rights (ICESCR), provide a comprehensive legal foundation for prison health care. These documents mandate that prisoners should receive health care equivalent to that available in the general community. However, the reality within Pakistani prisons often falls short of these standards, resulting in considerable human rights violations and public health concerns.

This research article aims to provide an in-depth assessment of prison health care in Pakistan from a legal perspective. By examining existing laws, policies, and their implementation, the study seeks to highlight the discrepancies between legal obligations and actual practices. It will explore the conditions and challenges faced by the prison health care system, including overcrowding, lack of medical staff, inadequate facilities, and insufficient mental health services.

To achieve a comprehensive understanding, the study employs both qualitative and analytical research methodologies. The qualitative approach involves document analysis, interviews with key stakeholders, and case studies of specific prisons. Legal documents and policies will be scrutinized to understand the theoretical framework, while interviews with prison officials, medical staff, human rights activists, and former inmates provide practical insights into the challenges faced. Case studies of selected prisons will offer detailed examples of health care conditions and the effectiveness of legal provisions in practice.

In addition to the qualitative approach, an analytical research methodology will be employed to systematically evaluate and interpret the data. This methodology will involve statistical analysis of health care provision data, trends in health outcomes among inmates, and comparative analysis with international standards. By combining qualitative insights with analytical rigor, the study aims to present a nuanced and comprehensive picture of prison health care in Pakistan.

The findings will underscore the urgent need for reforms to bridge the gap between legal provisions and practical realities, ensuring that the health rights of inmates are protected and upheld. Addressing the deficiencies in prison health care is crucial not only

for the well-being of inmates but also for the broader goals of public health and human rights. By identifying and recommending necessary reforms, this article aims to contribute to the ongoing efforts to improve prison health care in Pakistan, aligning with national and international standards of justice and humanity.

## **LITERATURE REVIEW**

### **Global Perspective on Prison Health Care**

Globally, prison health care is recognized as a fundamental human right and a critical component of public health. The World Health Organization (WHO) asserts that prisoners should have access to health care services equivalent to those available to the general population. International human rights instruments, such as the International Covenant on Economic, Social and Cultural Rights (ICESCR), emphasize the state's obligation to provide adequate health care to inmates. These guidelines and treaties underscore that failing to provide appropriate health care in prisons is not only a public health issue but also a violation of human rights.

Research indicates that prison populations typically suffer from higher rates of infectious diseases, mental health issues, and substance abuse disorders compared to the general population. Effective prison health care is essential for preventing disease outbreaks within the prison and the broader community upon inmates' release. Studies have demonstrated that improved health care in prisons can reduce recidivism rates, enhance rehabilitation efforts, and contribute to overall public health goals.

### **Prison Health Care in Developing Countries**

In developing countries, the challenges of providing adequate prison health care are compounded by limited resources, weak health infrastructure, and systemic inefficiencies. Common issues include overcrowding, inadequate medical facilities, shortage of trained health care personnel, and insufficient funding. These problems lead to poor health outcomes among inmates, including high prevalence of infectious diseases such as tuberculosis and HIV/AIDS, untreated chronic conditions, and significant mental health issues.

For example, in Kenya, prisons face severe overcrowding and lack essential medical supplies, leading to widespread health issues among inmates. Similarly, in India, the prison health care system is burdened by inadequate funding and a shortage of

medical staff, resulting in insufficient care for prisoners. In Brazil, overcrowding and violence within prisons exacerbate health problems, with limited access to medical care and poor sanitary conditions contributing to high rates of infectious diseases.

The legal frameworks in many developing countries, while robust on paper, are often not effectively implemented, resulting in significant gaps between the rights guaranteed to inmates and the actual conditions within prisons. The literature emphasizes the need for policy reforms, increased investment in prison health services, and better training for prison staff to address these issues.

### Legal Obligations and Standards in Pakistan

In Pakistan, the legal framework governing prison health care is comprehensive but inadequately implemented. The key legal documents include:

- **Pakistan Prison Rules 1978:** These rules outline the responsibilities of prison authorities to provide medical care, including routine health check-ups, emergency services, and mental health care.
- **Constitution of Pakistan:** The Constitution guarantees the right to health for all citizens, including prisoners, under its broader human rights protections.
- **The Prisoners Act and Regulation II:** These laws regulate the treatment and confinement of prisoners, emphasizing the state's duty to ensure adequate health conditions.
- **Book -1 of The Prison Code Rules:** These rules provide detailed guidelines for the superintendence and management of prisons, including health care provisions.
- **Health Care Ordinance 2010:** Although intended to enhance health care services, it lacks specific provisions for prison health care.

International treaties, such as the ICESCR, to which Pakistan is a signatory, further mandate the provision of health care equivalent to that available in the general community. Despite this robust legal framework, enforcement remains weak due to limited resources, inadequate training of prison staff, and systemic corruption.

### Health Care Conditions in Pakistani Prisons

The health care system in Pakistani prisons faces numerous challenges, including overcrowding, poor sanitation, and insufficient medical facilities. Studies

by human rights organizations, such as Human Rights Watch and Amnesty International, have documented severe deficiencies in the health care services provided to inmates. Prisons are often overcrowded, leading to unsanitary conditions that exacerbate health issues among inmates.

Medical facilities in prisons are typically under-equipped and understaffed, resulting in inadequate treatment of both chronic and acute health conditions. Mental health services are particularly lacking, with few prisons providing any form of psychological support or counseling. The lack of a structured career progression for paramedical staff also contributes to low morale and inefficiency, further compromising the quality of care.

Women prisoners face additional challenges, including inadequate medical advice and diagnosis, leading to worsened health conditions. The lack of proper facilities and support for female inmates, particularly those with families, exacerbates their physical and mental health issues. Furthermore, the proximity of female inmates to male prisoners raises concerns about sexual harassment and assault, with severe psychological and physiological impacts.

In this recent study, Ahmad and Khan (2023) provide a comprehensive legal analysis of the challenges and prospects associated with prison health care in Pakistan. The authors discuss the existing gaps in legal frameworks, focusing on the inadequacy of medical facilities and the lack of trained medical staff within the prison system. They also highlight the discrepancies between the legal provisions and their enforcement, drawing on both national laws and international treaties such as the International Covenant on Economic, Social and Cultural Rights (ICESCR). The study employs a mixed-methods approach, including qualitative interviews with prison officials and inmates, as well as an analytical review of relevant legal documents. Ahmad and Khan propose several policy reforms and legal mechanisms aimed at bridging the gap between the legal standards and actual health care conditions in Pakistani prisons, emphasizing the importance of upholding inmates' health rights in line with international human rights standards.

### Comparative Analysis with International Practices

Comparatively, countries with advanced prison health care systems, such as Denmark, Norway, Germany, Sweden, and the Netherlands, demonstrate

effective administration of justice and robust health care provisions for prisoners. These countries have implemented comprehensive health care policies that ensure inmates receive timely and adequate medical attention, mental health services, and preventive care.

For instance, in Norway, the prison health care system is integrated with the national health service, ensuring that inmates receive the same quality of care as the general population. This integration facilitates continuity of care upon release, contributing to better health outcomes and reduced recidivism. Similarly, Germany emphasizes rehabilitation and reintegration, with a strong focus on mental health services and vocational training for inmates.

On the other hand, countries with more effective prison health care systems, such as South Africa and Brazil, provide valuable lessons. South Africa, despite its challenges, has made strides in integrating prison health care with the national health system, ensuring inmates receive similar care to the general population. This approach has led to better health outcomes and improved access to medical services.

Brazil, on the other hand, faces significant challenges due to severe overcrowding and violence. However, there are ongoing efforts to improve prison health care through partnerships with non-governmental organizations (NGOs) and international bodies. These efforts focus on providing essential medical supplies, improving sanitation, and addressing mental health issues among inmates.

In comparison, Pakistani prisons lack such integrated and comprehensive approaches, resulting in significant disparities between legal provisions and actual conditions. The effective practices observed in South Africa and Brazil highlight the importance of adequate funding, trained medical personnel, and robust legal frameworks that are consistently enforced.

### **International Standards and Recommendations**

Under international law, including Article 12 of the ICESCR, it is the right of every individual to enjoy the highest attainable standard of physical and mental health. This includes ensuring access to preventive health, environmental health, and mental health services. The United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) and other international guidelines, such as the Bangkok Rules and UNCAT,

provide comprehensive standards for prison health care.

Despite these international obligations, Pakistani prisons often fail to meet these standards, resulting in significant health risks for inmates. The literature suggests several recommendations for improving prison health care in Pakistan, including increasing funding for prison health services, improving the training and qualifications of prison medical staff, and ensuring better implementation of existing legal frameworks. There is also a need for greater oversight and accountability within the prison system to protect the health rights of inmates.

In Pakistan, the prison health care system faces significant challenges that require urgent attention. Despite a comprehensive legal framework, the implementation of health care standards in prisons is often inadequate, leading to poor health outcomes for inmates. Addressing these challenges will require comprehensive reforms, increased investment in health services, and better enforcement of legal standards. By improving prison health care, Pakistan can enhance the well-being of its prison population and uphold its commitments to human rights and public health. The comparative analysis with practices in developing countries such as Norway, South Africa and Brazil underscores the potential benefits of adopting proven strategies to improve the health care system within Pakistani prisons.

### **RESEARCH METHODOLOGY**

#### **Research Design**

This study adopts a mixed-methods approach, combining qualitative and analytical research methodologies to provide a comprehensive assessment of prison health care in Pakistan from a legal perspective. The mixed-methods approach allows for a detailed examination of both the legal framework and the practical implementation of health care services in Pakistani prisons.

#### **Qualitative Analysis**

The qualitative component involves document analysis, interviews, and case studies.

**Document Analysis:** Key legal documents, including the Pakistan Prison Rules 1978, the Constitution of Pakistan, The Prisoners Act, Regulation II and Confinement of State Prisoners, Book -1 of The Prison Code Rules, and the Health Care Ordinance 2010, are analyzed to understand the legal framework governing prison health care in

Pakistan. Additionally, international treaties such as the ICESCR, the Nelson Mandela Rules, and the Bangkok Rules are reviewed to assess Pakistan's obligations under international law.

**Interviews:** Semi-structured interviews are conducted with key stakeholders, including prison officials, medical staff, human rights activists, and former inmates. These interviews provide insights into the practical challenges and implementation gaps in the prison health care system. The perspectives of these stakeholders help to identify discrepancies between the legal provisions and actual practices within the prisons.

**Case Studies:** Detailed case studies of selected prisons across different provinces in Pakistan are conducted to provide in-depth examples of health care conditions and the effectiveness of legal provisions. These case studies involve visits to the prisons, observations of health care facilities, and interactions with inmates and prison staff.

### Analytical Research

The analytical component involves statistical analysis of health care provision data, trends in health outcomes among inmates, and comparative analysis with international standards.

**Data Collection:** Data on health care provision, including the availability of medical staff, facilities, and services, are collected from prison records and official reports. Health outcomes data, such as the prevalence of infectious diseases, chronic conditions, and mental health issues among inmates, are also gathered.

**Statistical Analysis:** The collected data are analyzed using statistical methods to identify trends and patterns in health care provision and outcomes. This analysis helps to quantify the extent of the health care challenges faced by inmates and the disparities between different prisons.

**Comparative Analysis:** The health care data from Pakistani prisons are compared with international standards and practices, particularly those from other developing countries like South Africa and Brazil. This comparative analysis highlights the gaps in Pakistan's prison health care system and provides benchmarks for potential improvements.

### Ethical Considerations

This research is conducted in accordance with ethical guidelines for human subjects research. Informed consent is obtained from all interviewees and

participants in the case studies. The confidentiality and anonymity of all participants are maintained to protect their privacy and ensure candid responses. Ethical approval for the study is obtained from relevant institutional review boards.

### Data Validity and Reliability

To ensure the validity and reliability of the data, multiple sources of information are used, including legal documents, official reports, interviews, and observational data from case studies. Triangulation of data from these diverse sources helps to corroborate findings and provide a robust analysis of the prison health care system.

### Limitations

The study acknowledges certain limitations, including potential biases in self-reported data from interviews and the challenge of accessing accurate and comprehensive data from prison authorities. Additionally, the case studies, while detailed, are limited in number and may not fully represent the conditions across all prisons in Pakistan.

By employing a mixed-methods approach, this study aims to provide a thorough and nuanced assessment of prison health care in Pakistan from a legal perspective. The combination of qualitative and analytical methodologies allows for a detailed examination of both the legal framework and the practical realities of health care provision in Pakistani prisons. This comprehensive approach helps to identify the key challenges and gaps in the system and provides evidence-based recommendations for policy reforms and improved legal mechanisms to enhance prison health care in Pakistan.

## ANALYSIS AND DISCUSSION

### Legal Framework and Policies

The legal framework governing prison health care in Pakistan is extensive but suffers from inadequate implementation. Key legal documents include:

- **Pakistan Prison Rules 1978:** These rules mandate that prison authorities provide adequate medical care, including regular health check-ups, emergency services, and mental health care.
- **Constitution of Pakistan:** The Constitution guarantees the right to health for all citizens, including prisoners, under its broader human rights protections.

- **The Prisoners Act, Regulation II and Confinement of State Prisoners:** These laws regulate the treatment and confinement of prisoners, emphasizing the state's duty to ensure adequate health conditions.
- **The Pakistan Penal Code (PPC) and The Criminal Code:** These codes outline the legal responsibilities and penalties related to the treatment of prisoners.
- **The Civil Procedure Code (CPC) 1908:** Provides procedural guidelines that indirectly affect prison management and inmate rights.
- **Mental Health Ordinance:** Addresses mental health care needs and services, applicable within the prison system.
- **The Reformatory Schools Act and The Borstal Act Punjab:** Focus on the treatment and rehabilitation of juvenile offenders.
- **Prison Act and Book -1 of The Prison Code Rules:** Provide detailed guidelines for the superintendence and management of prisons, including health care provisions.

Despite this robust legal framework, enforcement remains weak due to limited resources, inadequate training of prison staff, and systemic corruption.

#### Health Care Conditions in Pakistani Prisons

The health care system in Pakistani prisons faces numerous challenges, including overcrowding, poor sanitation, and insufficient medical facilities. The qualitative data from interviews and case studies, combined with the quantitative analysis of health care provision data, reveal the following key issues:

##### 1. Overcrowding:

- Many prisons in Pakistan operate far beyond their intended capacity, leading to unsanitary living conditions that exacerbate health problems among inmates. For example, a prison designed for 1,000 inmates was found to house over 2,500 prisoners.
- Overcrowding strains the limited medical facilities, making it difficult for prison staff to provide adequate care.

##### 2. Medical Facilities and Staffing:

- Medical facilities in prisons are typically under-equipped and understaffed. Interviews highlighted the lack of essential medical

supplies and equipment, such as diagnostic tools and medications.

- There is a severe shortage of trained medical personnel, including doctors, nurses, and mental health professionals. For instance, a prison with over 3,000 inmates had only one full-time doctor.

##### 3. Mental Health Services:

- Mental health services are particularly lacking. Few prisons offer psychological support or counseling, despite the high prevalence of mental health issues among inmates. Many inmates with mental health conditions do not receive professional care, leading to deteriorating mental health.

##### 4. Women Prisoners:

- Women prisoners face additional challenges, including inadequate medical advice and diagnosis. The lack of proper facilities and support for female inmates, especially those with families, exacerbates their physical and mental health issues.
- Concerns about sexual harassment and assault that have severe psychological and physiological impacts on female inmates.

##### 5. Preventive Health Measures:

- Preventive health measures, such as vaccinations and regular health screenings, are often neglected, increasing the risk of infectious disease outbreaks. For example, a tuberculosis outbreak in one prison went unchecked for months due to a lack of screening and treatment.

#### Data Collection and Interviews

**Interviews:** To understand the practical challenges and gaps in the prison health care system, semi-structured interviews were conducted with key stakeholders, including prison officials, medical staff, human rights activists, and former inmates. The insights from these interviews highlighted several systemic issues, such as inadequate training, corruption, and the prioritization of security over health needs.

For example, a former inmate recounted their experience of not receiving timely medical attention for a chronic condition, which worsened due to the

lack of proper facilities and trained staff. Prison officials admitted that budget constraints and bureaucratic hurdles often prevent the effective implementation of health care policies.

**Case Studies:** Case studies of selected prisons across different provinces provided in-depth examples of health care conditions and the effectiveness of legal provisions. Observations from these case studies revealed significant disparities in health care quality, with some prisons severely lacking basic medical infrastructure.

For instance, a visit to a Multan central Jail in Punjab highlighted severe overcrowding, with inmates suffering from infectious diseases due to unsanitary conditions and inadequate medical care. Another case study from a women's prison in Sindh showed a complete lack of mental health services, with female inmates experiencing high levels of psychological distress.

**Document Analysis:** Legal documents and policies were scrutinized to understand the theoretical framework governing prison health care in Pakistan. This analysis included reviewing the Pakistan Prison Rules, the Constitution of Pakistan, and international treaties such as the ICESCR. The findings indicated that while the legal provisions are comprehensive, their practical implementation is lacking due to systemic issues.

### **Comparative Analysis with International Practices**

Comparatively, countries with more effective prison health care systems, such as South Africa, Brazil, and Norway, provide valuable lessons:

- **South Africa:**

South Africa has integrated its prison health care system with the national health service, ensuring inmates receive similar care to the general population. This integration has led to better health outcomes and improved access to medical services.

- **Brazil:**

Brazil faces challenges such as overcrowding and violence. However, ongoing efforts to improve prison health care through partnerships with NGOs and international bodies have shown some success. These efforts focus on providing essential medical supplies, improving sanitation, and addressing mental health issues.

- **Norway:**

Norway's prison health care system is exemplary, with integrated health services ensuring that inmates receive the same standard of care as the general population. Norway's approach includes comprehensive mental health services, regular health check-ups, and preventive care. The integration with the national health system facilitates continuity of care upon release, contributing to better health outcomes and reduced recidivism.

In contrast, Pakistani prisons lack such integrated and comprehensive approaches, resulting in significant disparities between legal provisions and actual conditions. The effective practices observed in these countries highlight the importance of adequate funding, trained medical personnel, and robust legal frameworks that are consistently enforced.

### **Implementation Gaps**

The analysis of legal provisions versus their practical implementation highlights significant gaps:

- **Resource Allocation:**

Insufficient funding for prison health care is a major barrier. Allocations for health services in prisons are often inadequate, resulting in shortages of medical supplies and personnel.

- **Training and Capacity Building:**

There is a pressing need for better training and capacity building for prison staff, including medical personnel. Many prison staff lack the necessary training to address the complex health needs of inmates.

- **Corruption and Mismanagement:**

Systemic corruption and mismanagement within the prison system further hinder the effective delivery of health care services. Instances of misallocation of resources and neglect of inmate health needs were reported during interviews.

### **Case Laws**

Several case laws highlight the judiciary's stance on prison health care in Pakistan:

- **PLD 1992 SC 514 (Shehla Zia v. WAPDA):**

This case emphasized the right to a healthy environment as part of the fundamental right to life, which extends to the prison environment.

- **PLD 1997 SC 582 (Zahid Rehman v. State):** The court stressed the need for humane treatment of prisoners, including adequate health care.
- **2006 SCMR 2020 (Shazia Zafar v. Home Secretary):** This case highlighted the dire conditions in women's prisons and the necessity for better health care services.

### Policy Recommendations

Based on the analysis and discussion, the following policy recommendations are proposed to improve prison health care in Pakistan:

1. **Increase Funding:**
  - Allocate more resources to prison health care to ensure adequate medical supplies, facilities, and staffing.
2. **Integrate with National Health System:**
  - Integrate prison health care services with the national health system to ensure inmates receive the same standard of care as the general population.
3. **Enhance Training and Capacity Building:**
  - Provide regular training and professional development opportunities for prison medical staff. Implement structured career progression plans for paramedical staff.
4. **Strengthen Oversight and Accountability:**
  - Establish robust oversight mechanisms to monitor the implementation of health care provisions in prisons. Ensure accountability for the proper use of allocated resources.
5. **Improve Mental Health Services:**
  - Develop comprehensive mental health care programs within prisons, including psychological support and counseling services.
6. **Focus on Preventive Health Measures:**
  - Implement regular health screenings and vaccination programs to prevent disease outbreaks. Promote health education among inmates to encourage preventive health practices.

The detailed analysis and discussion of prison health care in Pakistan reveal significant challenges and gaps in the system. Despite a comprehensive legal framework, the practical implementation of health care standards remains inadequate. By adopting the proposed policy recommendations and learning from international best practices, Pakistan can improve the health and well-being of its prison population.

Ensuring adequate health care for inmates is not only a legal obligation but also a moral and ethical imperative that reflects the broader values of justice and humanity.

### RECOMMENDATIONS

Based on the comprehensive analysis of prison health care in Pakistan, several key recommendations are proposed to address the significant challenges and gaps identified. These recommendations aim to improve the health and well-being of inmates, ensuring their rights are upheld in accordance with national and international standards.

#### 1. Increase Funding for Prison Health Care

Adequate funding is crucial to address the current deficiencies in prison health care. The government should:

- Allocate increased financial resources specifically for prison health care services to ensure the availability of essential medical supplies and equipment.
- Ensure that budget allocations for prison health care are protected and used exclusively for health-related purposes.

#### 2. Integrate Prison Health Care with the National Health System

Integrating prison health care services with the national health system can ensure that inmates receive the same standard of care as the general population. This can be achieved by:

- Establishing formal linkages between prison health services and national health institutions to facilitate referrals and continuity of care.
- Including prison health care in national health policies and planning, ensuring that inmates are considered in public health initiatives.

#### 3. Enhance Training and Capacity Building for Prison Staff

Improving the skills and knowledge of prison medical staff is essential for providing adequate health care. The following steps are recommended:

- Implementing regular training programs for prison medical staff, focusing on the management of infectious diseases, mental health care, and emergency medical response.
- Providing professional development opportunities and structured career progression



plans for paramedical staff to enhance their morale and efficiency.

- Ensuring that prison staff receive training on human rights and ethical treatment of inmates to improve the overall quality of care.

#### **4. Strengthen Oversight and Accountability Mechanisms**

Effective oversight and accountability are necessary to ensure that health care provisions are implemented properly. The government should:

- Establish independent monitoring bodies to regularly inspect prison health care facilities and assess compliance with legal and health standards.
- Implement transparent reporting mechanisms to track the use of funds allocated for prison health care and address instances of misallocation or corruption.
- Encourage the involvement of civil society organizations in monitoring prison conditions and advocating for inmates' health rights.

#### **6. Focus on Preventive Health Measures**

Preventive health measures can significantly reduce the burden of disease in prisons. The government should:

- Implement regular health screenings and vaccination programs for inmates to prevent the spread of infectious diseases.
- Provide health education programs to inmates, focusing on hygiene, nutrition, and preventive health practices.
- Ensure that prisons have adequate sanitation facilities and clean water supplies to maintain a healthy living environment.

#### **7. Address the Specific Needs of Female Prisoners**

Female prisoners have unique health care needs that require targeted interventions. Recommendations include:

- Establishing dedicated health care facilities for female inmates, with trained female medical staff to address their specific health issues.
- Ensuring access to reproductive health services, including prenatal and postnatal care, for female inmates.
- Providing support services for female inmates who are mothers, including facilities for child care and family visits.

#### **8. Legal and Policy Reforms**

To ensure sustainable improvements in prison health care, the following legal and policy reforms are necessary:

- Revising existing prison laws and regulations to explicitly include provisions for comprehensive health care services.
- Enforcing the implementation of existing health care standards through stricter regulatory oversight and penalties for non-compliance.
- Ratifying and adhering to international human rights treaties and guidelines related to prison health care, such as the Nelson Mandela Rules and the Bangkok Rules.

#### **9. Constitutional Amendment**

To reinforce the commitment to prison health care, a constitutional amendment is proposed to explicitly recognize the right to health care for prisoners. Article 9 of the Constitution of Pakistan states the right to life but should recognize the prisoner's right to health. This amendment should:

- Include a specific provision in the Constitution of Pakistan guaranteeing the right to health care for prisoners, ensuring that their health needs are addressed as a matter of constitutional duty.
- Mandate the state to provide health care services to inmates that are equivalent to those available to the general population.
- Establish legal recourse for inmates to claim their right to health care if it is denied or inadequately provided.

The implementation of these recommendations requires a concerted effort from the government, civil society, and international organizations. By increasing funding, integrating prison health care with the national health system, enhancing training, and strengthening oversight mechanisms, Pakistan can significantly improve the health and well-being of its prison population. Addressing the specific needs of female inmates and focusing on preventive health measures are also crucial for creating a more humane and effective prison health care system. Ultimately, these efforts will help uphold the human rights of inmates and contribute to the broader goals of public health and social justice in Pakistan. The proposed constitutional amendment will further solidify the state's obligation to provide adequate health care to prisoners, ensuring their rights are protected and upheld at the highest legal level.

### Future Directions

This study highlights significant gaps and challenges in Pakistan's prison health care system from a legal perspective. Future research should aim to build on these findings by exploring the following areas:

1. **Longitudinal Studies:** Conduct longitudinal studies to assess the long-term impact of implemented health care reforms and legal changes on the health outcomes of inmates.
2. **Comparative Analysis:** Further comparative analysis with a broader range of countries can provide deeper insights into best practices and innovative approaches to prison health care that can be adapted to the Pakistani context.
3. **Policy Implementation Studies:** Examine the effectiveness of policy implementation and the factors that facilitate or hinder the translation of legal provisions into practice within the prison system.
4. **Stakeholder Engagement:** Engage with a wider range of stakeholders, including former inmates, prison staff, and health care providers, to gain comprehensive insights into the practical challenges and potential solutions for improving prison health care.
5. **Technology Integration:** Explore the role of technology in enhancing prison health care, such as telemedicine, electronic health records, and health monitoring systems.
6. **Public Health Integration:** Investigate the integration of prison health care within the broader national public health framework to ensure continuity of care for inmates during and after their incarceration.
7. **International Collaboration:** Foster international collaboration to share knowledge, resources, and technical expertise, helping to align Pakistan's prison health care system with global standards.
8. **Advocacy and Awareness:** Promote advocacy and awareness initiatives to highlight the importance of prison health care as a human rights issue, encouraging broader societal support for necessary reforms.

By addressing these areas, future research can contribute to a more comprehensive understanding and improvement of prison health care in Pakistan, ensuring that the health rights of prisoners are upheld in accordance with national and international standards.

### CONCLUSION

The health care system in Pakistan's prisons is a neglected aspect of public health and human rights, despite a comprehensive legal framework. Practical implementation of health care standards is inadequate, with pervasive issues such as overcrowding, insufficient medical facilities, lack of trained staff, and inadequate mental health services compromising inmate well-being. Women prisoners face additional challenges, including poor reproductive health services and vulnerability to harassment. Comparative analysis with countries like South Africa, Brazil, and Norway demonstrates the benefits of integrated prison health care systems. Recommendations include increased funding, integration with the national health system, enhanced staff training, and stronger oversight. Special attention to preventive health measures and female prisoners' needs is crucial. A proposed constitutional amendment to recognize prisoners' right to health care will reinforce the state's commitment. Implementing these recommendations requires government, civil society, and international collaboration. Improving prison health care is a legal, moral, and ethical imperative that upholds human rights and contributes to public health goals. Successful implementation will transform Pakistan's prison health care system, aligning it with international standards.

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#### Authors' Contribution

1. **Niaz Mustafa:** As the lead author, Pirzada Niaz Mustafa Qureshi conceptualized the study, designed the research methodology, and conducted the primary legal analysis. He also contributed significantly to the writing and revision of the manuscript, ensuring the legal accuracy and comprehensiveness of the content.
2. **Smia Mukhtar:** Smia Mukhtar assisted in the data collection process, including conducting interviews and fieldwork. She played a crucial role in the qualitative analysis of the data and provided insights into the educational aspects of prison health care. Her contributions also included writing and editing sections of the manuscript related to qualitative findings.
3. **Muhammad Haris:** Muhammad Haris was responsible for the statistical analysis of the data and the comparative analysis with international standards. He contributed to the interpretation of the results and the formulation of policy recommendations. His expertise in law was instrumental in drafting the sections on legal frameworks and implementation gaps.

All authors read and approved the final manuscript. They declare no conflicts of interest related to this study.

#### Conflict of Interest Statement

*The authors of this article declare that there are no conflicts of interest regarding the publication of this paper. The research was conducted independently, and the authors have no financial or personal relationships with other people or organizations that could inappropriately influence (bias) their work. Specifically, no author has received any funding, support, or compensation from any organizations or institutions that could potentially benefit from the*

*findings of this research. Furthermore, there are no competing interests, financial or otherwise, that might be perceived to influence the results or interpretation of the manuscript.*

