Prisoners are surrounded by high walls. Therefore, they seldom get fresh air. Moreover, within a small area, a large number of people live together. Most of the prisoners who come to jail are the under-privileged, poverty-stricken and physically and mentally weak and many of them are diseased. During the first few days of their detention, they find it very difficult to adjust themselves to jail-atmosphere. They do not get good food. Prison-diet also does not suit all persons because of food-habits and physical reasons. Prisoners sentenced to rigorous imprisonment have to do hard labour which they are not accustomed to do and as a consequence their health may be affected. Prisoners sentenced to simple imprisonment do nothing. Idleness invites many diseases. Free mixing of prisoners is also not desirable because some of them may carry contagious diseases. Under these circumstances, the health of the prisoner may not be good.

Several Acts relating to prison administration in India have provided for treatment of prisoners who are sick. Before inflicting major punishments, medical advice as regards the health of the prisoner should be taken. Without the advice of the Medical Officer, prisoners should not be put to hard labour. Because, if unhealthy prisoners are put to hard labour, it would have adverse effect upon them.

The Prisons Act, 1870, laid down that when a prisoner becomes sick, the Medical Officer should be reported immediately and steps should be taken by him for the quick
quick recovery of the prisoner. It was also stated in the Act that in every jail an infirmary or proper place for the treatment and reception of sick prisoners should be maintained. Ever since the establishment of jails in Assam provision for the treatment of prisoners was made. Whenever a new prison is established, a medical wing is maintained for the treatment of sick prisoners.

The Jail Commission, 1889, recommended that weak prisoners should be treated properly. It also suggested that the Medical Officer should examine the prisoners thoroughly on their admission so that individual attention may be paid to deserving persons. The Committee also pointed out that the Medical Officer should check the periodical weight of the prisoners personally. It was further suggested that sick prisoners should not be kept outside the jail hospital. Since Malaria was a common disease, the Committee recommended that the Medical Officer should bestow special attention on those who were suffering from Malaria. The Government of Assam implemented the recommendations of the Committee.

The Prisons Act, 1894, also laid down that sick prisoners should be treated carefully and there should be a hospital in each jail for their treatment.

Provision was made for the treatment of sick prisoners in every jail. Accommodation was also provided for them in the hospital.

1. Prisons Act, 1870, Section 42.
3. Prisons Act, 1894, Sec. 39.
Any prisoner suffering from a disease must be taken to the Medical Officer for treatment as an out-patient or as an in-patient. A prisoner may also be brought to the jail hospital for medical observation. Trifling ailments are treated outside the hospital. All prisoners in jails are daily inspected and examined by the Medical Officer. When a prisoner suffers from a dangerous illness, his relatives are informed. When a prisoner dies, the Medical Officer examines the body and certifies the cause of death. If he is in doubt about the death of a prisoner, a post-mortem examination of the body is held by him and he submits a report thereon to the Inspector General of Prisons.

Treatment for purposes other than curative is strictly prohibited. When the Medical Officer finds that a prisoner is malingering, he reports the fact immediately to the Superintendant. Such a prisoner cannot be kept under medical treatment.

Prisoners who are old, infirm and weak constitute the invalid gang. They can be given some light work suited to their strength. They are kept together for the purpose of diet and observation. They can be given special diet on the recommendation of the Medical Officer. Prisoners on discharge from the hospital are put to labour or placed in the invalid gang.

At the time of admission of prisoners into jails, they are vaccinated against small-pox, cholera or other epidemic diseases.

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When epidemics break out in jails effective steps must be taken to control it. In case of outbreak of epidemic in the vicinity of a jail, preventive measures must be taken so that the disease may not spread into the jail. Sometimes camps are established outside for the treatment of prisoners suffering from epidemic diseases.

The bedding and clothing which are used by prisoners of infected wards are either immersed for 30 minutes in boiling water or steeped in weak perchlorid solution. When such clothes are dried they are returned to the prisoners concerned after they have a wash. Hospital clothing and bedding of infected patients are burnt. When a person suffering from an infectious disease dies, his body is entirely wrapped in a sheet saturated with corrosive sublimate solution 1 part to 1000 and buried immediately. Segregation of prisoners on the occurrence of epidemics is also necessary. It has been suggested in the Jail Manual, 1934, that when epidemic breaks out, water should be sterilised. Healthy prisoners are kept under strict observation and any symptom of attack of disease is immediately reported to the Medical Officer. Prisoners suffering from epidemic disease are segregated.

In the case of cholera, when two or three patients are attacked within a week it must be treated as an epidemic disease and every provision must be made for the treatment of such prisoners.

Cholera broke out in most of the district jails during the early period of jail administration and many prisoners

died of this disease, because, in those days proper measures could not be taken for its prevention.

Sanitation in jail buildings - Maintenance of sound sanitary conditions is a very important pre-condition for the sound health of prisoners. The Jail Manual, 1934, specifically said that prisoners should be provided with suitable accommodation as follows.11

Table 10

<table>
<thead>
<tr>
<th>Superficial area per prisoner (square feet)</th>
<th>Cubic capacity per prisoner (cubic feet)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wards</td>
<td>36</td>
</tr>
<tr>
<td>Cells</td>
<td>75</td>
</tr>
<tr>
<td>Hospital</td>
<td>54</td>
</tr>
</tbody>
</table>

This rule has been followed as far as practicable in the jails in Assam. But whenever there is overcrowding, the jail authorities are helpless in giving suitable accommodation to prisoners. From hygienic point of view, suitable accommodation is of utmost importance. At present, prisoners live in unhygienic conditions, because, overcrowding has become a general feature in jails in the present century.12 The Government of Assam seems to be helpless in this regard.

Sleeping wards in jails are well-ventilated. They are kept neat and clean as far as practicable. Wards, cells and hospitals are maintained properly. The interiors of worksheds, cells and wards are whitewashed twice a year. The hospitals

are whitewashed very frequently.

**Conservancy** - Attempts are made to keep the jails clean. Cess-pools and drains cannot be constructed near a jail, so that they may not become the breeding places of malaria. Covered latrines on the dry-earth system are used by the prisoners. Latrines are cleansed frequently. Night-soil or urine is removed from latrines by means of ejectors. In cells and wards also there are receptacles for urine and faecal matter. Night-soil is buried in trenches where land is available for manuring purposes. Every precaution has to be taken so that drinking water is not polluted by night-soil and urine. ¹³

**Water-supply** - Every jail must have adequate quantity of water for drinking, bathing and other purposes. Wells must be periodically cleansed. Water used in different jails is periodically sent for chemical and bacteriological analysis. ¹⁴

In those places, where Municipal boards have protected water supply as in Gauhati, Tezpur and Jorhat, water is carried through pipes to jails. Where there was no protected water supply as in Dibrugarh, tanks, wells and tubewells where the sources of water supply. Generally water that is supplied in jails is fairly good. An attempt is made to supply good water to the prisoners. As a consequence epidemics do not visit jails frequently.

The Jail Committee, 1919-20, recommended certain improvements in the matter of sanitation in jails. The Committee suggested the provision of sufficient latrine accommodation. But the Government of Assam is not able to meet the situation due

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¹⁴. Ibid, Rule 722.
to the increase of jail population. So, the problem remains.

The Government of Assam accepted and executed the suggestion of the Committee regarding the introduction of municipal water-supply in jails where it was possible.

The Committee recommended the trenching system for the disposal of night-soil, but it was inapplicable so far as Assam was concerned, because, it was already there.

The Committee suggested the electrification of jails. This has been done after some delay.

The Committee also suggested the establishment of separate wards for T.B. patients and lepers. These arrangements have been made in bigger jails only.

But most of the jail hospitals are primitive in all respects. As a consequence the medical treatment of prisoners is not satisfactory. In almost all the jails in Assam sick prisoners live in a very deplorable condition. They do not get proper treatment. Many jails do not have full time Medical Officer to look after the sick prisoners. The Indian Jails Committee, 1919-20, recommended that a well-equipped hospital should be established in each jail. But it does not exist anywhere in Assam.

The All India Jail Manual Committee, 1957-59, in its report recommended the provision of certain modern instruments and medicines in hospitals for the treatment of sick prisoners. Though the recommendation was accepted by the Government of Assam, it was not given effect to because of financial difficulties.

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15. Indian Jails Committee Report, 1919-20, paras.310.
Disposal of the dead - Each jail has a burial ground of its own. The body of a prisoner, who dies in jail, is handed over to the relatives of the deceased when there is no objection. The body is buried or cremated, when it is not claimed by the relatives or friends of the deceased. The body must be buried or cremated properly with due rites.

Mortality among jail population - In 1874, 2554 sink prisoners were admitted into the jail hospitals, out of a daily average population of 1207.62. Of these 56 prisoners died. Most of the prisoners died of dysentry and only 5% of cholera. The Districts in the Surma valley were free from epidemics, while cholera and dysentry prevailed in the Districts of Kamrup and Nowgong in the Brahmaputra valley. In 1964, 2532 prisoners were admitted into the jail hospitals out of a daily average jail population of 5395.13. Of them 37 died. The maximum number of prisoners died from dysentry. Thus, it can be concluded that dysentry is a major cause of a large number of deaths in jails. Although jail population has increased to a great extent, there is no corresponding increase in deaths in comparison with the death rate in 1874. This is because of the general improvement of the health of the people in recent years.

In 1900, the health of the prisoners was satisfactory, the ratio of deaths per thousand having fallen to 22.8. This is the lowest on record till 1900. The average annual mortality during 6 years from 1891 to 1896 was 53.16 per thousand and Assam had the highest jail mortality of all provinces. During

the period, 1897 to 1900, the average mortality was 39.02. The Chief Commissioner of Assam Sir Henry Cotton remarked that improvement in the diet and prohibition of the prisoners being employed during the epidemics were primarily responsible for the reduction in the death rate in the jails.  

By eliminating overcrowding and by providing suitable accommodation, proper treatment and improved diet, the death rate of the prisoners in jails can be reduced to a great extent.

Previous occupation of the prisoners: A study of the previous occupation of the convicts during the period, 1916 to 1931, shows that 65 to 70 per-cent of them were engaged in agriculture or breeding of animals, 15 to 20 per-cent were engaged in the maintenance of their personal offices, 2 to 5 per-cent were Government servants and servants of Local self governing authorities. During the period, 1940 to 1957, about 65 percent of the convicts were engaged in agriculture and with the breeding of animals and the rest of them belonged to other professions. In 1964, two-thirds of the convicts were agriculturists. Thus, the agricultural community sends the highest number of the convicts to the jails in Assam. Of course, majority of the people of this State are agriculturists.

Literacy - On the average, 96.50 per-cent of the convicts were illiterate till 1900. Among the literate population, some of them knew how to read only. But there was a slight increase of literate prisoners during the Non-cooperation and the Civil Disobedience Movements. After Independence, the number of

illiterate persons have come down to about 80 per-cent. In 1874, more than 95 per-cent of the convicts were illiterate but in 1964, it was 72.62 per-cent. To sum up, the uneducated and the ignorant constituted the bulk of the prison population. But in recent years the number of educated prisoners has increased.

**Female convicts** - Females constituted a very small minority of the convicts. Only 2 to 5 per-cent of the convicts were females. Most of them were married. Almost all of them were uneducated till 1930. In 1964, 121 convicts were admitted into jails. The rest of the convicts were males. Thus, we may conclude that the number of female convicts is very small in comparison with the male convicts. It is because of the peace-loving nature of women.

**Religion of convicts** - In 1874, 50 to 60 per-cent of the convicts belonged to the Hindu and Sikh communities. About 40 per-cent were Muslims. The Buddhists and the Jains constituted less than one per-cent. The remaining 5 to 7 per-cent belonged to other religious groups. The distribution of prisoners according to their religions was as follows.24

<table>
<thead>
<tr>
<th>Religion</th>
<th>No. in 1874</th>
<th>No. in 1963</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Christians</td>
<td>6</td>
<td>119</td>
</tr>
<tr>
<td>2. Muslims</td>
<td>1150</td>
<td>1914</td>
</tr>
<tr>
<td>3. Hindus &amp; Sikhs</td>
<td>1953</td>
<td>6279</td>
</tr>
<tr>
<td>4. Other classes</td>
<td>216</td>
<td>357</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,965</strong></td>
<td><strong>8,669</strong></td>
</tr>
</tbody>
</table>

In 1964, 64.23 per-cent of the convicts belonged to the Hindu and the Sikh communities. 26.41 per-cent were Muslims, 1.83 per-cent Christians and 7.53 per-cent were Buddhists and Jains.25

Thus, it can be concluded that the Hindus constituted the majority of prison population in Assam since the beginning. Of course, the Hindus constitute the majority of the total population of the State, next being the Muslims.

Age of the convicts - Most of the criminals belong to the age group of 19 to 40. In 1924, 83.89% of the convicts belonged to this group, whereas 15.19 per-cent belonged to the age group of 40 to 60, and 89 per-cent to 60 below.26 Again in 1930, 1.70 per-cent of the convicts belonged to the age group of 16 and below; 19.36 per-cent to the age group of 16/18; 63.40 per-cent to that of 19 to 40 years, 14.59 per-cent to that of 41 to 61 and 68 per-cent convicts were under 60 years of age.27 The age groups of convicts in 1874 and 1963 are given in the following table.28

<table>
<thead>
<tr>
<th>Age group</th>
<th>Number in 1874</th>
<th>Number in 1963</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Under 16 years</td>
<td>52</td>
<td>232</td>
</tr>
<tr>
<td>2. Between 16 to 40 years</td>
<td>2646</td>
<td>7276</td>
</tr>
<tr>
<td>3. Between 40 to 60 years</td>
<td>306</td>
<td>948</td>
</tr>
<tr>
<td>4. Above 60 years</td>
<td>29</td>
<td>213</td>
</tr>
<tr>
<td>Total</td>
<td>3,033</td>
<td>2,661</td>
</tr>
</tbody>
</table>

In 1964, 71.72 per-cent of the convicts belonged to the age group of 22 to 40 years. 11.05 per-cent of the convicts were of the age group of 16 to 21 years.29

From the above it is clear that crimes are committed by matured persons. Both in 1874 and in 1964 a vast majority of the criminals belonged to the age group of 20 to 40 years. Tendency to commit crimes seems to decline at the age of 50. Crime is committed at the prime of age. From this we can conclude that it is not the ignorance of law that was responsible for crime.