The state of our prisons and what this reveals about our society

The annual reports provide analysis and reporting of conditions and statistics, with appropriate noting of severe shortcomings. Inadequate medical care was a critical factor in Steve Biko’s death, and we need to ask why in our current democracy, even with recognition of the complexity of the challenges facing healthcare in the public sector, prison healthcare services have declined in quality rather than improved. It should be conceded that after considerable advocacy, more effort has been made to provide effective medications for TB and HIV/AIDS, both of which are infectious and eminently treatable. However, only nurses with primary healthcare experience are permitted to give antiretroviral treatment, and these comprise less than 25% of a total of 800 professional nurses in the employ of Correctional Services. On any given day it has been noted that there are 21 000 inmates who are HIV-positive, yet less than half of the inmates serving a sentence in excess of 5 years increased from 49% in 1998 to 67% in 2008/2009, delays in trials are increased (30% of inmates are still awaiting trial), and rehabilitation is ignored.

The system of inspection by the Inspecting Judge in SA is clearly beneficial and the annual reports provide analysis and reporting of conditions and statistics, with appropriate noting of severe shortcomings. Inadequate medical care was a critical factor in Steve Biko’s death, and we need to ask why in our current democracy, even with recognition of the complexity of the challenges facing healthcare in the public sector, prison healthcare services have declined in quality rather than improved. It should be conceded that after considerable advocacy, more effort has been made to provide effective medications for TB and HIV/AIDS, both of which are infectious and eminently treatable. However, only nurses with primary healthcare experience are permitted to give antiretroviral treatment, and these comprise less than 25% of a total of 800 professional nurses in the employ of Correctional Services. On any given day it has been noted that there are 21 000 inmates who are HIV-positive, yet less than half of the country’s HIV-positive inmates receive antiretroviral treatment.

The present reality of continued mistreatment of prisoners by authorities who are meant to protect them could perhaps be changed if the medical profession would work through appropriate channels.
to influence Correctional Services to improve medical care and rehabilitation. From 2006 to 2008, attempts were made by a small group of health professionals at the University of Cape Town to engage in such an effort with the support of Judge Fagan, then Judge of Prisons. The South African Medical Association (SAMA) was persuaded that its intervention as an influential medical body could effect some changes. Arrangements were made for representatives of the small group concerned, together with senior members of SAMA, to meet with the Minister of Correctional Services and his representatives. At two meetings reassurances were given that these issues would receive significant attention. Regrettably, and despite many subsequent communications with SAMA, this agenda has not been pursued.

The Africa Watch Prison Project group was approached to repeat its previous study, but also failed to respond. Several other international organisations that were incensed about conditions in our prisons during the apartheid era are seemingly no longer interested – perhaps because there has been a reduction in respect for civil rights and healthcare rights of prisoners in their own societies, as exemplified by continuing detention without trial and brutalising forced-feeding at Guantanamo Bay,[12] and the recent reports of violence and brutality on Rikers Island.[13,4] A report from the Institute of Medicine reveals the involvement of US physicians in torture.[15] It is notable from the death in 1977 and the SA of today.[19] Helen Zille, who exposed Biko’s death when she was a journalist, it was noted that the absence of mental healthcare in prisons is ratification of the United Nations agreement on torture. In addition, unnatural deaths, may even have increased), despite our country’s shock treatment is specified) in SA prisons continues (and, like Guantanamo Bay,[12] and the recent reports of violence and brutality continuing detention without trial and brutalising forced-feeding at Guantanamo Bay,[12] and the recent reports of violence and brutality on Rikers Island.[13,4] A report from the Institute of Medicine reveals the involvement of US physicians in torture.[15] It is notable from the death in 1977 and the SA of today.[19]

Despite recent investigations by the SA Human Rights Commission at the Groenpunt Prison, conditions in our prisons have not had a significant public profile.[17] In relation to health and human dignity in our prisons and to recently exposed excesses of police brutality,[18] our society has at best become inattentive and at worst complacent. Helen Zille, who exposed Biko’s death when she was a journalist, notes a striking commonality between the SA at the time of Biko’s death in 1977 and the SA of today.[19]

As noted almost a decade ago in the columns of this journal: ‘... the whole correctional service process, from police to judicial system to prisons, provides an image of the social and psychological health of our society’.[20] If the way a country treats prisoners, and those not yet convicted of crimes, is a measure of its civilisation and a marker of its vigilance over professional activities, we must surely be found wanting in our responses to crime and the responsibilities of our correctional services. These shortcomings mirror many other failures, now increasingly well documented, in a society with the potential and aspiration to do so much better.[21]

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