

The Plight of Female Prisoners in Nigeria and the Dilemma of Health Rights Violations

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ABSTRACT

Female prisoners make up about two percent of the inmates population in Nigeria. Furthermore, the recidivism rate among women culprits has been on the rise in recent times. Yet, the society rarely pays attention to these unique characteristics of inmates that are incarcerated. The Nigeria prison, as in other parts of the world, is characterized by inhumane conditions and overcrowding, leading to a deplorable health situation among inmates. The problems with the provision of quality of care to inmates include the inadequacy of healthcare personnel, facilities and systems, lack of healthcare policies and standard operating procedures, corruption in the criminal justice system, and bureaucratic bottleneck. To ensure an uninterrupted and quality healthcare system among prisoners, there is need for policy makers to re-evaluate the present healthcare policy by facilitating easy access to medical facility for every patient, including prisoners. The article x-rayed and discussed some of the main challenges faced by female inmates in terms of health and other social issues, and suggests possible solutions.

Keywords: Inmates, healthcare, overcrowding, deplorable, and challenges

INTRODUCTION

Women and children in Nigeria prisons across the country are plagued with several concerns ranging from minors serving jail time or awaiting trial parallel to adult detainees in the same prison facilities. Besides, the plight of female inmates is more disturbing as some of them serve with pregnancies while nursing mothers are incarcerated alongside their babies. According to Agbaegbu (2011), the problem of prison congestion in Nigeria rests primarily with the courts and the slow judicial system. Courts have refused to speed up the trial processes, thereby keeping suspects indefinitely in jail without trials. Agbaegbu (2011) Laments that “the country is confronted with a tragic situation bordering on human rights violation, caused by the slow judicial process in the country. Nigeria, arguably, has the highest number of awaiting trial detainees in Africa (Egba, 2011). A situation where over 70 per cent of prison inmates are on the awaiting trial list is unacceptable.

The state of prisons in Nigeria is nothing to write home about, as most of them are like dungeons with inhuman conditions hardly tolerable even for condemned criminals. Feeding and healthcare system are poor, largely due to corrupt dealings involving dishonest contractors who take advantage of the system, usually in collaboration with officials (Aduba, 1993). Of the about five hundred naira allowance earmarked for a prisoner per day, only about one hundred naira is actually spent (Agbaegbu, 2011). Therefore, it is not uncommon to find prisoners looking starved, while some have literally turned into living skeletons. Moreover, sanitary conditions in Nigeria prisons are repulsive, resulting in frequent illnesses

and deaths of inmates. Most inmates are infested with skin rashes, while some women have their children inside the prisons. The condition of the prisons is simply alarming. With this history, it is not surprising that the country is seen as uncaring when it comes to prisoners (Aduba, 1993). The time has come for a review of the entire criminal justice system so as to bring the country to sameness with the rest of the civilized world.

Female prisoners have needs that differ greatly from those of their male counterparts. However, there are relatively no gender specific programs in place to meet the needs of women in the Nigeria criminal justice system (Agbaegbu, 2011). Besides, many of these female inmates are also responsible for their young children whose interests are often overlooked by the society while their mothers serve jail time. The criminal justice system in Nigeria is riddled with corruption, delays in justice dispensation, and sometimes downright denials of justice. Access to justice is still denied to a good number of people, especially the poor.

In his influential paper on “Crime and Crime Control in Nigeria, Odekunle (1981), noted that the current criminal justice system cannot control crime because it is designed to punish the poor and the underprivileged members of the society. Odekunle (1981) argued that the privileged break the laws and get away with them because they are connected to those in power who can easily come to their rescue while the poor is left to rot in jail. In July 2007, delegates from Amnesty International visited about 10 prisons across the country, including one psychiatrist hospital and conducted interviews with both staff and inmates. At the end of their visit, they made recommendations based on their findings and observations on how the prison system can be improved nation-wide. However, the Nigeria government failed to implement any of their recommendations, prompting the Amnesty International to conclude that Nigeria government does not take seriously its responsibility towards its citizens serving in prison (Nigeria Prison Report, 2008).

The Nigerian criminal justice system can improve the lives of prison inmates by providing accessible healthcare, by building more prison facilities to accommodate the rising populations of prison inmates, and by providing security to both staff and inmates of prisons.

Women Prison Health Problems in Nigeria

What comes to mind readily to the general public when discussing prison world-wide, including Nigeria is overcrowding. It is true that the numbers of female prisoners are very few in comparison to male population. However, because the female prison population is growing at an alarming rate, coupled with their peculiar nature, there is need for prison officials to look at the conditions and needs of female inmates especially the issues that can impact their health negatively. Moreover, even though many of these conditions and issues are similar to those found in all-male prison facilities, female inmates do have certain needs that must be confronted and addressed by correctional administrators and the government.

Several studies have been conducted to address the issues of women in prisons and their health needs all over the world, including the United States, Europe, and Nigeria (Durosaro, 2002; Ramsbotham, 2004; Kitinger, 2003). For example, findings from a World Health Organization research titled *Women’s Health in Prisons: Correcting Gender Inequity in Prison Health* and involved women’s prisons in Europe and the United States in 2012 revealed that majority of female inmates are there for non-violent crimes such as shoplifting, drug-related, and petty theft. Moreover, the results also showed that the prevalence of mental illness in prisons is much higher for women than in men. Other problems of women in prisons points to the fact that the number of women giving birth in prisons has jumped significantly, and that not all prison facilities are equipped or prepared to handle a growing

baby population. Besides, it is not uncommon for women in prison to discover that they are both pregnant and HIV infected (Durosaro, 2002; Ramsbotham, 2004; Kitzinger, 2003; Watson et al, 2004). Therefore, there is a much greater need for adequate nutrition and exercise for female prisoners, especially for those who are pregnant. Additionally, there is also a need for the provision of thorough hygiene and cleanliness standards throughout prison facilities in Nigeria.

The plight of female prisoners in Nigeria is deplorable as most of them are exposed to other dangers, besides health issues. Majority of them are deprived of their freedom. Moreover, their situation is compounded by frequent sexual abuse and harassment in the hand of male warders (Durosaro, 2002). Also, because of the frequent harassment by male officers, some of them become pregnant and give birth while still being incarcerated, a situation that have further worsened their health problems in the form of insomnia, depression, and illnesses (Durosaro, 2002; Ramsbotham, 2004). According to Parkinson (2003), nothing is more terrifying for female prisoners than going through labor alone with little or no support system. The situation, according to Parkinson (2003) creates both emotional and psychological trauma for the pregnant female prisoner, coupled with the misgivings and uncertainty about whether they can keep their babies.

The problems of female prisoners in Nigeria, as well as in other parts of the world are further complicated by the lives they lived before coming to prison (Parkinson, 2003). Because of their gender, most of them come to prison unprepared and with different sets of problems. For example, they are separated from their children and spouses, some of them have mental and physical health problems, most have been sexually abused, some lack educational backgrounds, and are faced with unsafe prison environment (Kizinger, 2003). Life after incarceration is another problem of female prisoners internationally. Even though some male inmates are exposed to the same or similar predicament, the dilemma of female prisoners are unique and differ significantly in terms of its impact within and outside prison walls (Solanski, 2004; Parkinson, 2003). Most of the female prisoners in Nigeria are poor, uneducated, and held in filthy prison environments that is devoid of the basic sanitary products such as sanitary towels, toiletries, and soaps (Sakaya, n.d.). In Zimbabwe, for instance, it was reported that female inmates used newspapers, tissues, pieces of blankets, and sometimes prison uniforms as alternatives to sanitary towels. In South Africa, it was also reported that prison officials demand to see evidence of soiled sanitary towels before issuing another (Sakaya, n.d.).

In Nigeria, most of the toiletries used by inmates are provided by non-governmental and religious organization which is a problem for the female prisoners who might be nursing mothers or pregnant (Hassan, 2010). Hassan (2010) noted that the government has failed to provide welfare for inmates, adding that without the support of nongovernmental and religious organizations that provides free counseling, foods, and clothing to inmates, the situation would have been worse. The situation in Nigeria prisons is in sharp contrast with those of developed countries where friends of inmates can visit and even stay overnight; where inmates have access to vocational and educational programs, as well as access to good healthcare and decent feeding (Solanski, 2004). Furthermore, Solanski (2004) cites one of the largest prisons in the United Kingdom – HM Holloway prison in London, which was opened in 1852, first as a mixed prison, but became a female prison only in 1903, as an embodiment of prison environment where inmates are allowed to stay with their children and are provided with adequate healthcare and social services system (Narey, 2000).

When juxtaposed with other members of the society, prisoners suffer numerous health issues in prison. A study by Watson et al (2004) revealed that some of the health problems inmates suffer in prisons includes; substance abuse, communicable diseases, and mental health related issues that has also been observed among Nigerian prison inmates (Adesanya et al., 1997; Agbahowe et al., 1998). Research point to the fact that majority of prison inmates are mothers who have children that are below 18 (Brewer, Burgess, & Shults, 2004; Greene & Pranis, 2006). Equally worrisome is the fact that the responsibility of raising these children rests squarely on these inmates who are separated from their children during incarceration. Besides, prison in most countries of the world make an effort to put inmates within a reasonable distance from their homes. However, the reverse is the case in Nigeria where female prisoners are far more likely to be incarcerated far away from their homes because of the few female prisons in the country (Adesanya et al, 1997). This makes visitations by friends and family members more difficult.

Finally, in addition to sexual assault, rape, and abuse by prison warders, female inmates rarely receive standard medical services. In Nigeria, most prisons do not offer health services such as mammograms, CAT scan, MRI, and pelvic examinations that are needed exclusively by women. Additionally, prenatal care are rarely given and most of the time, pregnant women remain shackled during labor, causing excessive bleedings and pains, as well as brain damage to the baby (Egba, 2011; Agbaegbu, 2011). The problems facing inmates in Nigeria prisons are man – made, caused by all components of the criminal justice system, i.e., the police, courts, and corrections. Therefore, the police should stop the arbitrary arrests of people, especially those with minor offenses such as wandering, petty thieves, and civil disorders. Arresting people without trials amount to abuse of human rights and should not be accepted as normal by the actors in the criminal justice system. Likewise, the judiciary must pursue an aggressive and faster dispensation of justice to solve the problem of prison overcrowding.

LITERATURE REVIEW

The sociological angle to the study of prisons and prisoners world-over has been confined primarily to male inmates, with the female inmates relegated to the background. Furthermore, the general healthcare delivery problem in Nigeria has placed the health of prisoners in danger. The perception that female inmates are more affected by mental illnesses than their male counterparts has been documented by several authors (Scheffler, 1986; Staley, 2005; Women in Prison Project, 2006). According to Staley (2005) women are more likely to be classified as needing mental health services than their male counterparts. Consequently, some studies have also confirmed that inmates with mental illnesses are likely to pose major problems to correctional officers and staff than inmates without mental health issues (Hilton and Simmons, 2000; Hoptman et al., 1999). The findings from these studies are relevant in providing a blues print for a major overhaul of the correctional healthcare system in Nigeria.

Treatment programs offered to women in prisons have been explored and the results revealed that these programs have shifted from the goals of restoring moral virtue to a fallen woman, to one of providing therapy for the mentally ill (Silberman, 2007). This suggests that women prisoners were no longer considered to be morally depraved; instead, they are now seen as victims of patriarchal institutions, sexually abused and beaten as a child and a victim of sexual assault and domestic violence as adults (Siberman, 2007). In their study, Gray, et al (1995) found that incarcerated female inmates had a variety of specific needs to which the prison authority failed to respond to.

A study by Zazitow (2004) uncovered a hidden form of oppression of social control techniques of incarcerated women in the United States. Zazitow (2004) noted that even

though the facilities appear attractive and the procedures seem lenient, suppression in women's facilities are just as strong as in men's. Zazitow (2004) pointed out that "conditions in women's facilities are often worse than in men's and that women's services and programming are often restricted" (p. 38). Moreover, she observed that women prisoners are treated as "wayward children," (p. 40) whereas men are afforded adult status. For example, "women are often subjected to even heavier surveillance than men, they are sanctioned for more minor infractions, and their schedules are more closely regulated" (p.40).

A study of the prevalence of sexually transmitted diseases among prison population, including Nigeria has been documented (Okochi et al, 1991; Potts, 2000; Adesanya et al, 1997). Although, HIV/AIDS is attracting and gaining attention from researchers, this does not preclude the fact that there are no other communicable diseases among prison inmates such as sexually transmitted diseases. On their part, Okochi, et al (1991) carried out a study on sexually transmitted diseases in Agodi Prison, Ibadan, Nigeria. The results showed that both inmates - males and females engage in risky sexual behaviors which may further aggravate the further spread of HIV/AIDS in prisons. In supporting the findings of Okochi et al, (1991), a study by Potts (2000) revealed that sexually transmitted diseases among inmates are 20 times greater than that of the general population.

Effects of Incarceration on Female Inmates

Relevant and accurate research data on female inmates in Nigeria prison system are scarce. This insufficiency indicates that researchers should focus more on the plight of female incarcerations in Nigeria. Most of the research on prison populations has been based on male inmates where most of the funding has been directed. This may be because the male inmates' populations by far outnumber those of the females. The second reason why there is dearth of research among female prisoners could be that they do not cause as many problems as their male counterparts (Flanagan, 1980). The implication of the neglect and inequity in attention between male and female prisoners has led to a lack of educational opportunities, vocational, social, and personal growth for female inmates when compared with those available in male prisons (Santos, 1995). It is essential that we critically examine the effects that incarceration has on female inmates if we are to reduce recidivism among released inmates who have spent many years in prison.

Deprivation

One of the long term impacts of imprisonment on female inmates is deprivation of freedom. Since incarceration and imprisonment entails a curtailment of movements, freedom, and many other basic rights, deprivation is a common feature of being incarcerated. Sabbath and Cowles (1992) conducted a study on the impact of long term incarcerations on inmates. The results revealed that most of the problems for long term imprisonment included travel distance for loved ones, privacy during visitation, overcrowding in prisons, and lack of privacy within the prison environment. These problems point to the various forms of deprivation found within the prison system which is also applicable to the inmates in Nigerian prisons. In a related study Flanagan (1980) conducted a study among prison inmates where he identified about 5 forms of deprivations which inmates encounter while in incarcerations and these include; missing somebody, missing social life, worrying about how they will cope when released, a feeling that their lives are being wasted, and feeling sexually frustrated. Furthermore, when the inmates were asked to describe the most important problems encountered in prison, they mentioned loss of relationships, friends, and family ties (Flanagan, 1980).

Similarly, a 1990 Federal Task Force on federally sentenced women in Canada who were interviewed on the impact of long incarceration reported that some of the effects incarcerations had on them include; intense pain and anxiety caused by the separation from their children, their sense of powerlessness when their children are placed in foster homes, costs of telephone calls to their loved ones, and inability to maintain contact outside of prison as some of the factors affecting their prison lives.

Low Self Esteem

Other impacts of incarcerations on female inmates include low self-esteem. Because many were poorly educated and unemployed before incarceration, coupled with being victims of sexual and physical abuse, their life circumstances and experiences, along with feelings of shame and guilt, alienation, and confusion caused by their arrests and sentences by the justice system have combined to produce a feeling of low self-esteem among female prisoners (Task Force on Federally Sentenced Women, 1990). Low self-esteem diminishes a woman's worth and increases self-destructive behaviors such as slashing themselves with razors and knives or other sharp objects (Task Force on Federally Sentenced Women, 1990). Moreover, few training and support programs are available to these prisoners upon incarceration, thereby limiting their choices. Likewise, many female prisoners have described how the various rules and regulations from prison authorities have humiliated their personality and dignity and contributed to their sense of powerlessness (Heney, 1990; Task Force on Federally Sentenced Women, 1990).

Loss of liberty

Another effect of incarceration among women prisoners is loss of personal liberty. For those inmates who are serving time in jail, the loss of personal liberty can have serious effects of their mental health. When inmates are cut off from their relatives, children, friends, and loved ones, it could lead to pain and frustration in the form of boredom and loneliness. Studies on the effects of prolonged solitary confinement on female prisoners showed that it is detrimental to the mental and emotional health of inmates (Cormier and Williams, 1966; Grassian, 1983) as cited in Bonta and Gendreau (1990). It has been argued by mental health experts that solitary confinement amounts to psychological punishments for inmates (Weinstein, 1998, p. 2). In an interview with CNN, Dr. Henry Weinstein stated that "solitary confinements and extreme isolations of prisoners results in various psychological symptoms such as memory loss, anxiety, hallucinations, and delusion" (CNN, 1998, P. 2).

Loss of Security

Other impact of long term incarcerations of female inmates is loss of security. Because these inmates serve together with other inmates with history of violent and aggressive behaviors, they are stripped of their privacy and security which comes from living among people who hardly abide by the rules of society (Sykes, 1966). Additionally, there is the personal security of contacting the dreaded HIV virus from other inmates through sexual activity, unhygienic tattoo practices, syringe sharing, and the injection of intravenous drugs (Correctional Service of Canada, 1998).

Loss of Sexual Relationship

In addition to low self-esteem, deprivation, loss of security and liberty, other effects of incarcerations among prisoners is loss of heterosexual relationships. Loss of sexual relationships creates frustrations and results in pervasive sexual behaviors such as masturbation, homosexuality, and lesbianism among inmates (Sykes, 1966). Genders and Player (1990) conducted a study among female prisoners in a British institution on the impact

of loss of heterosexual relations while being incarcerated. The results revealed that "considerable consternation was expressed by the women about the lack of "normal contact" with men and the implication of such deprivation for their future sexual relationships" (1990, p. 124). The loss of sexual relationships has a profound impact on both male and female prisoners which could pose a huge issue after release from prison. In the incoming years, the unprecedented impact of imprisonment will be visible in the society that will be expected to receive these ex-convicts who will complete their sentences and return home with the psychological trauma and disorder that life in prison have created for them.

DISCUSSION AND RECOMMENDATIONS

The needs of female prisoners have received little or no attention, and continued to be neglected by the government and prison authorities. Perhaps, one of the reasons is the fact they are in the minority among prison population all over the world. It was only recently that women's health became an issue within the criminal justice system. Being in the minority among prison population does not mean they do not have some basic rights, which includes the right to basic healthcare facilities within the prison system. There are about 100,000 women and girls, representing about 4.4 % in prisons in Europe alone (Walmsley, 2006). Moreover, as of March, 2014, there were about 1,089, representing about 2 % in Nigeria prison (Nigeria Prison Service, 2014).

Many women in prison serve a short sentence and are often imprisoned for non-violent, property, and drug related offenses. They often come from poor background and experience problems such as drug and alcohol dependencies, infectious diseases, and physical and sexual abuse. High rates of mental and health problems such as post-traumatic stress disorder, depression, anxiety, and a tendency to self-harm and suicide have been reported (Bastik & Townhead, 2008; Walmsley, 2006; Brenda et al, 2009). Additionally, female inmates are confronted with medical neglect, sexual coercion and abuse in detention facilities by prison workers (Brenda et al, 2009).

Although, many countries have their own methods of addressing the special needs of women within the criminal justice system, it is clear that the present efforts and arrangements for dealing with women and meeting their special needs in prison falls short of the criteria set forth by human rights in international circle. It is therefore recommended that there is the need for prison authorities to establish more counseling centers with well-trained prison counselors who will work with female inmates with a view of ensuring that their physical, mental, emotional, health needs are met (Bloomberg & Lucken, 2000). These counselors will also act as liaison between prison authorities and the government on one hand, and the inmates on the other by creating an avenue for discussion, seminars, and forum where the inmates can express their needs. Second, it is high time the criminal justice system sought for alternative ways of punishing female offenders. Imprisonments should be the last resort, especially for inmates with minor offences such petty thieves, loitering, alcohol abuse, domestic violence, and others offenses that are considered non-threatening. Perhaps, this is the time for the justice system to embrace the restorative justice system that emphasizes and considers crime and wrongdoing to be an offense against an individual or community rather than a law that was broken, and is best accomplished through cooperative processes that include all stakeholders, i.e. the victim, the offender, and the community.

Finally, there is need for government and other stakeholders in the prison system to work hard in providing and improving the prison system health care by ensuring that female inmates' basic hygiene needs are met. There should be adequate provisions of simple hygiene

products, coupled with good healthcare facilities, not only to take care of female prisoners, but male inmates as well.

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