

**Training Manual of Basic Course
for
Medical Officer/Psychiatrist
(One-Month)
2022**



**Bureau of Police Research and Development
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महानिदेशक

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Message

Capacity Building of the prison staff is one of the key components of Prison Reforms. This equips the Prison Officers and Staff with the essential knowledge, skills and attitude to diligently discharge their duties in varied and complex areas related to Prisons and Correctional Administration. The MHA has mandated the BPR&D to prepare Training Manuals which can be circulated to all States and UTs for training purposes.

Services of 11 Individual Consultants with subject matter expertise were hired in 2021 to prepare the 50 Prison Training Manuals for various categories of Staff in Prisons. Numerous rounds of stakeholder consultations were held to finalize the drafts. The Manuals have adopted the contemporary principles of training and learning for indoor and outdoor classes, field visits and practical sessions and these have been prepared in compliance with the national and international best practices, the laws of the land, and the technological advancements in Prisons & Correctional Administration. The drafts were also uploaded on the BPR&D website for inviting suggestions/feedback from the stakeholders and citizens.

I extend my special appreciation to the 11 Individual Consultants, the Special Consultant (Master Trainer, DoPT) and the members of the Monitoring Committee who were instrumental in the preparation of these 50 Prison Training Manuals.

I am sanguine that these Manuals will bring about standardization of the training procedures and contents to a large extent and also facilitate capacity building of the Officers and Staff of the Prisons and Correctional Administration in the country.

(Balaji Srivastava)

"Promoting Good Practices and Standards"

"Promoting Good Practices and Standards"

Patron

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WEEK-1

Learning Unit (LU)

MODULE-1	Prison and Correctional Administration
MODULE -2	Prison Health Care services – An Overview

WEEK-2

MODULE -3	Medical and Healthcare Administration in Prisons
MODULE -4	Cleanliness and Hygienic Administration
MODULE -5	Correctional Wing in Prison Administration

WEEK-3

MODULE -6	Correctional Programs in Prisons
MODULE -7	Criminal Law – An Overview
MODULE -8	Prisoner with Special Needs
MODULE -9	Suicide and Prevention

WEEK-4

MODULE -10	Stress management
MODULE -11	Personality Development

PART – C

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Emergence of the Course

The BPR&D has prepared 50 Prison Training Manuals for various ranks of Staff and Officers in Prison Administration under the categories viz., 05 Basic Courses, 08 In-Service Courses, 30 Specialized Courses, 02 Vertical Interaction Courses and 05 Handbooks for improving the quality and standardizing training of all Prison Officers and Staff across the country and to augment professional competency and capacity building of Prison Officers and Staff.

These Prison Training Manuals are objective oriented, learner centric and are outcome of several brainstorming sessions, consultative meetings (Online and Offline) and workshops for conceptualizing the drafts. Comments of the Monitoring Committee, Reports of Training Needs Analysis (TNA) for Prisons & Correctional Administration, National Training Policy (2012) have also been taken into account. In addition, various national and international practices, MHA Advisories, Landmark Judgements of the Apex Court and the High Courts, Statutory Acts/Rules have also been referred to in course of preparation of these training manuals. The design perspective of the Department of Personnel & Training, Government of India, has been adopted.

Introduction

The reformation of prison inmates requires a conducive environment – an environment characterized by good order, where a set of rules and regulations governs the daily lives of prisoners, where routines are established, and where prisoners do not fear for their personal safety. The sound health (physical and mental) of inmates is important for their reformation.

The objective of this one-month Basic Course for Medical Officer/Psychiatrists to impart knowledge and skills to the Medical officer/Psychiatrist about Prisons and Correctional Administration, Medical and Healthcare systems in Prisons.

The Manual which has eleven learning units, explains the role and responsibilities of medical officer / psychiatrist in a prison set-up.



COURSE GUIDE

BASIC COURSE
for
Medical officer/Psychiatrists
(One Month)

COURSE GUIDE

INTRODUCTION

Organizations need to continuously grow, and develop and must be prepared to face the ever-merging challenges. The Prison Department and the role of Prison Officers is no exception to this. Training is an instrument to help the Prison Administration in meeting the twin challenges of continuous improvement and demands of change.

AIM OF THE COURSE

To impart knowledge and skills about Prisons and Correctional Administration, Medical and Healthcare systems in Prisons

DESIGNED FOR

Medical officer, Psychiatrist

FACILITATORS

In-House, Guest Faculty. The Guest Faculty can include serving/retired Senior Prison Officers, Medical officers, Legal experts, Management experts, Technology experts, and Psychologists.

STYLE OF THE COURSE

This course is encompassing a series of practical learning activities. The Course is delivered through multiple media, styles, and activities with a ‘self-directed learning approach’ simulated by the use of field-based situations and sharing of best practices in prison management. Therefore, participants are expected to take responsibility, both for their own learning and in helping the development of other participants. Participants will be encouraged to share their learning experience with others, and to give and receive support and feedback.

OBJECTIVES

Module 1: Prison and Correctional Administration

Training Objectives:

At the end of the training, the participants will be able to:

- 1.1 Explain the origin and important legislations
- 1.2 Explain the organization of prison institutions and their structure
- 1.3 Explain the procedures followed during admission and classification of prisoners
- 1.4 Explain the prison security and custodial management
- 1.5 Explain the emergency situations in prisons
- 1.6 Explain the medical and health care administration in prisons

Unit – 1.1

Training Objective

Explain the origin and important legislations

Enabling Objectives

- 1.1.1 Explain the origin and development of prisons
- 1.1.2 State the Prisons and Prisoners Act

Unit – 1.2

Training Objective

Explain the organization of prison institutions and their structure

Enabling Objectives

- 1.2.1 Explain the organization of prison institutions in the state
- 1.2.2 Describe the key hierarchy of the officers
- 1.2.3 Discuss the importance of public relations and coordination with other departments.

Unit – 1.3

Training Objective

Explain the procedures followed during admission and classification of prisoners

Enabling Objectives

- 1.3.1 Explain the procedures followed during admission of prisoners
- 1.3.2 List the major categorization of prisoners
- 1.3.3 Describe the regular activities of prisoners

Unit – 1.4

Training Objective

Explain the prison security and custodial management

Enabling Objectives

- 1.4.1 Explain the aspects of prison security
- 1.4.2 Analyse the importance of discipline in prisons
- 1.4.3 State prison offences and punishments

Unit – 1.5

Training Objective

Explain the emergency situations in prison

Enabling Objective

- 1.5.1 Explain the general situations of crises/emergencies in prisons
- 1.5.2 Describe the medical emergencies in prisons

Unit – 1.6

Training Objective

Explain the Medical and Health care Administration in prisons

Enabling Objectives

1.6.1 Explain the medical service and healthcare in prison settings

1.6.2 Describe the roles and responsibilities of the medical staff

Module 2: Prison Health Care Services – An Overview

Training Objectives:

At the end of the training, the participants will be able to:

2.1 Explain prison health care services

2.2 Explain the key components of health care services

2.3 Explain the common health problems in prisons

2.4 Explain the medical ethics to be followed

2.5 Explain the health of staff and wellness

Unit – 2.1

Training Objective

Explain Prison Health care Services

Enabling Objectives

2.1.1 Explain the Prison health care

2.1.2 Describe the United Nations Standard Minimum Rules for the Treatment of Prisoners

Unit – 2.2

Training Objective

Explain the key components of health care services

Enabling Objectives

2.2.1 Explain the essential components of prison health care services

Unit – 2.3

Training Objective

Explain the health problems in prisons

Enabling Objectives

2.3.1 Explain the physical and mental health problems

2.3.2 List the co-occurring problems

Unit – 2.4

Training Objective

Explain the medical ethics in prisons

Enabling Objectives

2.4.1 Explain the medical ethics in prison health care

2.4.2 State the ethics to be followed in prisons

Unit – 2.5

Training Objective

Explain the health of staff and wellness

Enabling Objectives

2.5.1 Explain the risk factors and stress among prison staff

2.5.2 Identify supportive programs to prevent disease and promote health

2.5.3 Describe health resilience

Module 3: Medical and Healthcare Administration in Prisons

Training Objectives:

At the end of the training, the participants will be able to:

3.1 Explain the duties of a medical officer

3.2 Explain the psychological and psychiatric services in prisons

3.3 Explain the communicable/infectious diseases in prisons

3.4 Explain the welfare activities related to health

Unit – 3.1

Training Objective

Explain the duties of medical officer

Enabling Objectives

3.1.1 Explain the roles and responsibilities of medical officer

3.1.2 List the records and registers to be maintained

Unit – 3.2

Training Objective

Explain the psychological and psychiatric services in prisons

Enabling Objectives

3.2.1 Explain the psychological and psychiatric services in prisons

3.2.2 Identify the challenges while dealing with mental health issues

3.2.3 List training programs to sensitize the staff and inmates

Unit – 3.3

Training Objective

Explain the communicable/infectious diseases in prisons

Enabling Objectives

3.3.1 Explain the communicable diseases in prisons

3.3.2 Discuss the prevention and treatment methods

Unit – 3.4

Training Objective

Explain the welfare activities related to health

Enabling Objectives

3.4.1 Explain the welfare activities related to health

3.4.2 List the training, awareness and therapy programs

Module 4: Cleanliness and Hygienic Administration

Training Objectives:

At the end of the training, the participants will be able to:

- 4.1 Explain the Standard norms for hygiene in prison
- 4.2 Explain personal hygiene and hygiene of cells
- 4.3 Explain the water supply and hygiene
- 4.4 Explain the design of the kitchen and hygiene
- 4.5 Explain cleanliness and hygiene

Unit – 4.1

Training Objective

Explain the Standard norms for hygiene in prisons

Enabling Objectives

- 4.1.1 Define cleanliness and hygiene
- 4.1.2 Describe the committees associated with the maintenance of cleanliness and hygiene

Unit – 4.2

Training Objective

Explain personal hygiene and hygiene of cells

Enabling Objectives

- 4.2.1 Explain personal hygiene and its importance
- 4.2.2 Describe the components of personal and hygiene of cells

Unit – 4.3

Training Objective

Explain the water supply system and hygiene

Enabling Objectives

4.3.1 Explain the water supply system and hygiene

4.3.2 Describe the wastewater management system

Unit – 4.4

Training Objective

Explain the design of the kitchen and hygiene

Enabling Objectives

4.4.1 Explain the infrastructure of the kitchen and hygiene

4.4.2 State the energy saving techniques

Unit – 4.5

Training Objective

Explain cleanliness and hygiene

Enabling Objectives

4.5.1 Explain cleanliness and hygiene in the correctional settings

4.5.2 Discuss hygiene in washrooms, latrines/septic tanks and management of medical waste

Module 5: Correctional Wing in Prison Administration

Training Objectives:

At the end of the training, the participants will be able to:

5.1 Explain the concept of corrections

5.2 Explain the correctional staff and their duties

5.3 Explain the impact of corrections

5.4 Explain the challenges in corrections

Unit – 5.1

Training Objective

Explain the concept of corrections

Enabling Objectives

5.1.1 Explain the concept and goals of correction

5.1.2 Discuss the role of prison in correction and crime prevention

Unit – 5.2

Training Objective

Explain the correctional staff and their duties

Enabling Objectives

5.2.1 Explain the correctional staff and their roles and responsibilities

5.2.2 Describe the role of correctional staff in the rehabilitation process

Unit – 5.3

Training Objective

Explain the impact of corrections

Enabling Objectives

5.3.1 Describe the impact of corrections

Unit – 5.4

Training Objective

Explain the challenges in corrections

Enabling Objectives

5.4.1 Identify the challenges which are obstacles to correction

5.4.2 Describe the strategies to overcome the challenges

Module 6: Correctional Programs in Prisons

Training Objectives:

At the end of the training, the participants will be able to:

6.1 Explain the correctional/rehabilitation programs in prisons

6.2 Explain how prisoners' contact with the outside world

6.3 Explain the restorative justice system

6.4 Explain open prisons

6.5 Explain aftercare services

Unit – 6.1

Training Objective

Explain the correctional/rehabilitation programs in prisons

Enabling Objectives

6.1.1 Explain the ongoing reformation programs in Indian prisons.

6.1.2 Describe the best practices at the national and international level

Unit – 6.2

Training Objective

Explain how prisoners' contact with the outside world

Enabling Objectives

6.2.1 Explain the forms of contacts and their importance of it

Unit – 6.3

Training Objective

Explain the restorative justice system

Enabling Objectives

6.3.1 Explain the restorative justice system

6.3.2 State some restorative justice programs

Unit – 6.4

Training Objective

Explain open prisons

Enabling Objectives

6.4.1 Explain the nature and importance of open prisons

6.4.2 Describe the types of open prisons and open-air camp

Unit – 6.5

Training Objective

Explain the concept of aftercare services

Enabling Objectives

6.5.1 Explain the need and effectiveness of aftercare services

6.5.2 Describe the Discharged Prisoner's Aid Society

Module 7: Criminal Law – An Overview

Training Objectives:

At the end of the training, the participants will be able to:

7.1 Explain the basics of Criminal Law

Unit – 7.1

Training Objective

Explain the basics of Criminal Law

Enabling Objectives

7.1.1 Explain the concept of criminal law

7.1.2 State how offences are classified

7.1.4 Describe the Mental Health Act, 2017

Module 8: Prisoner with Special needs

Training Objectives:

At the end of the training, the participants will be able to:

8.1 Explain the need of prisoners with special needs

Unit – 8.1

Training Objective

Explain the need of prisoners with special needs

Enabling Objectives

8.1.1 Explain the UNODC: Handbook on Prisoners with Special Needs

8.1.2 List the categories of prisoners

8.1.3 Identify the needs and challenges

Module 9: Suicide and Prevention

Training Objectives:

At the end of the training, the participants will be able to:

9.1 Explain the concept of suicide in prisons

9.2 Explain the self-harm behaviour among prisoners

9.3 Explain the risk and protective factors

9.4 Explain the warning signs and symptoms of suicide in correctional settings

9.5 Explain the suicide prevention plan in prison

Unit – 9.1

Training Objective

Explain the concept of suicide in prisons

Enabling Objectives

9.1.1 Explain suicide in prisons

9.1.2 Describe the Stress-vulnerability model

Unit – 9.2

Training Objective

Explain the self-harm behaviour among prisoners

Enabling Objectives

9.2.1 Describe the basics of self-harm behaviour

9.2.2 Explain ways to prevent self-harm behaviour

9.2.3 Describe the concept of Non-suicidal self-injury

Unit – 9.3

Training Objective

Explain the risk and protective factors

Enabling Objectives

9.3.1 Explain factors that are for and against suicide

Unit – 9.4

Training Objective

Explain the warning signs and symptoms of suicide in correctional settings

Enabling Objectives

9.4.1 List the signs and symptoms to identify the prisoners having ideation/intent to commit suicide

Unit – 9.5

Training Objective

Explain the suicide prevention plan in prisons

Enabling Objectives

9.5.1 Explain the steps to prevent suicide in correctional settings

Module 10: Stress Management

Training Objectives:

At the end of the training, the participants will be able to:

10.1 Explain the concept of stress

10.2 Explain the signs and symptoms of stress

10.3 Explain the impact of stress on personal and professional life

10.4 Explain the stress management techniques

10.5 Explain relaxation techniques

Unit – 10.1

Training Objective

Explain the concept of stress

Enabling Objectives

10.1.1 Explain the concept, and importance of stress

10.1.2 Describe the sources of stress

Unit – 10.2

Training Objective

Explain the signs and symptoms of stress

Enabling Objectives

10.2.1 List the signs and symptoms of stress

Unit – 10.3

Training Objective

Explain the impact of stress in personal and professional life

Enabling Objectives

10.3.1 Explain the effects of stress and the way it affects the day-to-day life activities

Unit – 10.4

Training Objective

Explain the stress management techniques

Enabling Objectives

10.4.1 Explain how to cope with the stress in a healthy way and approach problems proactively

10.4.2 Describe some therapeutic techniques

Unit – 10.5

Training Objective

Explain relaxation techniques

Enabling Objectives

10.5.1 Explain the relaxation techniques to combat everyday stress

10.5.2 Demonstrate the techniques to bring the body and mind back into balance.

Module – 11: Personality Development

Training Objective

11. 1 Explain Personality and other factors related to Personality

Enabling Objectives

11.1.1 Explain the personality and how it develops

11.1.2 Describe attitude and its impact

11.1.3 Explain Emotional Intelligence

11.1.4 Describe Conflict Resolution

ASSESSMENT

The priority during the Course is to assist participants to develop their skills. Assessment is, therefore, concerned with informal feedback and advice to individual participants.

TIME TABLE

Week – 1

DAY/TIME	CONTENT	OBJECTIVES
DAY-1		
1000-1115	Registration Inauguration of the Course Ice Breaking Session & Ground Rules Course Objectives and Expectations of participants	
1130-1245	- Origin and development of prisons	1.1.1
1400 -1500	-Prison Act, 1894 - The Prisoners Act, 1900	1.1.2
1515 - 1615	- Types of prisons -Organisational structure	1.2.1 1.2.2
DAY-2		
1000-1115	- Importance of public relations and coordination with other departments	1.2.3
1130-1245	- Admission procedures	1.3.1
1400 -1500	- Method of classification	1.3.2
1515 - 1615	- Daily routine of prisoners	1.3.3
DAY-3		
1000-1115	- Prison Security - Physical - Procedural - Dynamic - Prison discipline	1.4.1 1.4.2
1130-1245	- Types of offences and punishments - General situations of crises/emergencies in prisons - Escapes - Riot - Outbreaks - Fire - Hunger - Strikes - Agitations, etc	1.4.3 1.5.1

1400 -1500	- Medical emergencies in prisons -Depression -Suicides - Death - Communicable diseases - Epidemic - Accidents, etc.	1.5.2
1515 - 1615	- Overview of the medical/ health services	1.6.1
DAY- 4		
1000-1115	-Roles and responsibilities of the medical team	1.6.2
1130-1245	- Purpose and features of healthcare	2.1.1
1400 -1500	- United Nations Standard Minimum Rules for the Treatment of Prisoners -Basic principles -Functions -Importance	2.1.2
1515 -1615	- Essential components of health care services - Medical care - Health protection & promotion - Health resilience	2.2.1
DAY- 5		
1000-1115	- Physical and mental health problems - Communicable diseases - Medical disorder - Mental illness, etc.	2.3.1
1130-1245	- Co-occurring problems -Self-harm behaviour -Personality issues -Stress, etc.	2.3.2
1400 -1500	- Medical ethics in prison health care - Basic principles - Characteristics	2.4.1
1515 - 1615	-Ethics to be followed in correctional settings - Risk factors and stress among prison staff	2.4.2 2.5.1
DAY- 6		

	Field Visit: Central Prison, Special Prison for Women	
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WEEK – 2

DAY/TIME	CONTENT	OBJECTIVES
DAY-1		
1000-1115	- Supportive programs for prevention of disease and promotion of health - Concept and importance of Health Resilience	2.5.2 2.5.3
1130-1245	- Roles and responsibilities of Medical Officer	3.1.1
1400 -1500	-Types of records and registers	3.1.2
1515 - 1615	- Mental health care in correctional settings	3.2.1
DAY-2		
1000-1115	- Challenges in dealing with mental health issues	3.2.2
1130-1245	- Training programs to sensitize the staff and Inmates	3.2.3
1400 -1500	- Communicable/infectious diseases in prisons	3.3.1
1515 - 1615	- Prevention and treatment methods	3.3.2
DAY-3		
1000-1115	- Welfare Activities for the promotion of health - Listing awareness, and therapy programs	3.4.1 3.4.2
1130-1245	- Cleanliness and hygiene - Concept - Purpose - Importance	4.1.1
1400 -1500	- Committees associated with the maintenance of hygiene and cleanliness	4.1.2
1515 - 1615	- Personal hygiene and its importance	4.2.1
DAY- 4		
1000-1115	- Components in personal and hygiene of cells -Clothing -Bedding -Lighting -Ventilation	4.2.2

	-Living space	
1130-1245	- Water supply system and hygiene	4.3.1
1400 -1500	- Wastewater management system	4.3.2
1515 - 1615	- Infrastructure of the kitchen and hygiene	4.4.1
DAY- 5		
1000-1115	- Energy-saving techniques	4.4.2
	- Cleanliness and hygiene in correctional settings	4.5.1
1130-1245	- Cleanliness and Hygiene - Latrine/ Washroom - Septic tank - Management of Medical waste	4.5.2
1400 -1500	- Concept and goals of correction	5.1.1
1515 - 1615	- Role of prisons in correction and crime prevention	5.1.2
DAY- 6		
	Field Visit: Mental Health Institute Counselling Centre, De-addiction centre	

WEEK – 3

DAY/TIME	CONTENT	OBJECTIVES
DAY-1		
1000-1115	- Correctional staff and their duties	5.2.1
1130-1245	- Correctional staff and rehabilitation process	5.2.2
1400 -1500	- Impact of correction - Challenges in Correction	5.3.1 5.4.1
1515 - 1615	-Methods to overcome the challenges	5.4.2
DAY-2		
1000-1115	- Correctional/Rehabilitation Programs	6.1.1
1130-1245	- Best practices at the national and international	6.1.2

	Level	
1400 -1500	- Prisoners' Contact with the Outside World - Forms of contact: Letter, Telephone, Interview - Importance	6.2.1
1515 - 1615	- Restorative Justice Program - Introduction - Different types of programs	6.3.1
DAY-3		
1000-1115	- Open Prisons - Nature - Importance -Types of open prisons	6.4.1 6.4.2
1130-1245	- After care services - Nature - Effectiveness - Discharged Prisoner's Aid Society - Concept - Purpose	6.5.1 6.5.2
1400 -1500	- Criminal law - Concepts - Elements - CRPC, IPC, IEA	7.1.1
1515 - 1615	-Classification of offences	7.1.2
DAY- 4		
1000-1115	- Mental Health Act 2017 - Salient features	7.1.3
1130-1245	- UNODC: Handbook on Prisoners with Special Needs - Salient features	8.1.1
1400 -1500	- UNODC: Handbook on Prisoners with Special Needs (Contd...) - Categories of prisoners and their concepts – 1 - Women - Habitual - Death-sentenced - Elderly	8.1.2
1515 - 1615	- Categories of prisoners and their concepts – 2	8.1.2

	- Adolescents - Drug addicts - Mentally ill - Terminal illness and disabilities - Transgenders	
DAY- 5		
1000-1115	- Needs of the different categories of prisoners	8.1.3
1130-1245	- Challenges of the different categories of prisoners	8.1.3
1400 -1500	- Suicide in prisons - Suicide - Crisis situation - Prison environment - Stress-vulnerability model	9.1.1 9.1.2
1515 – 1615	- Self-harm behaviour: Brief overview - Ways to prevent self-harm behaviour	9.2.1 9.2.2
DAY- 6		
	Field Visit: Prisoners Ward in General Hospital, NGOs working for prisoners and their children	

Week – 4

DAY/TIME	CONTENT	OBJECTIVES
DAY-1		
1000-1115	- Non suicidal self-injury -Nature -Characteristics - Suicide: Risk Factors - Situational triggers - Vulnerability - Prison-induced stress - Mental illness - Substance use - Past suicide attempts, etc	9.2.3 9.3.1
1130-1245	- Suicide: Protective factors - Family support and contact	9.3.1

	- Education - Job in prison, Future plan, etc.	
1400 -1500	- Signs and symptoms to identify the prisoners having ideation/intent to commit suicide	9.4.1
1515 - 1615	- Steps to prevent suicide in correctional settings	9.5.1
DAY-2		
1000-1115	- Steps to prevent suicide in correctional settings (Contd...)	9.5.1
1130-1245	- Stress	10.1.1
	- Concept - Importance - Sources of stress	10.1.2
1400 -1500	- Signs and symptoms of stress - Physical - Mental - Emotional - Cognitive - Behavioral	10.2.1
1515 - 1615	- Stress factors affecting regular activities	10.3.1
DAY-3		
1000-1115	- Stress factors affecting regular activities (Contd..) - Stress coping mechanism	10.3.1 10.4.1
1130-1245	- Healthy ways of coping	10.4.1
1400 -1500	- Therapeutic techniques	10.4.2
1515 - 1615	Field Visit Report: Presentation	
DAY- 4		
1000-1115	- Relaxation techniques – 1 - Concept and importance - Jacobson Progressive Muscle Relaxation - Benson Relaxation Response	10.5.1
1130-1245	- Relaxation techniques – 2 - Guided Imagery Meditation - Body Scan Meditation - Mindfulness Meditation	10.5.2
1400 -1500	- Personality: Nature and types	11.1.1

1515 - 1615	- Attitude and its impact	11.1.2
DAY- 5		
1000-1115	- Emotional Intelligence: Concept, key attributes	11.1.3
1130-1245	- Effective Communication	11.1.4
1400 -1500	Feedback, Evaluation	
1515 - 1615	Valediction and Certificate distribution	
Course Ends		

Note:

Session - I	1000 – 1115
Session - II	1130 – 1245
Session - III	1400 – 1500
Session - IV	1515 – 1615
P.T.	0600 – 0645
Parade	0700 – 0745
Library	0915 - 0945
Yoga/Meditation/Sports	1645 – 1800
Tea	1115 – 1130
	1500 – 1515
Breakfast	0800 – 0845
Lunch	1245 – 1400
Dinner	1930 – 2100

**BASIC COURSE
for
Medical Officers/Psychiatrists
(One Month)**



TRAINER GUIDE

INTRODUCTION

The ‘Trainer Guide’ is a comprehensive overview of the content and process of the Course. It is designed in a structured format that presents the assembled information and the planned activities with learning outcomes. Trainer Guide serves as a “Map” for sequential implementation of various content segments.

The Trainer Guide also:

- Helps continuous recall;
- Provides scope for storing illustrations, faculty questions, anticipated participants questions and appropriate responses
- Contains details of points for briefing & debriefing of case study, exercises, Films, etc.
- Serves as a reminder to administer exercises; and
- Guides on the use of media

Pre-Course Preparation

1. Get an idea on number and list of participants from the course coordinator
2. Resource Kit, Name plates, Name badges of participants,
3. Photocopies of Handout, exercises for participants should be kept separately and distributed before the session.
4. Brief introduction about Resource Persons / Guest Speakers
5. Permissions for field visit to prison

For Trainer

- a. Trainer Guide
- b. Glossary of Terms
- c. References

For Participants

- Course Guide
- Handouts, Checklists, Exercises
- MCQs

WEEK/DAY-WISE TIME TABLE

Week – 1

Time	Content	Remarks
DAY – 1		
1000 - 1015	Registration	Registration form-1 and Distribute Course Guide to participants
1015 - 1045	Inauguration	
1045 – 1115	Session -I: Ice–Breaking Session and Course Objectives Detailed Introduction Name, Designation, Years of Service, Place of Posting	Ice-Breaking Activity Name Tags and Name Plates of Participants. They should get to know each other.
1115 - 1130	Tea Break	
1130 - 1245	Session- I: Origin and development of prisons	
1245 - 1400	Lunch	
1400 - 1500	Session-IV: Prisons Act, 1894 The Prisoners Act, 1900	Distribute HO – 1
1500 – 1515	Tea Break	
1515 - 1615	Session- V: Types of prisons Organisational structure	Distribute HO – 2 Distribute HO – 3
DAY – 2		
1000 – 1115	Session- I: Importance of public relations and coordination with other departments	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Admission procedures	Observe during prison visit
1245 - 1400	Lunch	
1400 - 1500	Session- III: Method of classification	Distribute HO – 4

1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Daily routine of prisoners	
DAY – 3		
1000 – 1115	Session- I: Prison Security Prison Discipline	Distribute HO – 5
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Types of offences and punishments General situations of crises/emergencies in prisons	Video show
1245 - 1400	Lunch	
1400 - 1500	Session- III: Medical emergencies in prisons	Invite senior medical officer as a resource person
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Overview of the medical/ health services	
DAY – 4		
1000 – 1115	Session- I: Purpose and features of healthcare	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Handling Epidemics: Methods to sensitize inmates	Group Discussion
1245 - 1400	Lunch	
1400 - 1500	Session- III: United Nations Standard Minimum Rules for the Treatment of Prisoners	Distribute HO-6
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Essential components of health care services	
DAY – 5		
1000 – 1115	Session- I: Physical and mental health problems	Distribute HO-7
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Co-occurring problems	Invite senior medical officer as

		a resource person
1245 - 1400	Lunch	
1400 - 1500	Session- III: Medical ethics in prison health care	Distribute HO-8
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Ethics to be followed in correctional settings Risk factors and stress among prison staff	Group Discussion
DAY – 6		
	Field Visit: Central Prison, Special Prison for Women	Distribute Field visit format

WEEK– 2

Time	Content	Remarks
DAY – 1		
1045 – 1115	Session -I: Panel Discussion: Supportive programs for prevention of disease and promotion of health Health Resilience: Article Analysis	The article link should be shared earlier
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Roles and responsibilities of Medical Officer	Refer to Model Prison Manual,2016
1245 - 1400	Lunch	
1400 - 1500	Session-III: Types of records and registers	CL – 1
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Mental health care in correctional settings	
DAY – 2		
1000 – 1115	Session- I: Challenges in dealing with mental health issues	
1115 - 1130	Tea Break	

1130 - 1245	Session- II: Training programs to sensitize the staff and inmates	Group Session
1245 - 1400	Lunch	
1400 - 1500	Session- III: Communicable/infectious diseases in prisons	
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Panel Discussion: Prevention and treatment methods	
DAY – 3		
1000 – 1115	Session- I: Welfare Activities for the promotion of health Listing awareness, and therapy programs	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Cleanliness and hygiene	
1245 - 1400	Lunch	
1400 - 1500	Session- III: Committees associated with the maintenance of hygiene and cleanliness	Distribute HO – 9
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Personal hygiene and its importance	Group Discussion
DAY – 4		
1000 – 1115	Session- I: Components in personal and hygiene of cells	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Water supply system and hygiene	Distribute HO – 10
1245 - 1400	Lunch	
1400 - 1500	Session- III: Wastewater management system	
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: The infrastructure of the kitchen and hygiene	Prison visit
DAY – 5		
1000 – 1115	Session- I: Energy-saving techniques	

	Cleanliness and hygiene in correctional settings	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Discussion: Reporting the death of a prisoner and the legal process	CL – 1
1245 - 1400	Lunch	
1400 - 1500	Session- III: Concept and goals of correction	Distribute HO – 11
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Prison’s role in correction and crime prevention	
DAY – 6		
	Field Visit: Mental Health Institute Counselling centre/De-addiction Centre	Distribute Field visit format

Week – 3

Time	Content	Remarks
DAY – 1		
1045 – 1115	Session -I: Correctional staff and their duties	Refer to Model Prison Manual,2016
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Correctional staff and rehabilitation process	Interaction with Correctional staff
1245 - 1400	Lunch	
1400 - 1500	Session-III: Impact of correction Challenges in Correction	Discussion with the article
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Methods to overcome the challenges	Brainstorming
DAY – 2		
1000 – 1115	Session- I: Correctional/Rehabilitation Programs	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Best practices at the national and	Distribute HO – 12

	international level	
1245 - 1400	Lunch	
1400 - 1500	Session- III: Prisoners' Contact with Outside World	
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Restorative Justice Program	
DAY – 3		
1000 – 1115	Session- I: Open Prisons	Video show
1115 - 1130	Tea Break	
1130 - 1245	Session- II: After care services Discharged Prisoner's Aid Society	Distribute HO – 13
1245 - 1400	Lunch	
1400 - 1500	Session- III: Criminal law	
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Classification of offences	Distribute HO – 14
DAY – 4		
1000 – 1115	Session- I: Mental Health Act, 2017	Distribute HO – 15
1115 - 1130	Tea Break	
1130 - 1245	Session- II: UNODC: Handbook on Prisoners with Special Needs	Distribute HO – 16
1245 - 1400	Lunch	
1400 - 1500	Session- III: Categories of prisoners and their concepts – 1	
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Categories of prisoners and their concepts – 2	
DAY – 5		
1000 – 1115	Session- I: Needs of the different categories of prisoners	Invite Prison officer as a resource person
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Challenges of the different categories of prisoners	

1245 - 1400	Lunch	
1400 - 1500	Session- III: Suicide in prisons Stress-vulnerability model	Distribute HO – 17 Distribute HO – 18
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Self-harm behaviour: Brief overview Ways to prevent self-harm behaviour	Group Discussion
DAY – 6		
	Field Visit: Prisoners Ward in General Hospital NGOs working for prisoners and their children	Distribute Field visit format

Week – 4

Time	Content	Remarks
DAY – 1		
1045 – 1115	Session -I: Non suicidal self-injury Suicide: Risk Factors	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Suicide: Protective Factors	
1245 - 1400	Lunch	
1400 - 1500	Session-III: Signs and symptoms to identify the prisoners having ideation/intent to commit suicide	Invite Correctional psychologist as a resource person
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Steps to prevent suicide in correctional settings	Brainstorming
DAY – 2		
1000 – 1115	Session- I: Steps to prevent suicide in correctional settings	
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Stress Sources of stress	Group Discussion

1245 - 1400	Lunch	
1400 - 1500	Session- III: Signs and symptoms of stress	
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Stress factors affecting regular activities	
DAY – 3		
1000 – 1115	Session- I: Stress factors affecting regular activities Stress coping mechanism	Distribute HO – 19
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Healthy ways of coping	Role Play
1245 - 1400	Lunch	
1400 - 1500	Session- III: Therapeutic techniques	
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Field Visit Report: Presentation	
DAY – 4		
1000 – 1115	Session- I: Relaxation techniques – 1	Distribute HO – 20
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Relaxation techniques – 2	
1245 - 1400	Lunch	
1400 - 1500	Session- III: Personality: Nature and types	Distribute HO – 21
1500 – 1515	Tea Break	
1515 - 1615	Session- IV: Attitude and its impact	Distribute HO – 22
DAY – 5		
1000 – 1115	Session- I: Emotional Intelligence	Distribute HO-23 Video show
1115 - 1130	Tea Break	
1130 - 1245	Session- II: Conflict Resolution	Distribute HO – 24
1245 - 1400	Lunch	

1400 - 1500	Feedback, Evaluation	
1500 – 1515	Tea Break	
1515 - 1615	Valediction and Certificate distribution	

The Course coordinator should compile the feedback of the participants and submit to the Head of the Training Institute.

End of Course

PART – B

COURSE GRID

LEARNING EVENT

COURSE GRID

COURSE GRID

COURSE GRID

01	Prison and Correctional Administration	02	Prison Health Care Services	03	Medical and Health Care Administration in Prisons
04	Cleanliness and Hygienic Administration	05	Correctional Wing in Prison Administration	06	Correctional Programmes in Prison
07	Criminal Law – An overview	08	Prisoners with Special needs	09	Suicide and Prevention
10	Stress and Management	11	Personality Development		Field visits

LEARNING EVENT
BASIC COURSE
for
MEDICAL OFFICER/PSYCHIATRIST
(ONE-MONTH)

Module 1: Prison and Correctional Administration

LEARNING EVENT

Unit	1.1						
Learning Unit	Prison and its evolution						
Training Objective	At the end of the training, participants will be able to explain the origin and important legislation						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
1.1.1 Explain the origin and development of prisons	- Ancient - Medieval - Modern	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
1.1.2 State the Prison and Prisoners Act	- The Prison Act, 1894 - The Prisoners Act, 1900	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	1.2						
Learning Unit	Organization of Prison Institutions						
Training Objective	At the end of the training, participants will be able to explain the organisation of prison institutions and their structure						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
1.2.1 Explain the organisation of prison institutions in the state	- Types of prisons - Prison training institutes	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		
1.2.2 Describe the hierarchy of officers	Organisational structure	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house		
1.2.3 Discuss the importance of public relations and coordination with other departments	Co-ordination with other departments	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house		

LEARNING EVENT

Unit	1.3						
Learning Unit	Admissions, Classification, and Daily Routine of Prisoners						
Training Objective	At the end of the training, participants will be able to explain the procedures followed in admissions and the classification of prisoners						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
1.3.1 Explain the procedures followed during the admission of prisoners.	Admission procedures	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house	Model Prison Manual 2016	
1.3.2 List the major categorisation of prisoners	Method of classification	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		
1.3.3 Describe the regular activities of prisoners	Daily routine of prisoners	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house	Model Prison Manual 2016	Q/A

LEARNING EVENT

Unit	1.4						
Learning Unit	Security, Discipline, and Custodial Management						
Training Objective	At the end of the training, participants will be able to explain the prison security and custodial management.						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
1.4.1 Explain the aspects of prison security	- Physical - Procedural - Dynamic	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house		Q/A
1.4.2 Analyse the importance of discipline in prisons	Prison discipline	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		
1.4.3 State prison offences and punishments	Types of offences and punishments	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house	Model Prison Manual 2016	

LEARNING EVENT

Unit	1.5						
Learning Unit	Emergencies in Prisons						
Training Objective	At the end of the training, participants will be able to explain the emergency situations in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
1.5.1 Explain the general situations of crises/emergencies in prisons	- Escapes - Riot - Outbreaks - Fire - Hunger - Strikes - Agitations, etc	Lecture-cum-Discussion	White Board, Marker, Projection System	90	Guest faculty/In-house		
1.5.2 Describe the medical emergencies in prisons	- Suicides - Death - Communicable diseases - Epidemic - Accidents, etc.	Lecture-cum-Discussion	White Board, Marker, Projection System	90	Medical officer/In-house		Q/A

LEARNING EVENT

Unit	1.6						
Learning Unit	Medical and Healthcare Administration in Prisons						
Training Objective	At the end of the training, participants will be able to explain the medical and health care administration in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
1.6.1 Explain the medical service and healthcare in prison settings	Overview of the medical/ health services	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		
1.6.2 Describe the roles and responsibilities of the medical staff	Roles and Responsibilities of the medical team	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house	Model Prison Manual 2016	

Module 2: Prison Health Care Services – An Overview

LEARNING EVENT

Unit	2.1						
Learning Unit	Prison Health Care – Background						
Training Objective	At the end of the training, participants will be able to explain Prison health care services						
Enabling Objectives At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
2.1.1 Explain the Prison health care	Purpose and features of healthcare	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
2.1.2 Describe the United Nations Standard Minimum Rules for the Treatment of Prisoners	-Basic principles -Functions -Importance	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

LEARNING EVENT

Unit	2.2						
Learning Unit	Key components						
Training Objective	At the end of the training, participants will be able to explain the key components of health care services						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
2.2.1 Explain the essential components of health care services	- Medical care - Health protection & promotion - Health resilience	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	2.3						
Learning Unit	Common problems in prison health care						
Training Objective	At the end of the training, participants will be able to explain the health problems in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
2.3.1 Explain the physical and mental health problems	- Communicable diseases - Medical disorder - Mental illness, etc.	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
2.3.2 List the co-occurring problems	-Self-harm behaviour -Personality issues -Stress, etc.	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	2.4						
Learning Unit	Medical ethics in Prison						
Training Objective	At the end of the training, participants will be able to explain the medical ethics in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
2.4.1 Explain the medical ethics in prison health care	- Basic principles - Characteristics	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		
2.4.2 State the ethics to be followed in prisons	Ethics to be followed in correctional settings	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	2.5						
Learning Unit	Staff health and wellness						
Training Objective	At the end of the training, participants will be able to explain the health of staff and wellness						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
2.5.1 Explain the risk factors and stress among prison staff	- Physical problems - Stress - Anxiety, etc.	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house		Q/A
2.5.2 Identify supportive programs to prevent disease and promote health	-Awareness - Education - Training -Preventive measures, etc.	Lecture, Panel discussion	White Board, Marker	45	Guest faculty/In-house		
2.5.3 Describe health resilience	-Concept -Importance	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Health expert		Q/A

Module 3: Medical and Healthcare Administration in Prisons

LEARNING EVENT

Unit	3.1						
Learning Unit	Duties and Responsibilities of Medical Officer						
Training Objective	At the end of the training, participants will be able to explain the Duties of a Medical Officer						
Enabling Objectives At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
3.1.1 Explain the roles and responsibilities of medical officer	Roles and responsibilities	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house	Model Prison Manual 2016	
3.1.2 List the records and registers to be maintained	Types of records and registers	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house	Checklist	Q/A

LEARNING EVENT

Unit	3.2						
Learning Unit	Psychological and Psychiatric Services in Prisons						
Training Objective	At the end of the training, participants will be able to explain the psychological and psychiatric services in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
3.2.1 Explain the psychological and psychiatric services in prisons	Mental health care in correctional settings	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
3.2.2 Identify the challenges while dealing with mental health issues	Challenges	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		
3.2.3 List training programs to sensitize the staff and inmates	-Awareness - Education - Training -Preventive measures, etc.	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

LEARNING EVENT

Unit	3.3						
Learning Unit	Communicable/infectious diseases						
Training Objective	At the end of the training, participants will be able to explain the communicable/infectious diseases in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
3.3.1 Explain the communicable diseases in prisons	- Types - Nature	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
3.3.2 Discuss the prevention and treatment methods	-Preventive techniques -Method of treatment	Lecture, Panel discussion	White Board, Marker	60	Guest faculty/In-house		

LEARNING EVENT

Unit	3.4						
Learning Unit	Welfare activities						
Training Objective	At the end of the training, participants will be able to explain the welfare activities related to health						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
3.4.1 Explain the welfare activities related to health	- Activities for the promotion of health	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house		Q/A
3.4.2 List the training, awareness, and therapy programs	-Training -Awareness -Therapy	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house		Q/A

Module 4: Cleanliness and Hygienic Administration

LEARNING EVENT

Unit	4.1						
Learning Unit	Standard norms for hygiene in prison						
Training Objective	At the end of the training, participants will be able to explain the standard norms for hygiene in prisons						
Enabling Objectives At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
4.1.1 Define cleanliness and hygiene	- Concept - Purpose - Importance	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
4.1.2 Describe the committees associated with the maintenance of cleanliness and hygiene	-Mulla Committee - International Committee on Red Cross (ICRC) - Model Prison Manual 2016	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	4.2						
Learning Unit	Habitat: Personal and hygiene of cells						
Training Objective	At the end of the training, participants will be able to explain personal hygiene and hygiene of cells						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
4.2.1 Explain personal hygiene and its importance	-Nature -Importance	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
4.2.2 Describe the components in personal and hygiene of cells	-Clothing -Bedding -Lighting -Ventilation -Living space	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

LEARNING EVENT

Unit	4.3						
Learning Unit	Water: Water supply and hygiene						
Training Objective	At the end of the training, participants will be able to explain the water supply system and hygiene						
Enabling Objectives At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
4.3.1 Explain the water supply system and hygiene	Water supply system	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
4.3.2 Describe the wastewater management system	Management of wastewater	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

LEARNING EVENT

Unit	4.4						
Learning Unit	Kitchen: Design and hygiene						
Training Objective	At the end of the training, participants will be able to explain the design of the kitchen and hygiene						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
4.4.1 Explain the infrastructure of the kitchen and hygiene	- Infrastructure - Essential components	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		
4.4.2 State the energy-saving techniques	Energy-saving techniques	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	4.5						
Learning Unit	Cleanliness and hygiene						
Training Objective	At the end of the training, participants will be able to explain cleanliness and hygiene						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
4.5.1 Explain cleanliness and hygiene in correctional settings	- Cleanliness - Hygiene	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
4.5.2 Discuss hygiene in latrines/Washrooms, septic tanks and management of medical waste	- Latrine - Septic tank - Medical waste	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

Module 5: Correctional Wing in Prison Administration

LEARNING EVENT

Unit	5.1						
Learning Unit	Corrections – An overview						
Training Objective	At the end of the training, participants will be able to explain the concept of corrections						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
5.1.1 Explain the concept and goals of correction	- Concept - Objectives	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
5.1.2 Discuss the role of prisons in correction and crime prevention	Role of prison in correction	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

LEARNING EVENT

Unit	5.2						
Learning Unit	Correctional Staff in Prison Administration						
Training Objective	At the end of the training, participants will be able to explain the correctional staff and their duties						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance aid (if any)	Assessment
5.2.1 Explain the correctional staff and their roles and responsibilities	Correctional staff and their duties	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house	Model Prison Manual 2016	Q/A
5.2.2 Describe the role of correctional staff in the rehabilitation process	Correctional staff and rehabilitation process	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

LEARNING EVENT

Unit	5.3						
Learning Unit	Correction and its impact						
Training Objective	At the end of the training, participants will be able to explain the impact of corrections						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
5.3.1 Describe the impact of corrections	Impressions of correction	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	5.4						
Learning Unit	Challenges in Correction						
Training Objective	At the end of the training, participants will be able to explain the challenges of corrections						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
5.4.1 Identify the challenges which are obstacles to correction	Challenges	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
5.4.2 Describe the strategies to overcome the challenges	Methods to overcome the challenges	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

Module 6: Correctional Programs in Prisons

LEARNING EVENT

Unit	6.1						
Learning Unit	Correctional/Rehabilitation Programs						
Training Objective	At the end of the training, participants will be able to explain the correctional/rehabilitation programs in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
6.1.1 Explain the ongoing reformation programs in Indian prisons.	- Counselling - Education - Life, Social, Vocational skills - Work - Welfare activities - Sports and Recreation - Agricultural activities - Prison outlet shops	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/ In-house		Q/A
6.1.2 Describe the best practices at the national and international level	- Best practices - National - International	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/ In-house		

LEARNING EVENT

Unit	6.2						
Learning Unit	Prisoners' Contact with Outside World						
Training Objective	At the end of the training, participants will be able to explain how prisoners contact with the outside world						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
6.2.1 Explain the forms of contacts and their importance of it	- Letter - Telephone - Interview	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	6.3						
Learning Unit	Restorative Justice Program						
Training Objective	At the end of the training, participants will be able to explain the restorative justice system						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
6.3.1 Explain the restorative justice system	- Introduction - Different types of programs	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		Q/A
6.3.2 State some restorative justice programs	- Types of programs	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		

LEARNING EVENT

Unit	6.4						
Learning Unit	Open prisons						
Training Objective	At the end of the training, participants will be able to explain open prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
6.4.1 Explain the nature and importance of open prisons	- Nature - Importance	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		Q/A
6.4.2 Describe the types of open prisons and open-air camp	Types of open prisons	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		

LEARNING EVENT

Unit	6.5						
Learning Unit	After care services						
Training Objective	At the end of the training, participants will be able to explain the concept of after-care services						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
6.5.1 Explain the need and effectiveness of aftercare services	- Need - Nature - Effectiveness	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		Q/A
6.5.2 Describe the Role & Functioning of Discharged Prisoners' Aid Society	- Concept - Purpose/ Role -Functioning	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		

Module 7: Criminal Law – An Overview

LEARNING EVENT

Unit	7.1						
Learning Unit	Criminal law – Basics						
Training Objective	At the end of the training, participants will be able to explain the basics of the criminal law						
Enabling Objectives At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
7.1.1 Explain the concept of criminal law	- Concepts - Elements - Cr. P.C, IPC, IEA	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
7.1.2 State how offences are classified	Classification of offences	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
7.1.3 Describe the Mental Health Act 2017	Salient features	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

Module 8: Prisoner with Special needs

LEARNING EVENT

Unit	8.1						
Learning Unit	Prisoners with Special needs						
Training Objective	At the end of the training, participants will be able to explain the need of prisoners with special needs						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
8.1.1 Explain the UNODC: Handbook on Prisoners with Special Needs	- Characteristics - Features	Lecture-cum-Discussion	White Board, Marker, Projection System	120	Guest faculty/ In-house		
8.1.2 List the categories of prisoners	- Women - Habitual - Death-sentenced - Elderly - Adolescents - Drug addicts - Mentally ill - Terminal illness and disabilities - Transgenders	Lecture-cum-Discussion	White Board, Marker, Projection System	120	Guest faculty/ In-house		Q/A
8.1.3 Identify the needs and challenges	-Needs -Challenges	Lecture-cum-Discussion	White Board, Marker, Projection System	120	Guest faculty/ In-house	Group discussion	

Module 9: Suicide and Prevention

LEARNING EVENT

Unit	9.1						
Learning Unit	Suicide in prisons						
Training Objective	At the end of the training, participants will be able to explain the concept of suicide in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
9.1.1 Explain suicide in prisons	- Suicide - Crisis situation - Prison environment	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		Q/A
9.1.2 Describe the Stress-vulnerability model	Theoretical background	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		

LEARNING EVENT

Unit	9.2						
Learning Unit	Self-harm behaviour						
Training Objective	At the end of the training, participants will be able to explain self-harm behavior among prisoners						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
9.2.1 Describe the basics of self-harm behaviour	- Concept - Brief overview	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		Q/A
9.2.2 Explain ways to prevent self-harm behaviour	Preventive techniques	Lecture-cum-Discussion	White Board, Marker, Projection System	30	Guest faculty/In-house		Q/A
9.2.3 Describe the concept of Non suicidal self-injury	-Nature -Characteristics	Lecture-cum-Discussion	White Board, Marker, Projection System	30			

LEARNING EVENT

Unit	9.3						
Learning Unit	Risk and Protective factors						
Training Objective	At the end of the training, participants will be able to explain the risk and protective factors						
<i>Enabling Objectives-</i> At the end of the training, participants will be able to	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
9.3.1 Explain factors triggering suicide and factors preventing suicide	- Risk factors - Situational triggers - Vulnerability - Prison-induced stress - Mental illness - Substance use - Past suicide attempts, etc - Protective factors - Family support and contact - Education - Job in prison - Future plan, etc.	Lecture-cum-Discussion	White Board, Marker, Projection System	90	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	9.4						
Learning Unit	Signs and symptoms						
Training Objective	At the end of the training, participants will be able to explain the warning signs and symptoms of suicide in correctional settings						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
9.4.1 List the signs and symptoms to identify the prisoners having ideation/intent to commit suicide	- Signs - Symptoms	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		

LEARNING EVENT

Unit	9.5						
Learning Unit	Suicide Prevention Plan						
Training Objective	At the end of the training, participants will be able to explain the suicide prevention plan in prisons						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
9.5.1 Explain the steps to prevent suicide in correctional settings	- Identification - Assessment - Housing - Monitoring - Referral - Intervention - Notification - Reporting - Review - Counselling	Lecture-cum-Discussion	White Board, Marker, Projection System	120	Guest faculty/In-house		Q/A

Module 10: Stress Management

LEARNING EVENT

Unit	10.1						
Learning Unit	Stress: An introduction						
Training Objective	At the end of the training, participants will be able to explain the concept of stress						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
10.1.1 Explain the concept, and importance of stress	- Nature - Importance	Lecture-cum-Discussion	White Board, Marker, Projection System	45	Guest faculty/In-house		Q/A
10.1.2 Describe the sources of stress	- Personal - Physical - Emotional - Psycho-social - Environmental - Organizational - Family.	Lecture, Group Discussion	White Board, Marker	45	Guest faculty/In-house		

LEARNING EVENT

Unit	10.2						
Learning Unit	Signs and symptoms						
Training Objective	At the end of the training, participants will be able to explain the signs and symptoms of stress						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
10.2.1 List the signs and symptoms of stress.	- Physical - Mental - Emotional - Cognitive - Behavioral	Lecture-cum-Discussion	White Board, Marker, Projection System	90	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	10.3						
Learning Unit	Effects of stress						
Training Objective	At the end of the training, participants will be able to explain the impact of stress in personal and professional life						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
10.3.1 Explain the effects of stress and the way it affects the day-to-day life activities	- Factors affecting regular activities	Lecture, Group Discussion	White Board, Marker, Projection System	120	Guest faculty/In-house		Q/A

LEARNING EVENT

Unit	10.4						
Learning Unit	Stress management techniques						
Training Objective	At the end of the training, participants will be able to explain the Stress management techniques						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
10.4.1 Explain how to cope with stress in a healthy way and approach problems proactively	- Different approaches - Healthy ways of Coping	Lecture, Group Discussion	White Board, Marker, Projection System	120	Guest faculty/In-house		Q/A
10.4.2 Describe some therapeutic techniques	-Some important therapies	Lecture-cum-Discussion	White Board, Marker, Projection System	120	Guest faculty/In-house		

LEARNING EVENT

Unit	10.5						
Learning Unit	Relaxation Techniques						
Training Objective	At the end of the training, participants will be able to explain relaxation techniques						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
10.5.1 Explain the relaxation techniques to combat everyday stress	- Jacobson Progressive Muscle Relaxation - Benson Relaxation Response - Guided Imagery Meditation - Body Scan Meditation - Mindfulness Meditation	Lecture-cum-Discussion	White Board, Marker, Projection System	120	Guest faculty/In-house		Q/A
10.5.2 Demonstrate the techniques to bring the body and mind back into balance.	Steps to practice	Lecture-cum-Discussion	White Board, chart, Projector	60	Guest faculty/In-house		

Module – 11: Personality Development

LEARNING EVENT

Unit	11.1						
Learning Unit	Introduction to Personality Development						
Training Objective	At the end of the training, participants will be able to explain Personality and other factors related to Personality						
<i>Enabling Objectives</i> At the end of the training, participants will be able to -	Content	Method	Media	Time (Mins)	Trainer	Performance Aid	Assessment
11.1.1 Explain the personality and how it develops	- Types - Nature of development	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
11.1.2 Describe attitude and its impact	- Attitude towards Self - Attitude towards Others	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
11.1.3 Explain Emotional Intelligence	- Concept - Key attributes	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A
11.1.4 Describe Conflict Resolution	- Definition - Resolution Techniques	Lecture-cum-Discussion	White Board, Marker, Projection System	60	Guest faculty/In-house		Q/A

WEEK WISE TASKS

ONE-MONTH COURSE

Week – 1

- Registration
- Inauguration
- Detailed Introduction
- Expectations of the course
- Course Overview
- Ground Rules
- Course Guide
- Distribution of the training kit (Training material, Name badges, Course Guide, Note pads, etc.)
- Training
- Video show
- Field Visit: Central Prison, Special Prison for Women

Week – 2

- Training
- Panel Discussion
- Video show
- Field Visit: Mental Health Institute, Counselling Centre, De-addiction centre

Week – 3

- Training
- Panel Discussion
- Assessment: Perceived Stress Scale

- Video show
- Article Analysis
- Field Visit: Prisoner ward in Government Hospital, NGOs working for Prisoners and their Children

Week – 4

- Training
- Panel Discussion
- Video show
- Field Visit Report Presentation
- Poster Presentation
- Feedback Session
- Valediction

End of Course

PART-C

LIST OF RESOURCE MATERIAL

Section – 1 Handouts

Section – 2 Checklist

Section – 3 Exercises

Section – 4 Articles

Section – 5 Videos & Films

LIST OF RESOURCE MATERIAL

Section-1 Handouts

- HO – 1** The Prisons and Prisoners Act
- HO – 2** Types of Prisons
- HO – 3** Organizational Structure
- HO – 4** Classification of Prisoners
- HO – 5** Types of Security in Prisons
- HO – 6** United Nations Standard Minimum Rules for the Treatment of Prisoners
- HO – 7** Common Problems in Prison Health Care
- HO – 8** Medical Ethics in Prison
- HO – 9** Committees associated with maintenance of Cleanliness and Hygiene
- HO – 10** Water, Sanitation, Hygiene and Habitat in Prisons
- HO – 11** Goals of Corrections
- HO – 12** Rehabilitation of Prisoners: Best Practices
- HO – 13** Aftercare Services
- HO – 14** Classification of Offences
- HO – 15** Mental Healthcare Act 2017
- HO – 16** UNODC: Handbook on Prisoners with Special Needs
- HO – 17** Suicide in Prisons
- HO – 18** Stress-Vulnerability Model
- HO – 19** Stress Management Techniques
- HO – 20** Relaxation Techniques

HO – 21 Personality Development

HO – 22 Attitude

HO – 23 Emotional Intelligence

HO – 24 Conflict Resolution

Section – 2 Checklist

CL-1 Report on death of the prisoner

CL-2 Medical Registers and Records

Section – 3 Exercises

EX-1 Perceived Stress Scale

Section – 4 Articles and Advisories

Section - 5 Videos & Films

HANDOUTS

Section – I

The Prisons Act

The Prisons Act, 1894

The Prisons Act 1894 is one of the oldest piece of legislation in India dealing with laws enacted in relation to prisons in India. This Act was enacted on 22nd March, 1894 and enforced on 1st July, 1894. This act contains 62 sections and XII Chapters and it is an exhaustive act which contains law relating to smooth functioning of prisons.

Chapter III deals with the duties of medical officer and reporting procedure and Chapter VIII deals with the health of the prisoners.

The Mental Health Care Act, 2017 and the Rules framed thereunder.

Types of Prisons

Prison administration is an important component of criminal justice system. Prison means a place in which persons are kept in custody when trial is pending or in which they are confined as punishment after conviction. Prisons exist at three levels such as Taluk level, District level and Zonal/Range level and Jails at these levels are called as Sub Jail, District Jail and Central Jail respectively

Central Prison

Central Prison means a class of prisons meant for centralised detention and correctional treatment of offenders sentenced to relatively long terms of imprisonment and also for detention of other class or classes of persons as specified by rules made by the government.

District Jail

District jails serve as the main prisons in states and union territories where there are no Central Jails.

Sub Jail

Sub jails are smaller institutions situated at a sub-divisional level in the States.

Open Jail

Open jails are minimum security prisons. Only convicted prisoners with good behavior satisfying certain norms prescribed in the prison rules are admitted in open jails. Minimum security is kept in such prisons and prisoners are engaged in agricultural activities.

Special Jail

Special jails are maximum security prisons for the confinement of a particular class or particular classes of prisoners. Prisoners housed in special jails are generally convicted in offences such as terrorism, violent crimes, habitual offenders, serious violations of prison discipline, and inmates showing tendencies towards violence and aggression.

Special Prison for Women

Women's jails are prisons that exclusively house female prisoners. Women's jails may exist at the sub-divisional, district and central (zone/range) level.

Borstal School

Borstal Schools are a type of youth detention centre in lieu of imprisonment and are used exclusively for the detention of young offenders. The primary objective of borstal schools is to ensure care, welfare and rehabilitation of young offenders in a different environment suitable for young offenders and keep them away from ill-effects of prison atmosphere of the prison. The Borstal schools are established and maintained as per the Laws in various states of the country.

Organisational structure

Prisons and correctional services are under administrative control of the Home Department of State/UT as it is responsible for the services in this field. There is a separate division of the Home Department for dealing with the matters connected with prisons and correctional services. The organisational set-up of the Department of Prisons and Correctional Services is as follows

Prison Hierarchy

- Director General /Inspector General of Prisons and Correctional Services
- Additional Director General/Additional Inspector General of Prisons/Director of Correctional Services and Deputy Director of Correctional Services
- Deputy Inspector General of Prisons or Deputy Director of Correctional Services Superintendent
- Deputy Superintendent
- Jailor
- Deputy Jailor/Asst. Jailor/ Asst. Superintendent
- Medical Staff
- Correctional Staff
- Probation Officer
- Ministerial Staff
- Warder

Classification of Prisoners

Prison inmates lodged in various jails are categorised as Convicts, Undertrials and Detenues. A convict is a person found guilty of a crime and sentenced by court of law and person serving a sentence in prison. An undertrial is a person who is currently on trial in a court of law. A detainee is any person held lawfully in custody.

Prisoners can be categorized as follows: Classification of Prisoners

- Remand Prisoners
- Undertrial Prisoners
- Detenues
- Convicts
- Simple Imprisonment and Rigorous Imprisonment
- Short Term and Long-Term Prisoners
- Prisoners Sentenced to Death
- Mentally ill
- Adolescents/Young offenders
- Transgender
- Specially abled
- Old/Aged

Types of Security in Prisons

Security procedures are essential in ensuring that convicts don't escape from the prison unit. The types/aspects of security are:

Physical security describes security measures that are designed to deny unauthorized access to facilities, equipment and resources and to protect personnel and property from damage or harm. Physical security involves the use of multiple layers of interdependent systems that can include CCTV surveillance, security guards, protective barriers, locks, access control, perimeter intrusion detection, deterrent systems, fire protection, and other systems designed to protect persons and property.

Dynamic security means that basic grade prison staff are trained and encouraged to develop good personal relationships with prisoners, to know and understand them as individuals, to provide sympathetic help with personal problems and to engage in meaningful dialogues with them.

The four elements of dynamic security are:

- Good relationships between staff and prisoners
- A constructive regime
- A secure environment
- Anything which reduces the inclination or opportunity to escape or abscond

Procedural Security deals with the identification, modelling, establishment, and enforcement of security policies about the procedures that regulate the usage of a system and system processes. Procedural security can also involve the detection of possible issues and problems, and then isolating and dealing with them. These procedures allow risks to become identified and this then allows them to be dealt with appropriately. Due to this, all convicts will still be under control if security is breached or broken.

United Nations Standard Minimum Rules for the Treatment of Prisoners

The United Nations Standard Minimum Rules for the Treatment of Prisoners ("the Mandela Rules") were adopted by the United Nations General Assembly on 17 December 2015 after a five-year revision process. They are known as the **Mandela Rules** in honor of the former South African President, Nelson Mandela. The Mandela Rules are composed of 122 "rules". Not all are rules, but some are principles such as institutional equality and the philosophy of confinement.

Part I contains Rules of General Application. It contains standards which set out what is generally accepted as being good practices in the treatment of prisoners and the management of penal institutions.

Part II contains rules applicable to different categories of prisoners including those under sentence. It also contains rules for prisoners under arrest or awaiting trial (generally referred to as "remand"), rules for civil prisoners (for countries where local law permits imprisonment for debt, or by order of a court for any other non-criminal process) and rules for persons arrested or detained without charge.

Common Problems in Prison Health Care

Inmates in correctional facilities have significantly higher rates of disease than the general population. This population tends to suffer in greater numbers from infectious disease, mental health problems, and substance use and addiction. Their health can also be affected negatively by factors in their environment, such as violence or overcrowding. The problems are summarized below:

Physical problems: Communicable diseases, dependence (drugs, alcohol, tobacco), chronic medical disorders (diabetes, epilepsy, hypertension, diseases of the reproductive system, cancer, and heart, lung, liver and skin disease).

Mental health problems: Anxiety, depression, neurotic disorder, severe mental disorder, low mood or self-confidence, post-traumatic stress disorder.

Co-occurring problems: Prisoners with self-harming behaviour, personality disorder, vulnerability, physical and mental trauma and stress, sensory, motor or cognitive disability, medical management of hunger strikers in prison

Medical Ethics in Prison

Ethics, a normative science, is the study and philosophy of human conduct with emphasis on the determination of right and wrong.

The essence of medical ethics in prison

1. The primary task of the prison doctor and the other health care workers is the health and well-being of the inmates.
2. The 7 essential principles for the practice of prison health care, as set out by the European Committee for the Prevention of Torture (CPT):
 - Free access to a doctor for every prisoner
 - Equivalence of care
 - Patient consent and confidentiality
 - Preventive health care
 - Humanitarian assistance
 - Professional independence
 - Professional competence

Committees associated with maintenance of Cleanliness and Hygiene

Mulla Committee

The All India Prison Reforms Committee, also known as the Mulla Committee, worked on the aspect of prison reforms between 1980-1983. The committee had submitted a report, detailing how the existing set up of jails could be improved. They had covered all the aspects- medical, administrative, hygiene etc.

The International Committee on Red Cross (ICRC), has come up with a set of stringent norms to ensure that detainees are allowed equitable access to basic amenities associated with maintenance of hygiene and sanitation

With regards to water these measures have been suggested

- Availability of water 24 hours a day
- There should be adequate water purification and portable systems available. These must also adhere to WHO standards.-
- There should be different entry points for men, women and juveniles to water. Furthermore, there should be multiple sources of water in order to avoid conflict. There should be adequate water sources installed throughout the detention facility, at different places, for optimum usage.
- “Ground reservoirs” or “water towers” should be available to hold water for emergency purposes.

With regards to toilets, these measures have been advised

- Construction of one toilet to cater to 25 detainees. There should be similar provisions for single or multiple holding cells to ensure immediate and sufficient access.

- There should be availability of one shower per 50 detainees with allowance for a bath at least 3 times per week.
- Each toilet block must be equipped with one tap for availing the facility of washing hands.

Cleaning and maintenance of toilets

- This could be carried out by forming a dedicated team of detainees specifically delegated with this task.
- They should be equipped with requisite machinery and means, which are to be kept in a concentrated storage space.
- The dedicated team should be given adequate training and mandate to manage the cleaning system.
- In case, a situation arises when the toilets are blocked or becomes out of commission, urgent action should be undertaken to ensure that the hygiene conditions do not worsen.

With regards to women

- Women should be able to avail secured entry to toilets throughout 24 hours
- These toilet facilities should be situated in a secured location, wherein women prisoners do not feel any risk while trying to gain access.
- Extra facilities should be provided to women who are pregnant, lactating, under a menstrual cycle or taking care of relatively young children.
- There should be sufficient facilities available for women to avail bathing. They should have access to amenities like soap and fresh towels etc. to carry out this activity well.
- Women should be provided with suitable sanitary products to deal with menstruation (including the disposal of materials) with dignity and privacy. Detainees should be provided with a sufficient supply of such products to meet individual needs.

Water, Sanitation, Hygiene and Habitat in Prisons: Supplementary Guidance: International Committee of the Red Cross (2012)

Safe drinking water, sanitation, and hygiene are fundamental to improving standards of living for people. It is necessary to follow the standards in prisons where thousands of people are lodged. It is a practical handbook covering the architecture, engineering, design and operation of prisons. The handbook contains practical guidance on the environmental aspects of prison accommodation and related services. It has been widely used to evaluate and assess prison infrastructure and to provide guidance in the design and construction of new and rehabilitated accommodation and sanitation services. The guidelines are intended to improve the overall understanding of the minimum conditions to be provided in order to guarantee that detainees are always accommodated in detention facilities which meet basic human needs. It is also intended that the guidelines be sufficiently comprehensive to be applicable in a wide range of environments. Detailed drawings present solutions in such areas as water supply, sewage and waste disposal, food preparation, vector control, general hygiene and health.

Each issue is addressed by considering the reality of the situation and what is considered to be good practice. Chapters follow the format: “Reality” followed by “Good practice and operational implications.” The “Good practice and operational implications” section attempts to cover some of the realities in relation to each topic.

The first topics covered are on the architecture, design principles and living quarters and capacity of prisons. This is followed by two chapters on infrastructure requirements effective water supply, sanitation and hygiene. The remaining chapters deal with special provisions for women, girls, dependent children and juveniles as well as prison maintenance and planning prison construction or rehabilitation.

Goals of Corrections

Corrections

Corrections refers to the supervision of persons arrested for, convicted of, or sentenced for criminal offenses. It is a generic term that includes all government agencies, facilities, programs, procedures, personal, and techniques concerned with the investigation, intake, custody, confinement, supervision, or treatment of alleged or adjudicated adult offenders, juvenile delinquents, etc.

Goals of corrections: Retribution, Incapacitation, Rehabilitation, Deterrence, and Restoration.

Retribution is the oldest of the ideologies/philosophies of punishment. Retribution means, in the simplest sense, revenge, “an eye for an eye”, or “do unto others as you would have done unto you.” It refers to the act of setting a punishment for someone that “fits the crime”, basically means that if someone perceives harm, they are within their right to retaliate at a proportional level.

Incapacitation prevents future crime by removing the defendant from society. It involves capital punishment, sending an offender to prison, or possibly restricting their freedom in the community, to protect society and prevent that person from committing further crimes. Incarceration, as the primary mechanism for incapacitation, is also used to try to deter future offending. Examples of incapacitation are incarceration, house arrest, or execution pursuant to the death penalty.

Deterrence can be defined as the prevention of socially undesirable behavior by fear of punishment. It prevents future crime by frightening the *defendant* or the *public*.

Individual deterrence is the aim of punishment to discourage the offender from criminal acts in the future. General deterrence is the intention to deter the general public from committing a crime by punishing those who do offend.

Rehabilitation is the process of re-educating and retraining those who commit a crime. It prevents future crime by altering a defendant's behavior. The purpose of punishment is to apply treatment and training to the offender so that he is made capable of returning to society and functioning as a law-abiding member of the community.

Restitution is defined as "a monetary payment by the offender to the victim for the harm reasonably resulting from the offense ordered by the court". Restitution can be for physical injuries, loss of property or money, and rarely, emotional distress. It can also be a *fine* that covers some of the costs of criminal prosecution and punishment.

Rehabilitation of Prisoners: Best Practices

Innovative programs: Telemedicine in USA started in states of Ohio, Texas, California in 1990 – Project Samarthan: Psychological first aid session in Tihar Jail started in 2018 to reduce the suicide rates – Prison Needle and Syringe programme

Telemedicine uses telecommunications equipment that allows health care providers to see and diagnose inmates in prisons located far from health care providers' offices. Correctional health organizations began to explore telehealth as a delivery strategy during 1980s. Although Florida was the first to experiment with telemedicine in prison, introducing it in state penitentiaries in the late 1980s, Texas became best known for the use of telehealth in penal institutions and began using telehealth to care for its prison population in the early 1990s. Given that transporting inmates for health care is expensive—the cost of security personnel—and presents a community safety risk, telemedicine became a strategy of interest by county, state, and federal correctional organizations.

Project Samarthan

- It was started in April 2018 by the Delhi Prison Administration in association with the collaboration with NGO Mental Health Foundation and was mentored by the professor Nand Kumar, Department of Psychiatry, All India Institute Medical Sciences (AIIMS).
- The objective of the project is to provide psychological first aid session or counselling session to reduce the suicide rates in the prison.
- Psychological first aid is a technique designed to reduce the occurrence of post-traumatic stress disorder.
- Provide psychological first aid to people in an emergency by employing the RAPID model: Reflective listening, Assessment of needs, Prioritization, Intervention, and Disposition.

After care Services

Aftercare Services

The process of after-care and rehabilitation of offenders is an integral part of institutional care and treatment. It plays an important part in any integrated programme of crime prevention. It refers to the programme and services organized for the rehabilitation of inmates from correctional institutions. It is intended to complete the process of rehabilitation of an individual and to prevent the possibility of his/her relapse into a life of dependence or custodial care.

Objectives of after-care: The Model Prison Manual (2016) has outlined the objectives of after-care service as:

- ☐ Extending help, guidance, counseling, support, and protection to all released prisoners, whenever necessary.
- ☐ Helping a released person to overcome his/her mental, social, and economic difficulties.
- ☐ Helping in the removal of any social stigma that may have been attached to the inmate or his/her family because of his incarceration.
- ☐ Impressing upon the individual the need to adjust his/her habits, attitudes, approaches and values to a rational appreciation of social responsibilities and obligations and the requirements of community living.
- ☐ Helping the individual in making satisfactory readjustments with his/her family, neighborhood, work group, and the community.

Classification of Offences

Offence

An act or behaviour prohibited by criminal law and therefore punishable by law: fines, imprisonment, additional sentences, etc. An offence is an illegal act or crime punishable in the eyes of law, The Code of Criminal Procedure Code, 1973 has recognised offences under three categories:

- i. Cognizable and Non-cognizable offences.
- ii. Bailable and Non-Bailable offences.
- iii. Compoundable and Non-Compoundable offences

Bailable Offence

A Bailable offence is a one where bail is an absolute and indefeasible right, it could be granted by the police officer in whose custody he is or concerned magistrate. Such offences are being a member of an unlawful assembly, giving false evidence in a judiciary, causing a disturbance in an assembly, etc

Non Bailable Offence

A Non- bailable offence is the one where bail is not the matter of right, bail can only be granted in discretion of the court, such offences usually include murder, rape. etc.

Cognizable Offence

Cognizable Offence is an offence in which the police officer can arrest the convict without a warrant and can start investigation without the due permission of the court. These are the offences that are heinous in nature. For example: Rape, murder, kidnapping, dowry death etc. All cognizable offences are non-bailable due to their serious and heinous nature.

Non-cognizable Offence

Non-cognizable Offence refers to an offence for which a police officer has no authority to arrest without a warrant. These are the offences that are not serious or are usually petty in nature. For example: assault, cheating, forgery, defamation etc. Non-cognizable offences are usually bailable because of their non-serious nature.

Compoundable Offence

The compoundable offence is where the complainant can drop his charges and enter into a compromise, the compromise must be bonafide and not something to which he is not entitled, the court grants permission when convinced that the offence is entirely personal in nature and therefore does not affect public tranquillity and compromise would bring peace as well as the secured ends of justice, in such cases pursuing prosecution would be waste of time and energy

Non-Compoundable Offence

A Non-compoundable offence cannot be compounded, can only be quashed as they are generally of heinous and criminal nature. All offences not mentioned in section 320 of CrPC fall under non-compoundable offence. The complaint is generally filed by the state like police, etc hence the question to drop charges does not arise. Even the court does not have the power to compound such offences. The trial ends with acquittal or conviction of the accused.

Mental Health Act, 2017

The Mental Healthcare Act, 2017 aims to provide mental healthcare services for persons with mental illness. It ensures that these persons have a right to live life with dignity by not being discriminated against or harassed.

Key features and provisions:

1. The Act provides statutory rights to all persons to access mental healthcare and treatment from mental health services run or funded by the Government which includes affordable, good quality, and easy access to facilities such as minimum mental health services in every district without any discrimination.
2. The Act ensures the right to equality of treatment, and protection from inhuman and degrading treatment at any medical health establishment.
3. The Act broadens the definition of mental illness as a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognize reality or ability to meet the ordinary demands of life, mental conditions associated with the abuse of alcohol and drugs and does not include mental retardation which is characterized by sub-normality of intelligence.
4. The Act provides for procedure and process of admission, treatment and discharge of patients. The patient has the right to make an ‘advance directive’ stating how he wishes to be treated and how not to be treated.
5. They can also appoint a ‘nominated representative’ to take all health-related decisions on their behalf.
6. Entitlement to free mental health services at all mental health establishments run or funded by the Government for those persons with mental illnesses living below the poverty line or who are destitute or homeless.

7. Insurers are now bound to provide medical insurance to persons with mental illnesses for treatment on the same basis as available for treatment of physical illnesses.

8. Suicide is decriminalized with the enactment of “Mental of Health Care Act 2017” which came into force from 29 May 2018. An attempted suicide will not be considered as punishable, which earlier included imprisonment up to a year and/or fine. Now, the attempt will be presumed as a result of severe stress and the person will not be subjected to investigation or prosecution.

Source: <https://medium.com/one-future/the-mental-healthcare-act-2017-9edc0e84da5b>

UNODC: Handbook on Prisoners with Special Needs

UNODC: Handbook on Prisoners with Special Needs

This handbook covers the special needs of eight groups of prisoners, which have a particularly vulnerable status in prisons. They are: Prisoners with mental health care needs; Prisoners with disabilities; Ethnic and racial minorities and indigenous peoples; Foreign national prisoners; Lesbian, gay, bisexual, and transgender (LGBT) prisoners; Older prisoners; Prisoners with terminal illness and Prisoners under sentence of death.

Each chapter provides:

- A definition of the particular group covered and an overview of the situation of this group in the criminal justice system worldwide, to highlight the context in which the chapter should be read.
- An overview of the special needs and challenges encountered in responding to them, with regard to the specific group covered.
- Extracts from relevant international standards relating to the particular group.
- Comment on legislative measures and the implementation of alternatives to prison, which can reduce the imprisonment of the particular group, while protecting public safety.
- Prison management guidelines setting out ways in which to respond to the special needs of the particular group in prisons.
- A set of recommendations, summarizing the key suggestions made in the main text, addressed to policymakers, legislators and prison authorities.

Suicide in Prisons

There are two primary causes for jail suicide — first, jail environment is conducive to suicidal behaviour and, second, the inmate is facing a crisis situation.

Characteristics

Characteristics of Prison Environments

1. Fear of the unknown
2. Distrust of the authoritarian environment
3. Lack of apparent control over the future
4. Isolation from family and significant others
5. Shame of incarceration
6. Dehumanizing aspects of incarceration
7. Staff insensitivity to the arrest and incarceration phenomenon
8. Hostility and bullying by other inmates
9. Lack of adequate medical and psychological counseling and treatment facility
10. Delay in deciding the parole

Characteristics of Crisis Situation

1. Recent excessive drinking and/or use of drugs
2. Recent loss of stabilizing resources
3. Severe guilt or shame over the offence
4. Same – sex rape
5. Current mental illness
6. Poor health or terminal illness
7. Approaching an emotional breaking point

Stress-Vulnerability Model

The American Psychological Association Dictionary of Psychology defines the stress-vulnerability model as a theory that a “genetic or biological predisposition to certain mental disorders exists and psychological and social factors can increase the likelihood of symptomatic episodes.” The stress-vulnerability model explores how biological factors and stress impacts a person’s likelihood of developing a substance use disorder or other mental disorder.

Bonner (1992a) offers the “stress-vulnerability model,” the theory that suicide must be viewed in the context of a process by which an inmate is (or becomes) ill-equipped to handle the common stresses of confinement. As the inmate reaches an emotional breaking point, the result can be varying degrees of suicidal intention, including ideation, contemplation, attempt, or completion. Initially, these stressors mirror those of jail suicide victims, such as fear of the unknown and isolation from family, but over time incarceration may bring about added stressors, such as loss of outside relationships, conflicts within the institution, victimization, further legal frustration, physical and emotional breakdown, and a wide variety of other problems in living. Coupled with such negative life stress, individuals with psychosocial vulnerabilities (including psychiatric illness, drug/alcohol intoxication, marital/social isolation, suicidal coping history, and deficiencies in problem-solving ability) may be unable to cope effectively and in time may become hopeless. Such factors, in combination or interaction with the common stresses of confinement, could break down the ability to cope and create the emotional avenue for suicidal behaviour.

Stress Management Techniques

The stress management meaning is to reduce the negative impacts caused by stress and to improve a person's physical and mental well-being. The ultimate goal is a balanced life, with time for work, relationships, relaxation, and fun and the resilience to hold up under pressure and meet challenges head on.

- ✓ Tips to manage stress: Identify the sources of stress in your life
- ✓ Practice the 4 A's (Avoid, Alter, Adapt & Accept) of stress management
- ✓ Make time for fun and relaxation
- ✓ Maintain balance with a healthy lifestyle
- ✓ Learn to manage your time more effectively.
- ✓ Be assertive instead of aggressive. Assert your feelings, opinions, or beliefs instead of becoming angry, defensive, or passive.
- ✓ Set limits appropriately and say no to requests that would create excessive stress in your life.
- ✓ Use Quick Stress Relievers (deep breathing, walking, listening to music, etc)
- ✓ Develop Stress-Relieving Habits (regular exercise, meditation, self-care, etc)
- ✓ Eliminate Stressors When You Can

Relaxation Techniques

The relaxation response is the opposite of the stress response. It is a state of profound rest that can be elicited in many ways. With regular practice, you create a well of calm to dip into as the need arises.

Steps for relaxation techniques

Jacobson Progressive Muscle Relaxation

- www.juniperpublishers.com/jojnhc/pdf/JOJNHC.MS.ID.555726.pdf

Benson Relaxation Response

- www.hnfs.com/content/dam/hnfs/tw/common/pdf/WellnessProgramMaterials/StressManagement/PF1110x077RelaxationResponse.pdf

Guided Imagery Meditation

- [www.smithcenter.org/wp-content/uploads/files/downloads/special-place-guided-imagery\(1\).pdf](http://www.smithcenter.org/wp-content/uploads/files/downloads/special-place-guided-imagery(1).pdf)

Body Scan Meditation

- www.ggia.berkeley.edu/?ACT=141&path=practicebody_scan_meditation.pdf

Mindfulness meditation

- <https://www.bowdoin.edu/counseling/pdf/beginning-mindfulness-meditation.pdf>

Personality Development

The human personality is complicated and varied ranging from eccentric and reclusive to raucous and brazen. Personality is a characteristic way of thinking, feeling, and behaving. Personality embraces moods, attitudes, and opinions and is most clearly expressed in interactions with other people. It includes behavioral characteristics, both inherent and acquired, that distinguish one person from another and that can be observed in people's relations with the environment and with social groups. The unique constellation of the ways we approach the world, interpret events, and act consistently across situations is our personality. Although personality can change over a lifetime, one's core personality traits tend to remain relatively consistent during adulthood.

Personality development refers to the process by which the organized thought and behavior patterns that make up a person's unique personality emerge over time. Many factors influence personality, including genetics, environment, parenting style, type of parenting, Societal variables, etc. Personality development is ever-changing and subject to contextual factors and life-altering experiences. Personality development helps an individual to gain confidence and high self-esteem. Personality development also is said to have a positive impact on one's communication skills and the way he sees the world. Individuals tend to develop a positive attitude as a result of personality development.

Temperament is a key part of personality that is determined by inherited traits. Character is an aspect of personality influenced by experience that continues to grow and change throughout life

Attitude

An attitude is a relatively enduring organization of beliefs, feelings, and behavioral tendencies towards socially significant objects, groups, events or symbols. It is a psychological tendency that is expressed by evaluating a particular entity with some degree of favor or disfavor

- Attitudes are evaluations of a particular person, group, action, or thing.
- When you use words like; like, dislike, love, hate, good, bad, yuck, you are describing your attitudes
- An attitude is focused on a particular entity or object, rather than all objects and situation with which it is related.
- Attitude evaluations and response to social world.
- To summarise- Attitudes are generally positive/negative views of a person (including oneself) place, thing, or event (the attitude object).

Attitude towards self is a unity of content and dynamic aspects of a personality, a measure of awareness, emotional and value acceptance of himself as a responsible beginning of social activity.

To improve attitude

- Always act with a purpose.
- Stretch yourself past your limits every day.
- Take action without expecting results.
- Use setbacks to improve your skills.
- Seek out those who share your positive attitude.
- Don't take yourself so seriously.
- Forgive the limitations of others.
- Say "thank you" more frequently.

Emotional intelligence

Emotional intelligence (otherwise known as emotional quotient or EQ) is the ability to understand, use, and manage your own emotions in positive ways to relieve stress, communicate effectively, empathize with others, overcome challenges and defuse conflict. The ability to perceive, manage and express one's emotions and to recognize and react appropriately to the emotions of others – is a valuable social skill successful physicians or nurses should possess to effectively deliver quality patient care. Emotional intelligence can help healthcare professionals to deliver better service while achieving superior outcomes.

Key attributes:

American psychologist Daniel Goleman developed an EI framework that includes five components:

1. **Self-awareness** - The ability to understand issues or conditions that elevate or permeate emotions.
2. **Self-regulation** – The ability to stay calm when emotions are running high.
3. **Social awareness** – You have empathy. You can understand the emotions, needs, and concerns of other people, pick up on emotional cues, feel comfortable socially, and recognize the power dynamics in a group or organization.
4. **Relationship management** – You know how to develop and maintain good relationships, communicate clearly, inspire and influence others, work well in a team, and manage conflict.

Conflict Resolution

Conflict, arguments, and change are natural parts of our lives, as well as the lives of every agency, organization, and nation. A conflict is a struggle and a clash of interest, opinion, or even principles. Conflict will always be found in society; as the basis of conflict may vary to be personal, racial, class, caste, political and international.

Conflict resolution is a way for two or more parties to find a peaceful solution to a disagreement among them. The disagreement may be personal, financial, political, or emotional.

When a dispute arises, often the best course of action is negotiation to resolve the disagreement.

The goals of negotiation are:

- To produce a solution that all parties can agree to
- To work as quickly as possible to find this solution
- To improve, not hurt, the relationship between the groups in conflict

There are seven steps to successfully negotiating the resolution of a conflict:

1. Understand the conflict
2. Communicate with the opposition
3. Brainstorm possible resolutions
4. Choose the best resolution
5. Use a third-party mediator
6. Explore alternatives
7. Cope with stressful situations and pressure tactics

CHECKLIST

Section - II

1. Report on Death of Prisoner
2. Medical Registers and Records

Report on Death of Prisoner

The Prisons Act, 1894: Section 15

Description: On the death of any prisoner, the Medical Officer shall forthwith record in a register the following particulars, so far as they can be ascertained, namely:

- (1) the day on which the deceased first complained of illness or was observed to be ill,
- (2) the labour, if any, on which he was engaged on that day,
- (3) the scale of his diet on that day,
- (4) the day on which he was admitted to hospital,
- (5) the day on which the Medical Officer was first informed of the illness,
- (6) the nature of the disease,
- (7) when the deceased was last seen before his death by the Medical Officer or Medical Subordinate,
- (8) when the prisoner died, and
- (9) (in cases where a post-mortem examination is made) an account of the appearances after death, together with any special remarks that appear to the Medical Officer to be required.

Medical Registers and Dispensary statistics

I. Medical Registers

1. Hospital OP/IP/Speciality Register

- Register of In-Patients
- Register of Out-Patients
- Discharge register
- Prescription book
- Register for prisoners taken for treatment in other hospitals
- Medical Officers' Journal
- Special doctor's visit register

2. Chronic, Psychiatric, sick patients register

- Register of Sick Prisoners
- Register of Mentally ill prisoners
- Register of Convalescent Prisoners

3. Laboratory and Vaccine register

- History Register
- Laboratory Register
- Health Register
- Vaccination Register

4. IP/OP indent register

- Hospital roll
- Duty register
- Case Book
- Stock book
- Expense book of drugs
- Requisition Book
- Diet register (various types-based on needs)
- Register of Surgical Instruments and Medical Books
- Register of Hospital Clothing
- Condemn register
- Linen register
- Insulin register
- Chlorination register

5. Invalid and Death register

II. Dispensary statistics:

Staff (Doctor, nurse, pharmacist, etc), Furniture (table, chair, stool, examination table, storage cabinet for records, etc), General drugs, First Aid/Emergency drugs, Essential equipment, Emergency equipment, Minor surgical equipment, Wheel chair and Stretchers, Computer, Refrigerator, Notice board/Display board, Firefighting equipment, Biomedical waste storage area

EXERCISES

Section III

1 Perceived Stress Scale

Perceived Stress Scale

The questions in this scale ask you about your feelings and thoughts during the last month. In each case, you will be asked to indicate by encircling how often you felt or thought a certain way.

Name _____ Date _____

Age _____ Gender (Circle): M/ F

Education: _____

Designation: _____

For each question choose from the following alternatives:

0 - never 1 - almost never 2 - sometimes 3 - fairly often 4 - very often

S. No	Statement	0	1	2	3	4
	In the last month how often:					
1.	Have you been upset because of something that happened unexpectedly?					
2.	Have you felt that you were unable to control important things in your life?					
3.	Have you felt nervous and stressed?					
4.	Have you felt confident about your ability to handle your personal problems?					
5.	Have you felt that things were going your way?					
6.	Have you found that you could not cope with all the things that you do?					

7.	Have you been able to control irritants in your life?					
8.	Have you felt that you were on top of things?					
9.	Have you been angered because of things that happened that were outside of your control?					
10.	Have you felt difficulties were piling up so high you could not overcome them?					

Reference: Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 24, 385-396

Calculating Your PSS Score

You can determine your PSS score by following these directions:

- First, reverse your scores for questions 4, 5, 7, and 8. On these 4 questions, change the scores like this:

0 = 4, 1 = 3, 2 = 2, 3 = 1, 4 = 0.

- Now add up your scores for each item to get a total. My total score is _____.

- Individual scores on the PSS can range from 0 to 40 with higher scores indicating higher perceived stress.

- ▶ Scores ranging from 0-13 would be considered low stress.
- ▶ Scores ranging from 14-26 would be considered moderate stress.
- ▶ Scores ranging from 27-40 would be considered high perceived stress.

Articles and Advisories

Section IV

Articles and Advisories

Articles

- Victoria Miceli (2009)., Analyzing the Effectiveness of Rehabilitation Programs, University of Rhode Island, DigitalCommons@URI
<https://digitalcommons.uri.edu/cgi/viewcontent.cgi?article=1160&context=srhonorsprog>
- Kristen D. Krause. (2020). The Impact of Resilience on Health: Lessons Learned and Future Directions. , Vol. 46, Issue 3-4, Pp 375-378
www.tandfonline.com/doi/full

Advisories

- MHA Advisory: Best Prison Practices 08 November 2010
- MHA Advisory on dealing with mental health issues of prisoners and prison inmates dated 24-06-2021
- Detention of mentally ill under trail prisoners – Guidelines issued by the supreme court on 13 December 2007
- Advisory on policy of the treatment of terminally ill prisoners – inmates TIPS (13 August 2010)

Videos & Films

Section V

Videos & Films

- Behind the Bars – A film by Dr. Dev Kanya: Based on Jail Reforms in Himachal Pradesh <https://www.youtube.com/watch?v=49vK5xJwaV0>
- Emotional Intelligence <https://www.youtube.com/watch?v=n9h8fG1DKhA>
- Stress Management <https://www.youtube.com/watch?v=15GaKTP0gFE>
- Prison Break in India https://www.youtube.com/watch?v=_ZtGQvTUtF8
- Road to Reform: <https://www.youtube.com/watch?v=3xbJrcqNmPU>

REFERENCE MATERIAL

REFERENCE MATERIAL

1. Corrections Today - Larry Siegel & Clemens Bartollas
2. Criminal Court Practice, M. Arulselvam, Malathi Publications, Chennai.
3. Criminal Justice System in India - R. Thilagaraj
4. Criminal Major Acts by Padala Rama Reddiy and PadalaSrinivasa Reddy 10th Edition (2010), Asian Law House, Hyderabad.
5. De!stress your life, Darren Wicher
6. Emotional Intelligence - Daniel Goleman
7. Handbook on the Management of High-Risk Prisoners, 2016– UNODC
8. Handbook on Prisoners with special needs, 2009 - UNODC
9. Mindfulness for Stress Management: 50 Ways to Improve Your Mood and Cultivate Calmness, Dr. Robert Schachter, 2019
10. Organisation and Management of Health Care in Prison: Guidelines, Jörg Pont, Timothy Wilfrid Harding February 2019
11. Pathways to the Management of Mentally Ill Offenders in the Criminal Justice System – United Nations Interregional Crime & Justice Research Institute
12. Prison Health Care and Medical Ethics: A manual for health-care workers and other prison staff with responsibility for prisoners’ well-being, Andres Lehtmetts, JörgPon, November 2014
13. Prison Manual of different States/UTs
14. Standard Minimum Rules for Treatment of Prisoners (the Mandela Rules), 2015 – United Nations
15. Stress Management for Beginners, Mark Madison
16. The Role of Corrections Professionals in Preventing Suicide: A study produced by the Suicide Prevention Resource Center (SPRC)

17. United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules). New York, NY, United Nations, 2010 (Resolution 2010/16)
18. Water, Sanitation, Hygiene and Habitat in Prisons – A Handbook. International Committee of the Red Cross
19. World Health Organization: Prisons and Health, Edited by: Stefan Enggist, Lars Møller, Gauden Galea and Caroline Udes
20. World Health Organization: Preventing Suicide in Jails and Prisons

Reports by Various Committees and Commissions on Jail Reforms (from 1919 to 2003)

- All India Jail Manual Committee (1957-59)
- Working Group on Prisons (1972-73)
- The All-India Committee on Jail Reforms (1980-1983)
- Group of Officers on Prison Administration (1986-1987)
- Model Prison Manual (2016)
- Relevant Law Commission of India Reports

Websites

1. Advisories & Guidelines on Prison Reforms issued by the Ministry of Home Affairs - <http://mha1.nic.in/PrisonReforms/home.html>
2. www.mha.nic.in/
3. www.bprd.nic.in/
4. www.nhrc.nic.in/
5. www.prisonreformtrust.org.uk/
6. [Www. un.org/en/ecosoc/docs/2010/res%202010-16.pdf](http://www.un.org/en/ecosoc/docs/2010/res%202010-16.pdf), accessed 8 December 2013

7. www.prisonforum.in/files/Landmark%20Judgements%20About%20Prisoners%20Rights%20and%20Prison%20Reforms.pdf
8. www.euro.who.int/_data/assets/pdf_file/0008/249209/Prisons-and-Health,-20-Primary-health-care-in-prisons.pdf
9. www.health.harvard.edu/mind-and-mood/six-relaxation-techniques-to-reduce-stress
10. www.positivepsychology.com/stress-management-techniques-tips-burn-out

Note for the Facilitator for the Panel Discussion:

Instructions to Course Coordinator

Invite a member from each of the agencies to have a panel discussion

While conducting the panel discussion, faculty should act as a Moderator

The Moderator should introduce the theme and then the panellists. Each panellist can be given around 15 minutes time to speak and discuss the role of their agencies and areas where coordination is required. After all panellists have spoken, the panel should be open for discussion with question from the participants. The key points of each speaker should be summed up by the moderator and the discussion should be concluded by the moderator well within time. The participants should be instructed to ask specific questions to the panellists.

Group Discussion:

Each Participant should be encouraged to participate. Establish Ground Rules first.

Cull out the important points that emerge from the discussion

Role Play

Develop and Present your Scenario. As a group, come up with a scenario (or case study) that illustrates stress management techniques. Make your situation as realistic as possible. Develop this brief scenario together, assigning a role to each person in your group

In your role play, you must include/demonstrate the following:

- o Healthy ways of coping with stress
- o Unhealthy ways of coping with stress
- o Stress management in different situations
- o Coping with both positive and negative stress
- o Simple techniques to be used in all walks of life.

APPENDICES

REGISTRATION FORM

- 2. PRE-COURSE ASSESSMENT**
- 3. POST-COURSE ASSESSMENT**
- 4. FEEDBACK FORM**
- 5. COURSE COORDINATOR’S REPORT**
- 6. FIELD-VISIT FORMAT**
- 7. QUESTIONS FOR ASSESSING TRAINEES**
- 8. NOTE FOR THE FACILITATOR ON PANEL DISCUSSION**
- 9. PRISON STATISTICS, 2021 (IN BRIEF)**

(Name of the Training Institute)

(Name of the Course)

(Dates)

REGISTRATION FORM

PARTICIPANT DETAILS

1. Name :
2. Date of birth :
3. Male/Female
- 4.. Qualifications :
 - (a) Academic
 - (b) Professional
5. Designation :

ORGANIZATION DETAILS

6. Department/Organization :
7. Address
8. Telephone No.
9. E-mail id :

RESIDENTIAL DETAILS

10. Address
11. Telephone No.
12. Mobile No.
13. Emergency contact details :

Signature
Name
Date

PRE-COURSE ASSESSMENT EXERCISE

Answer the following –

S. No.	Name of Unit (As given in the Course Grid) training)	Pre-Assessment (Knowledge-level before		
		Absolutely Yes	Not Sure	No knowledge
1.	Are you aware of.....			
2.	Do you have an understanding of.....			
.....				

POST-COURSE ASSESSMENT EXERCISE

Answer the following –

S. No.	Name of Unit (As given in the Course Grid) training)	Post-Assessment (Knowledge-level after-		
		Absolutely Yes	Not Sure	No knowledge
1.	Are you aware of.....			
2.	Do you have an understanding of.....			
.....				

(Name of the Training Institute)
(Title of the Course)
(Dates of the Course)

FEEDBACK FORM

(To be filled-in by individual participants at the end of the Course)

1. To what extent the Objectives of the Course were met

To a great extent 4	To some extent 3	To a limited extent 2	Not at all 1

2. Did you receive advance intimation from the Institution about the Course.if so, did you respond to the Institution?

Yes

No

3. What do you think about the structure and organization of the Course to meet the objectives?

Very well Structured 4	Well Structured 3	Some-what structured 2	Un-structured 1

4. How useful this training would be to you immediately in your job?

Very Useful 4	Quite Useful 3	Of limited Use 2	Not at all Useful 1

5. How useful this training is likely to be for the future jobs you may handle?

Very Useful 4	Quite Useful 3	Of limited use 2	Not at all Useful 1

6. Practical Orientation of the course.

Highly Practical Oriented 4	Practically Oriented to a Great extent 3	Practically Oriented to a Limited extent 2	Not Practically Oriented 1

7. How far have you been benefited from interaction with the other participants in the Course?

Substantially 4	Considerably 3	Fairly 2	Not at all 1

8. How far was the Course Material supplied relevant and related to the Course Contents?

Extremely Relevant 4	Considerably Relevant 3	Fairly Relevant 2	Not at all relevant 1

9. To what extent are you satisfied with the following:
(The Training Institution may please block the parameters not applicable)

Satisfied fully 4	Satisfied to a large extent 3	Satisfied to a limited extent 2	Not satisfied 1
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a)	Reception & Transport				
b)	Residential Accommodation				
c)	Food Quality & Service				
d)	Classroom facilities				

e)	Library facilities				
f)	Computer facilities				
g)	Interaction with the staff of the Institute				

10. Feedback on the Training/Faculty:
(Kindly fill up the Annexure)

11. Which parts of the Course did you find most helpful?

12. Which parts of the Course did you find least helpful?

13. Your overall impression of the course:

Excellent 4	Very Good 3	Good 2	Fair 1

14. Did the Course give you any specific ideas about improvements in your working situation when you get back. Yes/No

15. If yes, kindly spell them out briefly?

16. Any other comments/observations you wish to make about the Course

Date:

Place:

Name:

Designation:

Organisation:

COURSE COORDINATOR'S REPORT
on
(Name of the Training Course)
(Duration)

1. Name of the Training Institution :
2. Whether the Course was conducted :
In the Institute's Campus or elsewhere
3. Title of the Course :
4. Duration of the Course :
5. Number of participants :
(Attach final list of participants)
6. Details of Training Facilitators :
(Name/Designation/Organization)
(In-House/Guest)
7. States/UTs represented :
8. Details of Sessions with working hours :
9. List of Training Material distributed :
10. Details of Methods/Methodology used:
11. Feedback of participants :
(Attach copies of Feedback Forms)
12. Summary of the Feedback :
13. Summary of the Pre/Post Assessments :
14. Any areas of improvement noticed :
15. Overall impression of the Course :
Coordinator

Signature
(Name of the Course Coordinator)
Designation
Date
(Mobile Number/E-mail)

FIELD VISIT REPORT FORMAT

Format of Field Visit Report

Name of the trainee officer :

Batch No. :

Officer in charge of the visit :

Name of the Institute/organization visited :

Time and Date of visit :

Subject for which visit is made :

Signature of the trainee

Signature of the officer incharge of the visit

Structure of the Report

1. Introduction about the institute
2. Origin and history of the institute
3. Primary duties and functions of the institute
4. Officer with whom interacted
5. Report of the Visit [write summary of learnings from the visit] \
9. Any other Comments/ remarks about the visit and the learnings from the visit.

Questions for Assessing Trainees

1. Explain the origin and development of prisons.
2. Describe the regular activities of prisoners.
3. Explain the types of prison security.
4. Brief transtheoretical model of health promotion.
5. State prison offences.
6. Discuss the medical emergencies in prisons.
7. Write a note on prison health care.
8. What are the health problems faced by inmates in prisons?
9. Define health resilience.
10. List the communicable diseases in prison.
11. Write notes on the importance of personal hygiene.
12. Explain the procedures to follow when children are admitted in prison.
13. Write down the procedures to follow when reporting the death of a prisoner.
14. State the energy-saving techniques.
15. Brief the outcome of corrections.
16. Describe the features of Mental Health Act 2017.
17. Define Corrections and its goals.
18. Describe prisoners contact with the outside world.
19. List the sources of stress among prison staff.
20. Discuss the ways to prevent self-harm behaviour.
21. Write down the steps to prevent suicide in prisons.
22. How will you improve emotional intelligence in personal and professional life?
23. Explain the importance of personality.
24. Describe attitude and its impact.
25. List some techniques to resolve conflict.

NOTE FOR THE FACILITATOR ON THE PANEL DISCUSSION

Instructions to Course Coordinator

Invite a member from each of the agencies to have a panel discussion

While conducting the panel discussion, faculty should act as a Moderator

The Moderator should introduce the theme and then the panellists. Each panellist can be given around 15 minutes time to speak and discuss the role of their agencies and areas where coordination is required. After all panellists have spoken, the panel should be open for discussion with question from the participants. The key points of each speaker should be summed up by the moderator and the discussion should be concluded by the moderator well within time. The participants should be instructed to ask specific questions to the panellists.

Group Discussion :

Each Participant should be encouraged to participate. Establish Ground Rules first.

Cull out the important points that emerge from the discussion

Action Plan : Group Work Activity

Prison based Rehabilitation programs

Participants should be divided into groups of 5-6 members of all ranks (warder, to Superintendent) and all should brainstorm and discuss what goals to set for prisoner rehabilitation programs in a particular prison. Action Plan should be time bound and can be short term, medium term and long term. Work Sheets, Flip chart sheets and sketch pen should be distributed to all the groups and facilitator should ensure that all contribute their ideas. Each goal should make clear the responsibility-what you can do at your level (e.g. at Deputy Superintendent level), what can be done by others (e.g. at headquarters). Further review of action is essential. Make clear that there is a start and end date to the action, so the Plan is time bound.

PRISON STATISTICS INDIA – 2021

Total Number of Prison Inmates as on 31.12.2021			
Male	:	5,31,025	
Female	:	22,918	
Transgender	:	91	
Prison Population	:	5,54,034	

Prisoner Types and Demography

Convicts	Undertrials	Detenues	Others
Male 117846	Male 409346	Male 3381	Male 452
Female 4990	Female 17745	Female 88	Female 95
Transgender 16	Transgender 74	Transgender 01	Transgender 00
Total 122852	Total 427165	Total 3470	Total 547

Number of Jails, Capacity, Population and Occupancy Rate in India at the end of 2021

Type of Jail	Number	Authorized Capacity	Population of Inmates	Occupancy Rate (%)
Central Jail	148	193536	239311	123.7
District Jail	424	163606	254214	155.4
Sub Jail	564	45436	46736	102.9
Special Jail	41	7473	6582	88.1
Open Jail	88	5953	2178	36.6
Women Jail	32	6767	3808	56.3
Borstal School	19	1775	745	42.0
Others	03	1063	460	43.3
Total	1319	425609	554034	130.2

Source : NCRB, MHA (2021) <https://ncrb.gov.in/en/prison-statistics-india-2021>