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CUSTODIAL DEATHS- A RETROSPECTIVE STUDY

N.K.Shakya	Assistant Professor, Deptt.of Forensic Medicine & Toxicology. IIMS&R, Lucknow.
M.N.Siddiqui*	Associate Professor, Deptt.of Forensic Medicine & Toxicology. IIMS&R, Lucknow *Corresponding Author
Pratibha Shakya	Assistant Professor Deptt of Anatomy. IIMS&R, Lucknow.
N.B.Singh	Tutor Deptt of Forensic Medicine & Toxicology. IIMS&R, Lucknow.
O.P. Gupta	Tutor Deptt of Forensic Medicine & Toxicology. IIMS&R, Lucknow.
Nadeem Ahmad	Professor, Dept. of Community Medicine, IIMSR

ABSTRACT Introduction: Deaths in police custody are sometimes controversial and raise the questions on trust in police because some custodial deaths are due to not providing proper care at proper time, some deaths are due to complications of physical torture by police and some deaths remain suspicious.

Material and Method: In this study we retrospectively analysed the pattern of deaths in custody that were brought to the mortuary at IMS, BHU, Varanasi from July 2006 to June 2016 for medico-legal autopsy.

Result: In our study of last 10 years total of 235 custodial deaths were reported in Varanasi. Based on age, sex, religion, death pattern etc. Among total of 235 cases, 225 cases were male and 10 cases were female. Hindus were commonly involved (202) than Muslims (31) and other religion (2). Maximum number of deceased died in custody were from Uttar Pradesh, 5 from Uttarakhand and 1 each from Bihar, Jharkhand, West Bengal, Haryana and Punjab. Deaths among convicted prisoners were dominated (187) over under trial prisoners (48). 210 deaths were in jail and 25 in hospital. 197 deaths were attributed due to natural cause, 28 were due to unnatural cause mostly suicidal in nature and in 10 cases cause of death remains undetermined.

Conclusion: In my study most common cause of the custodial death is natural cause and this may occur due to the various factors like poor nutritional status, old age, lack of good health facilities, poor hygiene, overcrowding in jails etc.

KEYWORDS: torture, Autopsy, Custodial death.

INTRODUCTION

Legally custody is defined as, any point in time when a person's freedom of movement has been denied by law enforcement agencies, such as during transport prior to registering a case, or during arrest, prosecution, sentencing, and correctional confinement.

Death in custody is defined as death occurring in some form of custodial detention, such as police cell or prison.

There are numerous cases where the police officers have misused their powers on the people and toyed with their lives. The police officers, who are regarded as the custodian and guardian of law, have acted in just the contrary manner and have failed to protect the very basic right to life guaranteed by article 21 of the constitution.

Custodial violence is a matter of concern. It is aggravated by the fact that it is committed by persons who are supposed to be the protectors of the citizen.

Though international laws criminalize torture, torture enjoys unprecedented license in India. Torture seems to be legalized in India.

Some commonly used methods of torture by police are beating, mutilation (chopping of ears, nose, fingers etc.), burn by cigarette or boiling water, inserting heated metal rod into anus, suspension by wrist or ankle, forced immersion of head into contaminated water, electric shock, disallowing sleep, solitary confinement in a dark place, inserting foreign body into genitals, undressing before others or raping the female victim etc.

The Indian Constitution has conferred many rights on the citizen of India and its importance needs no explanation. Hence, the courts as well as the police officers, that is, the Law Enforcement Officers of the State should strive to prevent anyone from committing a breach of the same.

In contrast to general belief, deaths occurring in custody could be due to natural causes along with un-natural causes. Natural deaths may be due to disease or intoxication already existing in the deceased prior to the custody and aggravated thereafter or may have developed after taken into the custody.

As per the NHRC guidelines, all custodial deaths are to be reported within 24 hrs and post-mortem examination is to be conducted by a panel of doctors & videography has been made mandatory. NHRC Report from 2001-02 to 2006-7 showed an increase in custodial deaths all over India. Though majority of the cases in custody die due to natural causes, but issues such as negligence in medical aid or improper healthcare facilities cannot be ruled out.

Having knowledge and data regarding such deaths is important to focus attention on prison medical services and can facilitate the implementation of preventive programs. Such studies would also guide the prison authorities in setting priorities for the allocation of their healthcare services and budget.

But for this purpose updated studies of morbidity and mortality are required and such data is lacking in India.

AIM OF STUDY

Main concern of this study is to see the pattern of custodial deaths in Eastern U.P. Zone specially in central and district jails situated in Varanasi and near by districts to bring awareness among the law enforcement agencies so that proper care of the person in custody can be taken.

MATERIAL AND METHOD

This is a retrospective analysis of 93 deaths in custody above 60 years of age that have occurred from July 2006 to June 2016 in and around Varanasi area(Eastern U.P. Zone) and body was brought to the mortuary of Dept. of Forensic Medicine, IMS,BHU. Varanasi. Relevant information was taken from record maintained in Department .

Collection of data include questionnaires schedule recorded on preformed Performa and interviews session at the time of autopsy with the concerned investing officer, parents of victims, other family members and relatives of the victim, neighbours and other persons accompanying the dead body.

Data also collected from police inquest, post-mortem register and reports, hospital memos in hospitalized cases.

RESULT Table-I Year wise case distribution

YEAR	NO. OF CASES
2005(1 st July -31 st December)	04
2006	08
2007	09
2008	11
2009	11
2010	07
2011	13
2012	06
2013	09
2014	10
2015 upto 30 June	05
Total	93

Maximum number of custodial death were noted in year 2011. There were 13 custodial deaths out of total 93 deaths.

Table-II Cause of death

1) Natural Cause-

1) Natural Cause-		
CAUSES	CASES	
Septicaemia	48	
Cardiac disease	12	
Pulmonary disease	08	
CNS disease	05	
Hepatobilliary disease	03	
Chemical peritonitis due to intestinal	01	
perforation		
Renal disease	01	
TOTAL	78	

Out of 93 Custodial deaths, 78 deaths, 78 deaths occured due to natural cause in our study. Total custodial deaths due to unnatural cause were 11. There were 4 custodial deaths due to unnatural cause.

2) Unnatural Cause-

CAUSES	CASES
Poisoning	03
Head injury	02
Hanging	02
Blunt trauma(torture by police)	01
Burn	01
Throttling	01
Accidental	01
TOTAL	11

Most common natural cause of custodial deaths was septicaemia (48 cases out of 78 custodial deaths due to natural cause). 2nd most common cause was cardiac disease.

3) <u>UNDETERMINED CAUSE</u>	04

Most common natural cause of custodial deaths was poisoning (03 cases out of 11 custodial deaths due to unnatural cause). 2nd most common unnatural cause of custodial deaths were head injury and hanging.

Table-III Age distribution

Age(Years)	No. of cases
61-70	31
71-80	46
>80	16
Total	93

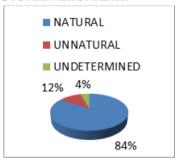
Maximum custodial deaths in our study were in 71-80 years age group. There were 46 custodial deaths (about 50%) in 71-80 years age group out of total 93 custodial deaths. 2nd highest no. of custodial deaths were in 61-70 years age group.

Table-IV According to region

8 8	
REGION	NO.OF CASES
UTTAR PRADESH	84
UTTARAKHAND	4
WEST BENGAL	1
JHARKHAND	1
BIHAR	1
HARYANA	1
PUNJAB	1
TOTAL	93

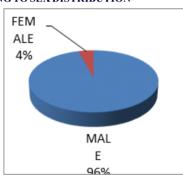
Maximum no. of prisoners (84 out of total 93 cases) were related to Uttar Pradesh because crime rate is very high. Prisoners related to Uttarakhnd were 4 out of total 93 prisoners. Other prisoners were related to West Bengal, Jharkhand, Bihar, Haryana, Punjab.

ACCORDING TO MANNER OF DEATH-



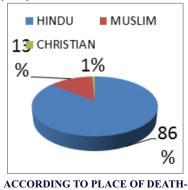
Most common cause of custodial death (84%) in present study was natural cause(Septicaemia, cardiac disease, pulmonary disease etc.) 2nd most common cause of custodial death (12%)was Unnatural cause (Poisoning, Head injury, Hanging, Blunt trauma due to torture by police etc.

ACCORDING TO SEX DISTRIBUTION-

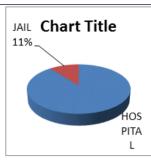


ACCORDING TO RELIGION-

Most common custodial deaths (96%) were observed in males in present study. Only 4% custodial deaths were seen in females.



According to religion, most of custodial deaths (86%) were observed in Hindu. Second most common custodial deaths (13%) were seen in Muslims.



Maximum no. of custodial deaths (89%) were reported in Hospital. Jail was2nd most common place (11%) where custodial deaths were reported.

DISCUSSION

Finding of our study is supported by findings of Indian study done by Y.S.Bansal and Akhilesh R. Jhamad et al where most common cause of custodial death were natural cause and deaths were more in Hindu males and mostly in hospital.

Y.S. Bansal et al analyzed a total of 90 cases of custodial death. Out of these, 85 were males (95%) and 5 were females (5%), the eldest prisoner was 85 years old & the youngest was of 16 years. Natural causes accounted for 80 (89%) deaths, whereas 10 (11%) cases were of unnatural causes. Findings of our study are supported by these findings.

Sixty three percent cases were reported from the Punjab zone,27% from Haryana,7% from Chandigarh,2% from Uttar Pradesh and 1% from Himachal Pradesh. While in our study maximum no. of prisoners (84 out of total 93 cases) were related to Uttar Pradesh. Prisoners related to Uttarakhnd were 4 out of total 93 prisoners.

Akhilesh R. Jhamad et al in their study retrospectively analysed majority of cases were natural (10 out of 15 deaths) while only one fifth cases were un-natural. Our finding is supported by these findings. Among the various causes of natural deaths, infectious diseases (tuberculosis) made up to half of all the cases but in present study septicaemia was the most common natural cause of custodial death.

Akhilesh R. Jhamad et al found in their study that as far as pattern of un-natural deaths are concerned, one case of accidental death was during a police chase.

Our findings are in oppose to the study of Wendy L Wobeser et al and Babita D Bhana where they concluded that un-natural deaths such as suicidal or shootings by police were more common.

Our finding is in oppose to the study done by Seena Fazel et al [4] where a 20 year case study concluded that more than half of the cases being of circulatory diseases while respiratory diseases were second.

This study suggests that most of the deaths occurring in custody in this part of India are natural and they mainly succumbed to their illness.

An important fact responsible for the deaths occurring in custody is the condition of the jails in India. Overcrowding, unhygienic environment, malnutrition and non-availability of health facilities are the conditions which cause spreading of various communicable diseases such as various vector-borne diseases, blood-borne diseases and sexually transmitted diseases.

This fact explains why there are more natural deaths in Indian jails. All these cases, be it natural deaths or un-natural, show some sort of carelessness and disrespect for human life on the part of authorities.

Keeping all these in view, National Human Right Commission has instructed the jail authorities to follow a formal medical screening format whenever a new inmate enters the jail so that health status of the inmate can be known beforehand and can be managed accordingly.

CONCLUSION

In my study most common cause of the custodial death is natural cause and this may occur due to the various factors like poor nutritional status, old age, lack of good health facilities, poor hygiene, overcrowding in jails etc.

2nd most common cause of custodial death in my study is unnatural death due to various causes which may occur due to improper care, torture during enquiry, arrest in cases of false allegation, political interference etc.

SUGGESTIONS

Though it is true that not every case of death in custody will be avoidable but it is possible to reduce the number of such deaths by preventive measures. An attempt had been made in this study to identify the mortality pattern in custodial setting and some measures are suggested as below:

1) Reception Screening:

The prison authorities should have detailed history of the inmate along with treatment record, follow-up record, investigations, any operative measures taken etc. History regarding alcohol dependence/drug abuse should be recorded. Any history of psychiatric illness needs attention.

2) Medical Facilities:

A structured delivery of health care services can be provided by setting -Prison Health Services || .

3) Improving the Prison Condition:

The prison conditions need improvement relating to the design and structure. Decongestion of the cells is needed. The dietary plan for the inmate as per illness (for e.g. chronic renal failure, diabetes mellitus) should be considered.

4) Training of Custodian People:

The people related with custodial responsibilities should be properly trained for providing primary aid and to recognize when medical intervention is required.

- 5) Education for health(training for yoga& meditation)
- 6) CCTV installation + No political interference.
- 7) Accurate custody records of cell visits.
- 8) Developing a strategy for risk assessing drunk and drug-using detainees
- 9) Setting up a detoxification centre for drug and alcohol-misusing detainees.
- 10) Upgrading technology/equipment.

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