

DEATH OF PRISONERS: FAILURE OF SENTENCING

**Series of Monitoring and Documentation
on Human Rights Violations in Indonesia**



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INTRODUCTION

The birth of prison is thought to be in line with the change of sentence objective, from retaliation principle to rehabilitation principle. Criminal perpetrator is not only acknowledged as a person that causes suffering, but also as someone who has committed a mistake and could be guided again. However, prison sentencing policy implementation in the end betrays this aspiration.

Problems that are encountered are such as prison over-capacity, unfulfilled human rights, violent culture formation in the prison, high recidivism rate, and social relations disconnection between the inmates and their family. These show that prison sentencing discourse still contradicts the initial objective of prison. The rationale of the birth of prison is discontinued because of the situation's contradiction and irrationality.ⁱ Among those problems, the problem of death in the prison is the most contradictory characteristic of sentencing discourse. It is as if death makes prison absurdity perfect.

Besides the rhetoric sentimental reason that no one wants to die inside prison, death also contradicts prison's rehabilitative objective. Assistance that is participated by the inmates – except for those with lifetime sentence – is useless or gone because it cannot be practiced in the targeted destination, which is in the community outside prison. Prison then becomes not as a transit or temporary place, but it becomes inmates' last station, because in the prison they meet their destiny as humans: death.

The condition is exacerbated if the death is not normal, such as because of accident, homicide, suicide, and substance overdose inside prison. In the United States, the country whose inmate population is the biggest in the world, around 967 inmates died inside prisons in 2013. About 34% of the total number of death was caused by suicide.ⁱⁱ

Because prison is a state facility –at least in Indonesia—therefore, the main actor that is responsible for deaths inside prisons that are not normal is the state, represented by the Directorate General of Corrections. Although death could be caused by the inmates themselves, corrections institution is the manager that has the task to ensure that prisons could fulfil its main objective as rehabilitation media, including in carrying out management so that riot will not happen and suicide can be prevented.

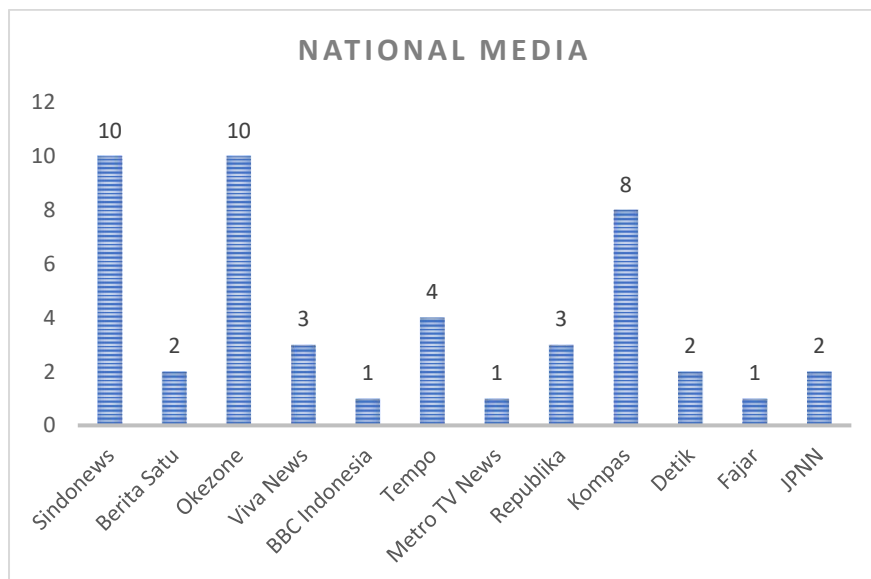
Regardless the absurdity of sentencing implementation, this practice is still considered as important to exist because Indonesia does not have alternative sentences that have been proven to have good implementation. However, it does not mean that the irrational practice in prison-sentencing that causes death should not be challenged and fixed. Because of this reason, Community Legal Aid strives to document and monitor death events inside correctional facilities in 2016. Hopefully this documentation could clarify the absurd situation of death inside Indonesia's correctional facilities.

MONITORING AND DOCUMENTATION METHOD

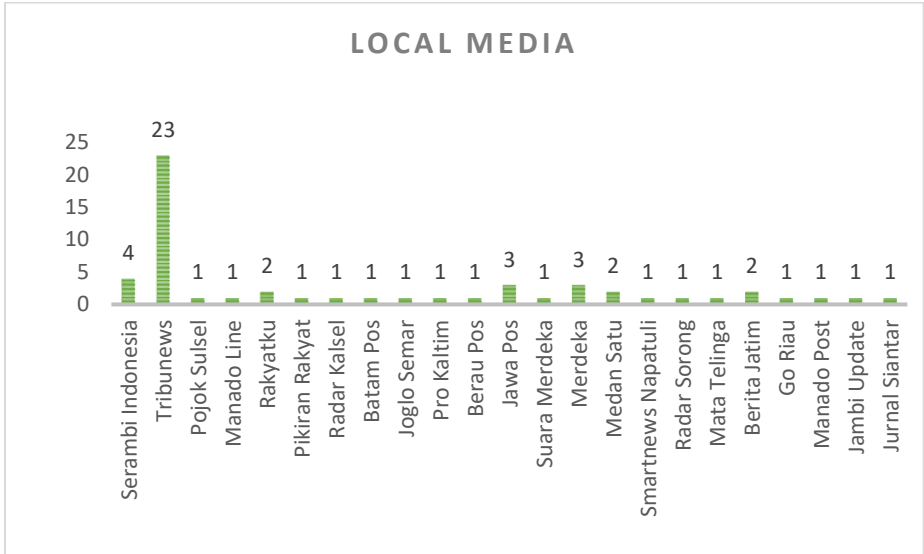
Media monitoring was conducted by reading media content regularly, identified, saved, and analysed it. ⁱⁱⁱ The collected data became the basis to seek conclusion of trend and scope of an issue. Media monitoring is usually used to assist researcher in reviewing specific issue change that happened from time to time through media coverage. ^{iv} Media monitoring this time aims to analyse the pattern and trend of inmate death events inside correctional facilities that were captured by media during 2016.

Data collection was conducted regularly twice a week from February to August 2016, with weekly checking. Media that were targeted and monitored were online mainstream media. Considering the scope of research is throughout Indonesia, the data consists of national and local online media news. As many as one hundred and three (103) news were collected and the media source demography is as follows:

National Media



Local Media



Online media monitoring requires key words related to the issue. ^v We input certain key words such as 'dies correctional facilities', 'inmate dies', 'inmate dies sub-district police', 'inmate dies district police', 'dies inside the cell', 'dies in correctional facility', and 'inmate dead'. We consider those keywords are representative enough and relevant with inmate death news.

The weakness of this method is we did not monitor any printed media although perhaps news about inmate deaths was also reported there. Another weakness about this media monitoring is it is prone to insufficient details on the event. Besides that, different event chronology narrations between one news to other news hamper data documentation process. This media monitoring also did not calculate data accuracy based on the monitored media's credibility.

The news then documented into a table with several components, which were pre-determined by documentation team. These components are components that are relevant to death inside prison issue, such as the date of news, suspected reasons of death, crime committed by the deceased person, etc. Through these components, data then managed and analysed for pattern tendency.

DATA RESULT AND ANALYSIS

Event Location

This report looks into the type of facilities where deaths were encountered. In Indonesia's criminal system, there are at least three types of correctional facilities, which are Police Office, Detention House, and Correctional Facility. Those three are under different managements.

Police detention facility could be located on Indonesia National Police's Headquarter, Provincial Police, District Police, and Sub-District Police office. Police detention maintenance responsibility is held by several actors stipulated by the Regulation of the Head of Indonesia National Police^{1.vi}. Meanwhile, the responsibility on the Detention House and Correctional Facility is held by the Directorate General of Corrections (Ditjenpas).

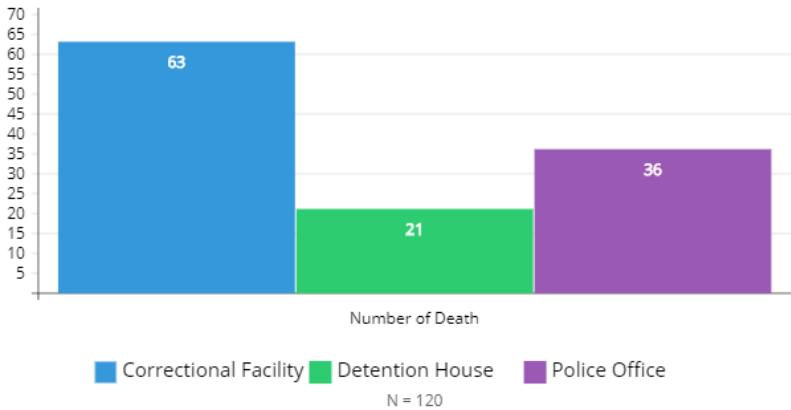
However, if detention happens during an ongoing legal process (before court decision), then, investigator or prosecutor is responsible for the inmate. Detention facility at the police office or detention house only function as a 'transit' during the legal process of the defendant. After court decision and the decision already have permanent legal power, s/he will be transferred to correctional facility and becomes the responsibility of Directorate General of Corrections to be assisted fully.

Based on these correctional types, we also divide detention types where deaths happened into three: Police Office, Detention House, and Correctional Facility. Below is location distribution diagram of 120 inmate death locations throughout Indonesia in 2016 that we successfully documented.

¹Each detainee of police has different institutions in charge. Indonesia National Police Criminal Investigation Division detention centre is managed by The Head of Detention and Evidence, Administration Planning Bureau, Criminal Investigation Division. Detention house of Water Police of Indonesia Police is managed by The Head of Detention and Evidence, Operational Assistance Bureau, Security Management Division. The Head of Sub Division of Detention and Evidence of Detachment 88 Operational Division is responsible for Mobile Brigade Corps detention centre. For smaller police unit, director of detainee and evidence is responsible for provincial police level and the head of detainee and evidence issue is responsible for sub-district police level.

Number of Deaths

based on Location



From the diagram above, we could see that most of the deaths happened inside correctional facility. This is perhaps because of the lengthy time spent inside correctional facilities, which is longer than in two other locations. The detention time limit in police office and detention house is appropriated with the criminal court process. Based on the Criminal Procedural Law, someone can be kept in detention in police detention or detention house for two hundred (200) days maximum^{2.vii}. In certain conditions, the detention period can be extended for maximum three hundred and eighty (380) days^{3.viii}.

Different with police detention and detention house, the period someone has to spend inside correctional facility is determined by judge's court decision therefore, the length is different from case to case. However, generally someone will spend more time in correctional facility compared to the other two detention locations.

²The maximum detention period inside police detention is sixty (60) days. Prosecutor can detain someone for maximum fifty (50) days, meanwhile, district court judge can detain someone for maximum ninety (90) days. This number has not calculated the number of inmates that are still inside detention house for appeal or cassation.

³For example, if someone suffers from significant physical or mental problems or if the prosecutor demands nine years or more sentence, detention in police office or detention house can be extended, each for 60 days and 12 days. This number has not calculated the number of inmates that are still inside the detention house for appeal or cassation.

Besides the lengthy period spent in those detention facilities, another factor that causes high death rate inside correctional facility is the population. The population varies in three different detention types. Correctional facilities and detention houses in Indonesia have high number of over-capacity, which is more than 52,841 people⁴ from the existing facilities in 2014.^{ix} Meanwhile, there is no formal record about the total number of inmates in police office, but we have never heard about the discourse of over-capacity in police's detention.

Still related to place, we also categorized the data based on provinces where deaths happened. Below is the area table:

Death Incidents by Province

Province	Frequenc		Provinsi	Frequenc	
	y	%		y	%
Aceh	5	4,2	Lampung	6	5,0
Bali	5	4,2	Maluku	1	0,8
Bangka Belitung	1	0,8	Maluku Tenggara	1	0,8
Banten	2	1,7	Nusa Tenggara Timur	2	1,7
Bengkulu	6	5,0	Papua	1	0,8
DKI Jakarta	4	3,3	Papua Barat	2	1,7
Jambi	3	2,5	Riau	7	5,8
Jawa Barat	14	11,7	Sulawesi Selatan	9	7,5
Jawa Tengah	5	4,2	Sulawesi Tenggara	1	0,8
Jawa Timur	15	12,5	Sulawesi Utara	3	2,5
Kalimantan Tengah	4	3,3	Sumatera Utara	14	11,7

⁴Directorate General of Corrections report does not differentiate between inmates in correctional facilities and detention houses. Hence, perhaps the number overlaps. Therefore, we cannot compare whether deaths that happened in those two places are equal to the number of population.

Kalimantan	2	1,7	Yogyakarta	2	1,7
Timur					
Kepulauan Riau	5	4,2			
Total = 120 orang					

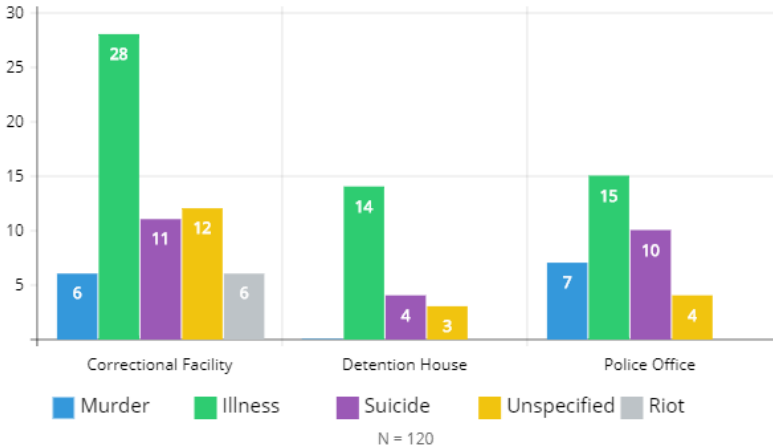
Deaths occurred in 25 provinces. The most deaths occurred in East Java. Out of 120 deaths 15 occurred there or 12.5%. Meanwhile, West Java and North Sumatera both accumulated 14 cases (11.7%). The lowest numbers of cases were found in South-East Sulawesi, Papua, Maluku and Bangka Belitung where there was only 1 case discovered in all those places.

These figures are dependent on local news. For example, Papua may have less news coverage on inmate deaths as there are fewer media organizations there. Aside from that, there is also one prison with more deaths discovered as there were riots inside the prison, as seen in Malabero correctional facility in Bengkulu.

Cause of Death

After knowing about numbers of deaths based on location, the next data that we seek is the cause of death. This kind of data has a validation weakness since many news are sometimes published when the allegation regarding cause of death is still premature or could not wholly proven. Despite of the weakness, we still present the data about cause of death in this report to give picture illustrating the possible cause of death of prisoners.

Cause of Death



It can be seen that illness is the greatest cause of death in every type of detention. If summed up, the total number of death because of illness is 57 cases out of 120 deaths, or about 47.5%. The second largest cause of death with a total of 25 incidents is suicide, or 20.8% of the total deaths. There are also 19 deaths with unknown causes, 13 deaths from murder, and 6 deaths from riots.

We classify some cases into unclear deaths if we find the following in the news:

1. Disagreement about what causes death, such as whether the person is ill or killed;
2. The cause of death is still under investigation;
3. The reason for death is not listed on the news.

The most common in unclear death is the conflict between families who say that their family members suffer abuses that leads to death and the responsible party who say that the cause of death is illness. Documented news does not provide any conclusion to these allegations.

Examples of such contentions have occurred in Bayongbong Sectoral Police (Polsek), Garut, where the family of the detainee who died suspected there was abuses committed during detention. However, Garut Resort Police (Polres) dismissed the allegation by stating that the detainee was ill.^x Similar thing also happened to a prisoner in Tanjung Pinang Correctional Facility, Kepulauan Riau Province. The family suspected there was abuses committed by the

Correctional Facility officers, causing the prisoner to die but the Correctional Facility authorities denied this allegation.^{xi}

We also found that there is little explanation on the follow-up of such cases. For example, when the family stated the oddity and requested an autopsy of the dead detainee, there was no explanation as to whether the autopsy was really conducted.

An autopsy is a valid way to identify the suspicious cause of someone's death. Because an autopsy is the authority of Police Doctors to support investigation and inquiry^{xii}, a new autopsy can be performed when a family reports an unnatural death in the detention. The data obtained from this media monitoring cannot provide an explanation as to whether the family has reported allegation of abuses or murder to the police, or simply asked the person in charge of the detention to conduct an autopsy.

From the above data, we can also see six cases of death due to riots. Five out of the six deaths were caused by a fire that occurred during the prison riot at Malabero Correctional Facility, Bengkulu. This riot that resulted in five deaths began with resistance of the detainees when Bengkulu Province National Narcotics Agency (BNNP) conducted a raid.^{xiii} One other person died from the riot in Kerobokan Correctional Facility, Bali, which was caused by a clash between members of two mass organisations inside the Correctional Facility.^{xiv}

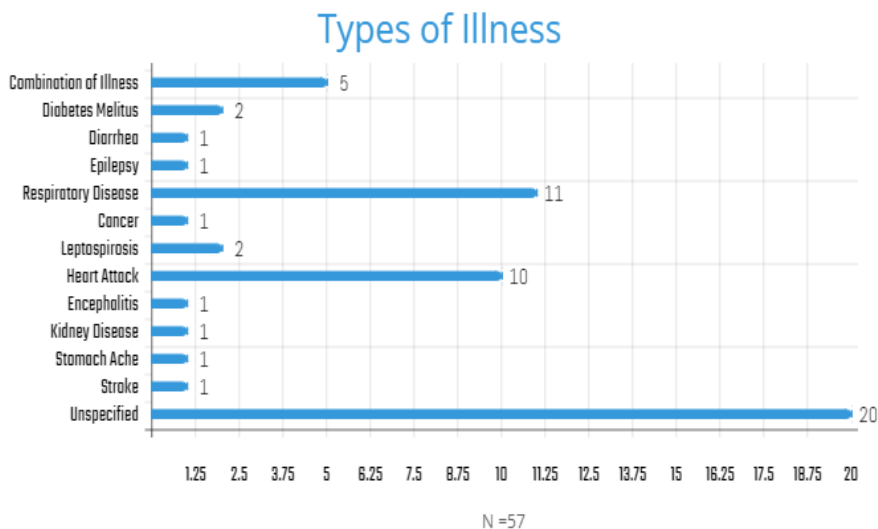
The first riot case suggests that death can be caused by aggressive action against the search for narcotics in Correctional Facilities. While the second case suggests that there is still potential of conflict between gangs albeit in Correctional Facilities. These two death cases show how the Directorate General of Corrections (Ditjenpas) failed to conduct training in these Correctional Facilities.

Types of Illness

The death of detainees in 2016 is mostly caused by illness. To analyse this problem more deeply, we did a grouping of diseases in the hope that existing data can reflect the quality of health services inside the prison.

In calculating the illness suffered to cause the detainee to die, we used the information provided in the news. Unfortunately, there are many cases we

marked as 'unspecified' because there is no explanation of what diseases they suffer. Here is a diagram of the type of diseases suffered by the detainees:



If we exclude the category of disease that is unclear, then the most common disease suffered by detainees is respiratory disease as many as 11 out of a total of 57 cases (19.3%). Diseases often quoted in the news are tuberculosis (TB) and asthma. Various problems in detentions, such as overcapacity, unavailability of proper healthcare, delayed delivery of health services, and limited mobility of people in prisons, have made a large TB prevalence.^{xv} This puts people in detention in one of the key populations of TB sufferers. When it is known that the spread of TB in Correctional Facilities is high, and the authorities do not overcome it, it can be said that the government has ignored the fulfilment of right to health of detainees or prisoners, and thus violates the human rights of detainees or prisoners.^{xvi}

In addition to cases of respiratory disease, the most common illness is heart disease (17.5%). Combined diseases that cause complications also contribute to a considerable number of deaths (8.8%). The rest there are also other diseases that contribute a few deaths, such as brain inflammation, cancer, stomach pain, and others.

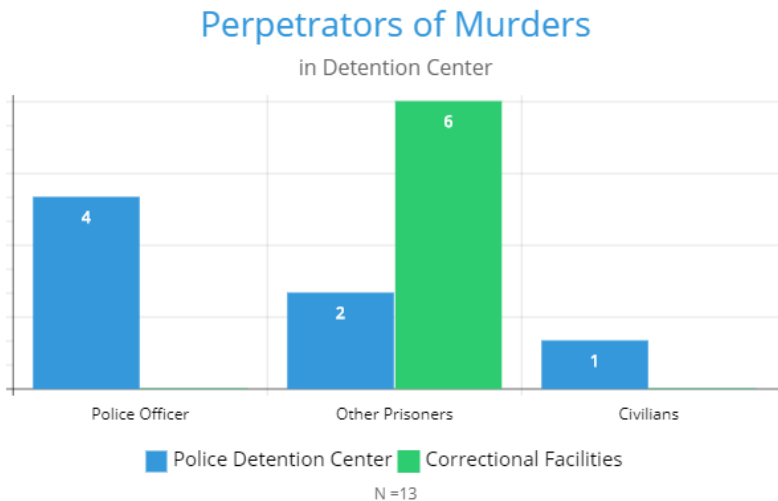
The large number of detainees or prisoners who died from diseases made us question the feasibility of health services in places of detention, particularly in Correctional Facilities and Detention Centres. The research results of the Centre for Detention Studies in Correctional Facilities in Kupang, Manado, and Pontianak in 2015 show differences in the level of services. Health services by doctors/medical workers in Kupang are considered very poor while in Manado and Tondano, the health services are considered very good. Similar assessment also occurs in the aspect of infectious diseases prevention. However, considering other aspects of health services, such as routine health examinations, services information, and health control, the average optimal health service is still far from expectations.^{xvii}

The right to health is the right of all people without exception. Health services should be provided to all without discrimination. This means that even if the person holds a status as detainee or prisoner, he or she should still get the optimal healthcare. In Correctional Facilities, free healthcare for every detainee is the responsibility of the government.^{xviii} The State should ensure that in closed institutions such as Correctional Facility and Detention Centre, there are adequate health service clinics.^{xix} If the illness suffered by a person is so severe that it cannot be borne by the clinic, then the person should be immediately transferred to another health facility that is more capable, although that facility is located outside of the Correctional Facility.^{xx}

Further research is needed to be done on the implementation of referral health services for detainees or prisoners to health facilities outside the Correctional Facility in view of the indication of referral facility abuse in some Correctional Facilities that have caused only a handful of detainees who are financially capable can benefit from this facility.^{xxi} Some diseases such as heart disease, kidney disease, brain inflammation, and cancer may require serious treatment that cannot be supported by health facilities within Correctional Facilities. By law, Indonesia is doing good enough because the referral facility for detainees or prisoners is possible if there is a recommendation from the Correctional Facility doctor and a permission from the chief of Correctional Facility.^{xxii} However, monitoring is still necessary on the implementation of such policy.

Murder Perpetrator

The number of deaths due to murder in places of detention throughout 2016 is 13 cases or 10.8% of the total deaths. Murder can occur because of torture or abuses that ends in death and is perpetrated by various actors. The diagram below illustrates the categorization of perpetrators and the type of detention where the death occurred:



From 13 cases, 8 murder cases were committed by other detainees or of 61.5%. Meanwhile, police members as perpetrators are in the second position with 4 cases, followed by murder by civilians as much as one case. Also can be seen from the above diagram, death cases due to murder can occur in police detention centres (7 cases) and correctional facility (6 cases).

There are four murder cases involving the use of sharp weapons, as in the case in Rajabsa Correctional Facility, Cirebon Correctional Facility, Salemba Detention Centre and Tanjung Gusta Detention Centre. The interesting is, the perpetrators of all these four cases are fellow detainees. These emerging cases illustrate how security in Correctional Facilities has not been properly implemented, as proven by the continued success of sharp weapons to enter the Correctional Facilities.

Six of the eight deaths caused by fellow detainees occurred in Correctional Facilities. This is in line with the research results of the Center for Detention Studies which shows that almost all Correctional Facility inmates experience

violence, whether in the form of being snapped, beaten, slapped, shocked, or other forms of violence. In Nusakambangan Permisan Correctional Facility for example, there are still many canings of prisoners.^{xxiii} Correctional Facility officers can even be actors involved in the abuse, either as perpetrators, or in a condition in which he or she is aware of the abuse but does not take any action to prevent it or punish the perpetrator.^{xxiv}

The glorification of 'dignity' and 'respect' becomes the cause of why violence at least in the form of snaps is still often done by officers, as well as fellow detainees. This is exacerbated by the lack of understanding about the rights of detainees and prisoners to be free from violence, and no culture built to crack down the abuse. Therefore, there needs to be intervention aimed at enhancing human rights awareness for detainees, prisoners, and persons in charge in detentions, as well as strengthening the transparency and mechanism for reporting violence in detentions.

Other than murder by fellow detainees, there are four cases in which the perpetrators are members of the police and Detachment 88 (Densus 88). Cases of deaths from murders committed by state officials deserve special attention. This shows an indication of torture against detainees. Torture is an act perpetrated by or with the knowledge of government officials causing great suffering both physically and mentally, for particular reasons, one of which in order to obtain recognition.^{xxv} The practice of torture in the inquiry process is still something that is commonly used. Data from KontraS shows that there have been 134 torture incidents during the period of May 2015 – May 2016.^{xxvi} In accordance with the data on the place of death, the incidence of torture is also mostly experienced by detainees, either detained in police detention, Detention Centre, or Correctional Facility.^{xxvii}

The definition of torture also states that the involvement of government officials is not only in the form of participating in the abuse or ordering the torture to occur, but also the omission or the failure to prevent the abuse whilst it should have been in their knowledge, has fulfilled the element of torture.^{xxviii} There is one case with this condition, where the murderer is a resident. This murder case happened to the perpetrator of the children of Sabu Barat SDN 1 attack. Some residents forced their way into the detention place and attacked the perpetrator to death. Police say they were powerless to secure the suspect.^{xxix} Even if the police are unable to stem an angry mob, they should be able to take preventive measures, such as by moving the

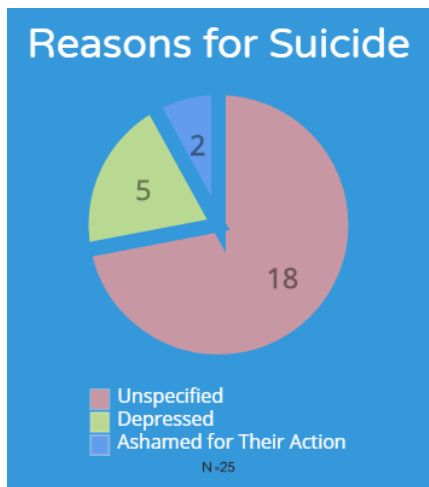
detainee to a more secured facility when they suspect or know the possibility of such occurrences. Police negligence to protect the suspect not only makes the inquiry process cannot run fairly, but it also violates the right to legal protection as stipulated in the Indonesian Constitution.^{xxx}

Torture is a violation of human rights. It is also a violation of the right to a fair trial so torture needs to be acted upon firmly. A good example is applied by the North Sumatra Police to establish two suspects for the death of a drug detainee at Tobasa Resort Police (Polres). The police promised to continue the process of examination of these two police suspects and present disciplinary sanctions in the form of dismissal without respect.^{xxxi} Unfortunately, not all police are willing to reveal the murder cases that occurred in the region. As explained in the diagram in the previous sub chapter, there are still many unclear deaths because the person in charge of the detention places covered up the incident of death.

Reasons for Suicide

Suicide is the second leading cause of death after illness, 25 cases or 20.5% of the total number of cases. The suicide motives of detainees or prisoners can

be seen from the following diagram:



As noted in the table, it is unfortunate that most of the suicide case reporting is not accompanied by clear information about the reasons for suicide (18 cases or 72%). Only seven cases are identified with clear reasons, namely depression (20%) and shame for their actions⁵ (8%).

Unfortunately, in the news it is not sufficiently depicted what kind of depression experienced by the victim. Mental problem of depression can be

⁵ It is also possible that the two cases whereby detainees are ashamed of their actions, they also have mental disorders. However, because in the news that we noted, there is no mention of the possibility of mental disorder, we classified the cause of death as it is, that is because of shame of his own actions.

divided into major depression, bipolar mood disorder, dysthymia, and cyclothymia.^{xxxii} Depression is a serious mental problem that requires serious help. Depression is also a psychological problem that is most often associated with suicide.^{xxxiii}

In one of the cases of suicide, the victim was allegedly depressed and decided to end his life. This indication arises because the victim continues to shout, until finally he was transferred to an isolation cell because it is considered to disturb other convicts. In this isolation cell, the victim ends his life by hanging himself. The victim was a prisoner of a murder case who just underwent four years of his development period from a total of 12 years of prison.^{xxxiv}

Although different in reasons, the above cases show a basic equation, namely the lack of government attention to the psychological condition of the detainees or prisoners. As can be seen from the cases discussed above, when a detainee is allegedly having a mental disorder, he is not given mental health services, but he is confined in an isolation cell. It may be that the isolation cell that ultimately exacerbates his mental health.

Referring to Law No. 18 of 2014 on Mental Health, the government is responsible for carrying out activities of mental health efforts including in correctional facilities.^{xxxv} Inclusion of Correctional Facilities as the place for mental health activities is not without a cause. Prisoners who undergo their sentence in Correctional Facilities not only lose some of their freedom, but they are also socially isolated, dissociated from the family, and deprived of social support.^{xxxvi} All of these things can cause psychological disorder that prompts a person to commit suicide.^{xxxvii}

Prisoners are vulnerable to suffer from mental disorders from the beginning of detention either before or after the verdict. Those who have not been sentenced will experience the stress of being isolated abruptly, shocked at the prison environment, and worried about their future.^{xxxviii} While those who have received the verdict, as in the cases above, usually experience stress due to internal conflicts with officers or other residents and frustrations over the failure of their legal efforts.^{xxxix} This group is most vulnerable to commit suicide when their prison period passes through four to five years.

The symptoms of a person having mental disorders should be detectable with responsiveness by the Correctional Facility officers. The decision to transfer the victim to isolation cell becomes an example of ignorance of the Correctional

Facility officers in handling psychological problems of prisoners.^{xi} One of the ways to prevent suicide that can be done in Correctional Facilities is to provide an understanding of mental health to the relevant Correctional Facility officers.^{xli} It is proven from the result of CDS research, information on mental health services is still very low.^{xlii}

Therefore, in the fulfilment of the right to health, it is proper for the person in charge of any detention to provide psychological services based on scientific evidence for detainees to avoid or overcome mental disorders that are vulnerable to emerge. Failure to provide access to quality mental health services is a violation of the right to health of the suspects and convicts. The availability of quality services in places of detention, and the accessibility of information to such services are important elements in the fulfilment of the right to health.^{xliii} Unfortunately, until now Indonesia has no standard guidelines of mental health services in places of detention. Given that suicide incidents this year is quite a lot, the making of mental health services guideline in places of detention has become something important.

Another thing that is also concerning is the fact of 18 cases whereby the suicide motives have not been ascertained. Suicide issues in places of detention should be seriously investigated. Other than mental health factor as described in the above analysis, there may be other factors to be reckoned with in preventing suicide issues in detentions.

Demographic Data of Detainees Who Died

The detainees who died entered the criminal justice system because of various vases. From our data, there are at least twenty criminal acts found, as can be seen in the table below:

Criminal Acts of the Detainees Who Died

Criminal Acts	Frequency	%	Criminal Acts	Frequency	%
Combined Criminal Acts	3	2.5	Theft	22	18.3
Domestic Violence	1	0.8	Violences	5	4.2

Violence against Children	8	6.7	Circulation of Counterfeit Money	3	2.5
Corruption	5	4.2	Embezzlement	2	1.7
Drug Abuse	33	27.5	Fraud	1	0.8
Document Forgery	1	0.8	Gambling	1	0.8
Illegal Logging	1	0.8	Fight	1	0.8
Murder	9	7.5	Trawling	1	0.8
Extortion	1	0.8	Terrorism	1	0.8
Rape	1	0.8	Unspecified	16	13.3
Sexual Harrasment	4	3.3			
Total = 120 people					

Of the 120 people who died, as many as 33 people, or 27.5%, were defendants/convicts of narcotics cases.

Of the 18 death cases due to illness (6 of which are caused by respiratory disorders) are prisoners of narcotics cases. Meanwhile, the narcotic prisoners who committed suicide reached three cases. Correctional Facilities in Indonesia are predominantly inhabited by convicts of narcotics cases. The large number of detainees or prisoners of narcotics cases can be one important factor that led to high mortality rates among narcotics detainees. National data from the Directorate General of Corrections (Ditjenpas) in 2014 shows that the number of narcotics prisoners in Indonesia in 2014 was 56.326 people, of which half, or 24.691 people were imprisoned for using narcotics.^{xliv}

The level of health both physically and mentally from prisoners of narcotics cases should be noted. Their vulnerability to HIV, TB, and other comorbid diseases needs to be recognized and handled properly. Equally important is the handling of substances breakout condition that can cause psychological effects that increase the susceptibility of narcotic users to commit suicide.^{xlv} Therefore, the treatment of prisoners or detainees should also consider the

condition of the detainees/prisoners. For example, for a drug user trapped in a criminal case, the government should also ensure their rights to obtain necessary health services while undergoing the legal process.

We do not present gender analysis in the demography of these detainees because all news of the deaths we found affect men. This is an interesting point to explore, such as whether it means there are no female detainees who died during the year of 2016 or whether the media consciously chose not to report such issue.

CLOSING REMARK

The issue of death in detention for us is one of the issues that deserves attention and scrutiny because it can provide a picture of the reality of punishment nowadays. Here is the 'reality' reflected by the data that has been presented:

- The number of deaths inside detentions that is successfully documented in 2016 is 120 cases.
- The causes of death vary, but the majority are caused by illness, especially non-infectious diseases. The diseases found also varied, but it was significantly found many cases of respiratory diseases, i.e. as many as 19.3% of the total cases of death cause.
- There are quite a number of cases where the cause of death is unclear (19 cases). The majority of these unclear cases are caused by differences of opinions among various parties, for example the law enforcers state that the detainee was sick and then died but the family reported their suspicion after seeing wounds in the body of the detainee.
- There are indications of torture that lead to death in at least 4 cases.
- Other than the torture, murder accounted for 13 deaths, of which 12 cases were committed by fellow detainees, and 1 case was committed by civilians.
- At least 25 detainees committed suicide. Many cases where the reason for suicide is still a mystery. However, there are 5 cases in which mental disorders factor is suspected to be the cause of suicide.
- Most of dead detainees are found in the Correctional Facilities (63 cases) and most of them were detainees of narcotics cases (33 cases).

Overall, the high mortality rate in places of detention resulting from illness or suicide indicates the issue of fulfilment of the right to health, whether physical or psychological, for detainees/prisoners. Related to this, it should be realized that detainees need better healthcare. Adequate healthcare is not only physical health services but also mental health. The place of detention should also be able to give the detainees the right to recreation and to get entertainment to help with their physical and mental health, for example with sport activities.^{xlvi}

Meanwhile, the cases of murder and riots indicate that the right to live and right to be free from torture can still be violated in one of the places which, logically, is safer than other places because it is directly supervised by the Police, Attorney, Court, and the Directorate General of Corrections. The fact there are still murder cases also further underlines the importance of upholding the right to legal protection and the right to be free from torture for detainees/prisoners. In the end, it is important to be reminded that the purpose of the Indonesian State punishment is not merely to punish but also to develop and reintegrate perpetrators into their communities^{xlvii}, an effort that would be useless if the criminal perpetrator died before completing the sentence.

ENDNOTES

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